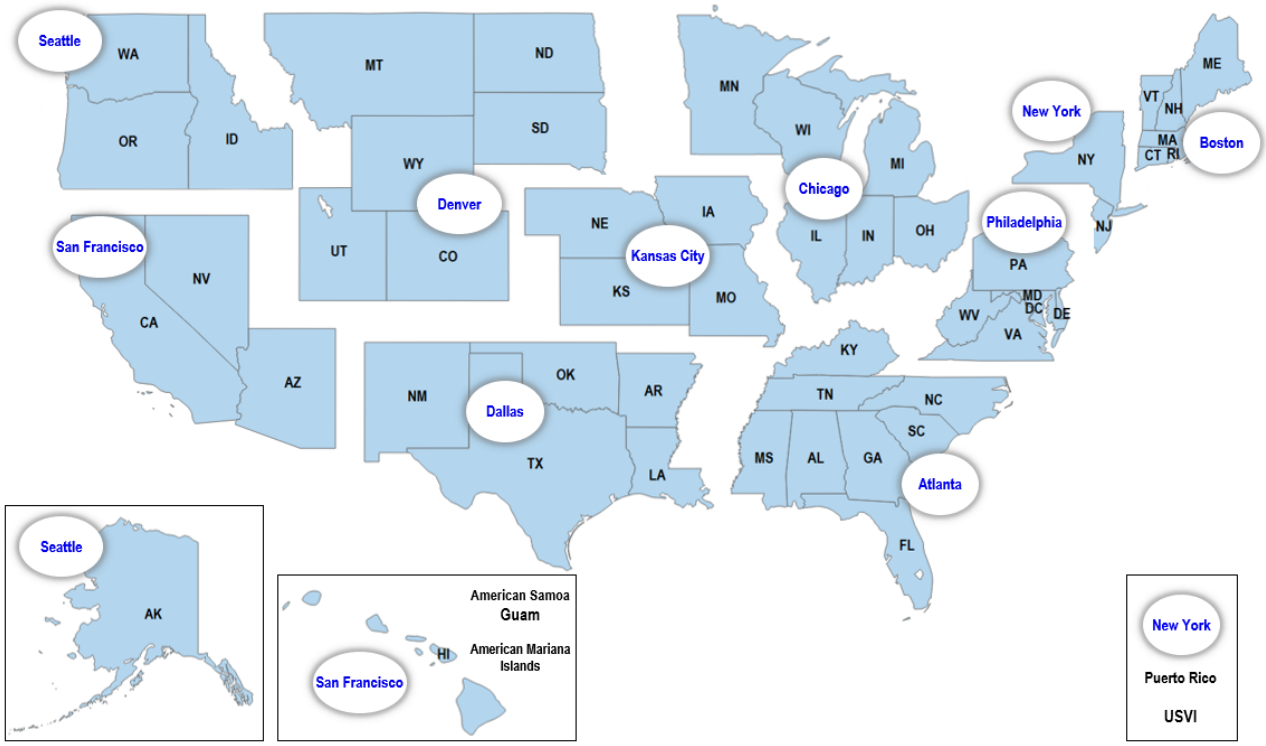
September 2026

CMPRP
Civil Money Penalty Reinvestment Program

CMS
CENTERS FOR MEDICARE & MEDICAID SERVICES

State CMP Reinvestment Projects Funded in CY 2025

Please click on a region to see the regional Branch's respective list of 2025 CMP-funded projects.



The information supplied in this report is provided by the relevant state agency; results are not validated by the Centers for Medicare & Medicaid Services. Previous approval and funding of a project does not guarantee future approval of a same or similar project.

State Civil Money Penalty Reinvestment Projects Funded in Calendar Year (CY) 2025
Boston Long-Term Care Location

Connecticut

CT CMP Funds Expended for Administrative Uses in CY 2025: $0.00
CT CMP Funds Expended for Emergency Uses in CY 2025: $0.00
CT Active CMP Funded Projects in CY 2025: 0

The state had no CMP-funded projects in calendar year 2025.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

State Civil Money Penalty Reinvestment Projects Funded in Calendar Year (CY) 2025
Boston Long-Term Care Location

Maine

ME CMP Funds Expended for Administrative Uses in CY 2025: $5,468.20
ME CMP Funds Expended for Emergency Uses in CY 2025: $0.00
ME Active CMP Funded Projects in CY 2025: 0

The state had no CMP-funded projects in calendar year 2025.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

State Civil Money Penalty Reinvestment Projects Funded in Calendar Year (CY) 2025
Boston Long-Term Care Location

Massachusetts

MA CMP Funds Expended for Administrative Uses in CY 2025: $167,823.00
MA CMP Funds Expended for Emergency Uses in CY 2025: $39,473.00
MA Active CMP Funded Projects in CY 2025: 0

The state had no CMP-funded projects in calendar year 2025.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

State Civil Money Penalty Reinvestment Projects Funded in Calendar Year (CY) 2025
Boston Long-Term Care Location

New Hampshire

NH CMP Funds Expended for Administrative Uses in CY 2025: $4.96

NH CMP Funds Expended for Emergency Uses in CY 2025: $0.00

NH Active CMP Funded Projects in CY 2025: 1

Project Title: Holy Cross Health Center

Unique Identifier: NH-1124-HCHC-1230

Project Duration: 12/01/2024 to 11/30/2025

Total Amount of CMP Funds Approved for this Project: $4,958.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $4,958.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) Advancing person-centered dementia care practices within the community.

b) To provide the highest quality of care with staff who have a deep understanding of the effect of dementia and employ empathy in their actions. Measures: Staff will use the CALM (Connect, Affect/Acknowledge Emotions, Listen, Mirror) approach (100% - direct observation), less resident refusals of activities of daily care (ADL) care (reduction of 5% - toileting record review), amount of food consumed by dementia resident will increase (>80% consumption of meals), and staff retention (5% decrease in reduction). Measurements are obtained by direct observation or record review, and staff retention is tracked by Human Resources.

c) Residents with dementia will be taken care of by staff with a better understanding of resident living with dementia and staff will have the tools to deal with behaviors associated with dementia.

d) Develop a community who is knowledgeable about dementia and staff, residents, and volunteers who employ empathy with the understanding of dementia.

e) Not applicable

Funded Entity(ies):

Holy Cross Health Center

Results of the Project:

Interim Results: Three staff members were trained to be coaches. Sixty staff members have been trained as well as 20 volunteers, contractors, nursing students, family, and the residents. Staff report they have new tools to address behaviors caused by dementia and can identify how and when to reapproach or redirect.

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Rhode Island

RI CMP Funds Expended for Administrative Uses in CY 2025: $0.00

RI CMP Funds Expended for Emergency Uses in CY 2025: $0.00

RI Active CMP Funded Projects in CY 2025: 3

Project Title: Monthly Horticulture Therapy

Unique Identifier: RI-0125-SEH-1276

Project Duration: 07/01/2025 to 06/30/2026

Total Amount of CMP Funds Approved for this Project: $5,000.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $0.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The project aims to provide nursing home residents with a unique, meaningful opportunity to engage in an activity that is both recreational and therapeutic to provide increased socialization amongst residents, decrease isolation and expand opportunities for cognitive stimulation which improve mental health.

b) Twelve residents participated in the *Monthly Horticulture Therapy* program. The program will combine residents from two buildings. The project will track attendance.

c) Therapeutic horticulture engages the senses providing cognitive and sensory stimulation improves motor skills and instills a sense of independence and accomplishment.

d) Expands the types of therapeutic activities offered. Therapeutic horticulture triggers memories, encourages reminiscing and reduces feelings of stress and anxiety, improving the overall atmosphere. It also creates a positive opportunity for residents and staff to interact.

e) Not applicable

Funded Entity(ies):

Saint Elizabeth Home

Results of the Project:

Interim Report: Attendance has yet to achieve goal of 12 residents. Staff actively encourage participation in the activity. The goal of 12 residents is still the target. Attendance Report: Six sessions, 10 residents participated in each session, one through five. December's attendance was impacted by cold and flu. Only seven residents were well enough to participate. A small number of residents required direct one-on-one assistance. This assistance provided by the nursing home staff enhanced the overall participation and full

Rhode Island

RI CMP Funds Expended for Administrative Uses in CY 2025: $0.00
RI CMP Funds Expended for Emergency Uses in CY 2025: $0.00
RI Active CMP Funded Projects in CY 2025: 3

engagement of the group. Residents demonstrated a sense of accomplishment and pride in their completed floral pieces. Overall, the workshop successfully supported emotional well-being, social connection, and creative expression.

Project Title: Relias Training Platform

Unique Identifier: RI-0125-VSHL-1277

Project Duration: 06/01/2025 to 05/31/2026

Total Amount of CMP Funds Approved for this Project: $5,000.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $0.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The project aims to improve resident care, reduce noncompliance by increasing staff competency across all departments utilizing a comprehensive training platform.

b) The project aims to achieve zero G-Level tags, zero Immediate Jeopardy findings, 100% staff participation, and 100% of staff receive passing scores on competency exams on a monthly, quarterly, and annual basis.

c) A team of better qualified and skilled personnel will treat residents.

d) Overall improvement in quality care. Training platforming tests staff competency to ensure information retention and incorporation into work performance.

e) The training program exclusively targets all personnel, across all departments.

Funded Entity(ies):

Violet Skilled Nursing Facility (SNF) Holdco LLC

Results of the Project:

Interim results: 100% of staff employed as of December 26, 2025, enrolled in training scheduled for kick off February 6, 2026. Participation and the percentage of staff receiving passing scores on competency exams will be reported at the next update. Pre- and post-training survey results will be reported following the state

Rhode Island

RI CMP Funds Expended for Administrative Uses in CY 2025: $0.00

RI CMP Funds Expended for Emergency Uses in CY 2025: $0.00

RI Active CMP Funded Projects in CY 2025: 3

survey conducted after June 2026. Survey goal is to achieve zero G-Level tags and zero Immediate Jeopardy findings.

Project Title: Memory Care Excellence

Unique Identifier: RI-0125-SKNR-1278

Project Duration: 01/01/2025 to 07/01/2025

Total Amount of CMP Funds Approved for this Project: $5,000.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $0.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The project aims to establish a sustainable training program for staff to become a CDP (Certified Dementia Practitioner) and a facility to achieve the Memory Care Seal of Excellence as means to improve resident outcomes, improve staff satisfaction and retention.

b) Goals and objectives: 1. Offer certification to 100% of eligible employees who work on the memory care unit. 2. Offer CDP certification to all new hires utilizing the train the trainer program. 3. Certify no less than 15 staff members as CDP.

c) Better trained staff improves resident care.

d) Increased competency of staff, improved retention.

e) Primary target is memory care unit staff.

Funded Entity(ies):

South Kingstown Nursing and Rehabilitation

Results of the Project:

Two training sessions were held in November 2025. The initial course was offered to the 18 staff members primarily assigned to the memory care population. All 18 staff were certified as Dementia Practitioners. The second session was a train-the-trainer session. South Kingstown Nursing and Rehabilitation Center now

Rhode Island

RI CMP Funds Expended for Administrative Uses in CY 2025: $0.00
RI CMP Funds Expended for Emergency Uses in CY 2025: $0.00
RI Active CMP Funded Projects in CY 2025: 3

has a trainer qualified to teach and certify Certified Dementia Practitioners. This is a key step in achieving and maintaining the Memory Seal of Excellence. The next training is scheduled for April 2026.

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State Civil Money Penalty Reinvestment Projects Funded in Calendar Year (CY) 2025
Boston Long-Term Care Location

Vermont

VT CMP Funds Expended for Administrative Uses in CY 2025: $0.00
VT CMP Funds Expended for Emergency Uses in CY 2025: $0.00
VT Active CMP Funded Projects in CY 2025: 0

The state had no CMP-funded projects in calendar year 2025.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

New Jersey

NJ CMP Funds Expended for Administrative Uses in CY 2025: $68,105.40

NJ CMP Funds Expended for Emergency Uses in CY 2025: $0.00

NJ Active CMP Funded Projects in CY 2025: 5

Project Title: The It's Never Too Late (iN2L) New Jersey iNSIGHT Project Extension

Unique Identifier: NJ-0323-INL-1088

Project Duration: 03/28/2023 to 03/27/2026

Total Amount of CMP Funds Approved for this Project: $489,700.71

Total Amount of CMP Funds Expended During CY 2025 for this Project: $109,796.32

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of the project is to reduce social isolation and improve the quality of life for nursing home (NH) residents in nine skilled nursing facilities.

b) The project aims to create individual profiles for 20% of residents over a period of three years; increase the participation of residents involved in group activities using engagement technology by 20%; and increase the participation of residents in individualized activities using engagement technology by 20%.

c) The project will benefit NH residents by reducing social isolation and improving their quality of life, utilizing virtual computer technology to address their life enrichment needs and individual interests, while connecting them to their families, friends, caregivers, health professionals, and the world without leaving their homes.

d) The project will benefit the NH by assisting staff in efforts to engage residents in participation and reduce social isolation among residents.

e) Not applicable

Funded Entity(ies):

It's Never Too Late (iN2L)

Results of the Project:

The interim results for this project were reported at the last quarterly meeting on December 4, 2025, with the period ending November 30, 2025. For the nine (9) nursing homes in the extension project, the resident profile metric of 20% completed by the end of the three years is expected to be met. To date, a total of 78% of the communities met the target, with an average of 47% resident profiles completed. The second goal of

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New Jersey

NJ CMP Funds Expended for Administrative Uses in CY 2025: $68,105.40
NJ CMP Funds Expended for Emergency Uses in CY 2025: $0.00
NJ Active CMP Funded Projects in CY 2025: 5

increasing participation in group activities by using engagement technology by 20% is close to that target at a 13% increase from the first quarter to the eleventh quarter.

Project Title: Furry Friends Project

Unique Identifier: NJ-0824-AGI-1190

Project Duration: 08/14/2024 to 08/13/2025

Total Amount of CMP Funds Approved for this Project: $312,864.83

Total Amount of CMP Funds Expended During CY 2025 for this Project: $38,780.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The project aims to improve the quality of life of nursing home residents in 66 skilled nursing facilities and reduce the incidence of depressive symptoms through the use of robotic pets, bringing joy, fun, play, and comfort.

b) The project aims to achieve a 20% improvement in the quality of life of nursing home residents living with dementia and reduce the incidence of depressive symptoms by 20%.

c) The project will benefit nursing home residents by using robotic pets to lessen the behavioral and psychological symptoms of dementia.

d) The nursing home will benefit from use of nonpharmacological interventions to address the decreased coping skills and negative reactions to environmental stimuli that challenge people undergoing cognitive decline.

e) Not applicable

Funded Entity(ies):

Ageless Innovation

Results of the Project:

The final results for this project were reported at the last quarterly meeting on September 9, 2025, with the period ending August 13, 2025. For the 65 nursing homes participating in the project, the effectiveness of the project was to be analyzed through a Resident Mood/Quality of Life Assessment by Staff outcome

New Jersey

NJ CMP Funds Expended for Administrative Uses in CY 2025: $68,105.40
NJ CMP Funds Expended for Emergency Uses in CY 2025: $0.00
NJ Active CMP Funded Projects in CY 2025: 5

survey. The final results showed that observations of positive emotional status of residents improved by 31%, while the depressive symptoms increased by 16%. Despite the latter survey results, the positive and uplifting stories of personal joy presented over the months were clearly impressive and impactful.

Project Title: SNFClinic

Unique Identifier: NJ-0824-LTCC-1194

Project Duration: 08/14/2024 to 08/13/2027

Total Amount of CMP Funds Approved for this Project: $74,700.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $14,940.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of the project is to address the need in five skilled nursing facilities for care-focused training and resources.

b) The project will achieve a 30% improvement in quality measures (QM) used by CMS to calculate the QM star rating on the CMS Care Compare website. Additionally, 50% of the participating nursing homes are expected to improve their QM star ratings.

c) The project will benefit nursing home residents by training staff and providing technical assistance for the implementation of quality improvement programs, which relate to improvements in the overall quality of care provided to residents.

d) The project will benefit the nursing home by improving the QM star ratings and providing clinical nursing skills training to staff.

e) Not applicable

Funded Entity(ies):

Long-Term Care Consultants, LLC

Results of the Project:

The interim results for this project were reported at the last quarterly meeting on December 11, 2025, with the period ending November 30, 2025. Due to CMS communication and data freezes, the measure periods

New Jersey

NJ CMP Funds Expended for Administrative Uses in CY 2025: $68,105.40
NJ CMP Funds Expended for Emergency Uses in CY 2025: $0.00
NJ Active CMP Funded Projects in CY 2025: 5

are delayed. For star ratings ending June 30, 2025, the goal was not met; however, four of the five participating nursing homes started with a baseline five stars. One nursing home improved from a baseline of three stars to four stars, so only 20% of the participating nursing homes improved. The second goal, using quality measures ending March 30, 2025, was met with an average 44% improvement in the quality measures.

Project Title: Soaringwords

Unique Identifier: NJ-0924-SRW-1213

Project Duration: 08/01/2024 to 07/30/2025

Total Amount of CMP Funds Approved for this Project: $130,000.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $60,000.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The project will provide 26 skilled nursing facilities with workshops for staff, residents, and families that are high-quality, empirically sound, and content-based on significant positive psychology discoveries.

b) The project will strengthen resident resilience and well-being and sense of belonging. It will also strengthen family members' resilience and well-being. Finally, it will strengthen resilience, productivity, and empathy in health care professionals and their team members. These objectives will be assessed by use of post-workshop surveys.

c) The project will benefit nursing home residents by increasing their resilience, gratitude, optimism, pride, agency, generativity, and hopefulness, as well as decreasing loneliness, isolation, worry, and stagnation.

d) The project will benefit the nursing home by fortifying the resilience and well-being of staff.

e) The other target audience besides nursing home residents and staff is the family members of the residents, who are invited to participate in the workshops.

New Jersey

NJ CMP Funds Expended for Administrative Uses in CY 2025: $68,105.40

NJ CMP Funds Expended for Emergency Uses in CY 2025: $0.00

NJ Active CMP Funded Projects in CY 2025: 5

Funded Entity(ies):

Soaringwords

Results of the Project:

The final results for this project were reported at the last quarterly meeting on September 8, 2025, with the period ending July 30, 2025. For the 26 nursing homes participating in the project, a total of 864 residents and staff completed the workshops, and 225 individuals attended training sessions, for a total of 1089 interventions. Across all four quarters of this program, greater than 83% responded positively to metrics 1) discovered and appreciated my strengths; 2) enjoyed learning new things; and 3) experienced a heightened sense of community, connection and belonging. Across all 30 of the survey questions, no less than 76% and up to 100% of the survey's responses were positive, with an average of 90.6% and median 92% positive results.

Project Title: Dementia Live®: A Foundational Experiential Education Tool Leading to Competent and Empathetic Care Partners for People Living with Dementia

Unique Identifier: NJ-1224-GVPC-1247

Project Duration: 02/01/2025 to 01/31/2026

Total Amount of CMP Funds Approved for this Project: $9,916.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $9,916.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of this project is to enhance the standard of care for current and future residents at Peace Care St Anne's and Peace Care St. Joseph's who are living with dementia.

b) The project will achieve its purpose through the implementation of *Dementia Live*, an immersive educational initiative designed to simulate cognitive and sensory impairments, offering participants firsthand insight into the challenges of living with dementia.

c) The project will benefit nursing home residents by fostering competence and empathy among participants to enhance the quality of care provided to individuals living with cognitive impairment.

New Jersey

NJ CMP Funds Expended for Administrative Uses in CY 2025: $68,105.40
NJ CMP Funds Expended for Emergency Uses in CY 2025: $0.00
NJ Active CMP Funded Projects in CY 2025: 5

d) The project will benefit the nursing home by advancing employee knowledge and skills to improve care partner interactions and equipping the nursing homes with internal resources to sustain quality dementia training for all stakeholders.

e) The target audience is the care partners providing care to residents with dementia.

Funded Entity(ies):

Peace Care Corporation

Results of the Project:

The final results for this project were reported for the last quarterly meeting on January 27, 2026, with the period ending January 6, 2026. For the two (2) nursing homes participating in the project, the goals were to achieve a 10% reduction in reported resident stress reaction in four Minimum Data Set (MDS) assessed behaviors: E0200A Physical Behavioral Symptoms; E0200B Verbal Behavioral Symptoms; 0200C Other Behavioral Symptoms Not Directed Toward Others, and E800 Rejection of Care. This goal was met. Comparing the baseline with the final, there was a 14% reduction in combined behavioral symptoms.

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State Civil Money Penalty Reinvestment Projects Funded in Calendar Year (CY) 2025
New York Long-Term Care Location

New York

NY CMP Funds Expended for Administrative Uses in CY 2025: $0.00
NY CMP Funds Expended for Emergency Uses in CY 2025: $0.00
NY Active CMP Funded Projects in CY 2025: 0

The state had no CMP-funded projects in calendar year 2025.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Delaware

DE CMP Funds Expended for Administrative Uses in CY 2025: $14,439.74

DE CMP Funds Expended for Emergency Uses in CY 2025: $0.00

DE Active CMP Funded Projects in CY 2025: 3

Project Title: Dementia Live: A Foundational Experiential Education Tool Leading to Competent and Empathetic Care Partners for People Living with Dementia

Unique Identifier: DE-0824-AGE-1192

Project Duration: 04/10/2025 to 04/09/2026

Total Amount of CMP Funds Approved for this Project: $59,659.83

Total Amount of CMP Funds Expended During CY 2025 for this Project: $56,980.40

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) This purpose of this project is to improve the quality of care for long-stay nursing home residents who are living with dementia. This will be achieved through *Dementia Live,* an experiential learning program that simulates cognitive and sensory impairment, giving participants real-life experience living with dementia.

b) The designated *Dementia Live* coach training participants will be prepared to conduct the in-house *Dementia Live* simulation experience for employees, measured by a score, with a target goal of at least 80%, on the training competency assessment. This will be calculated through the ATI (AGE-u-cate Training Institute) Learning Management System (LMS). Staff taking the REVEAL Aging courses will achieve an average competency score, with a target goal of at least 75%. ATI's Learning Management System will measure this. The *Dementia Live* project also intends on decreasing the number of instances of stress reactions or rejection of care. This will be measured through staff reports with a goal of at least a 10% reduction in the following: physical, verbal, and other stress reaction; instances of rejection of care.

c) *Dementia Live*® is a training strategy to develop confident, skilled, and empathetic care partners. A dementia-capable care team helps ensure higher positive outcomes in the quality of life and care of persons living with dementia. Residents will benefit from competent and empathetic care partners who listen with understanding and interest so that residents feel heard, cared for, and validated; promote an environment of love, comfort, and connection so that residents enjoy greater well-being and positive feeling; step into the world of people living with dementia so that residents experience more positive interactions; and validate the feelings and needs of persons with dementia so that residents exhibit fewer dementia-related behaviors.

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Delaware

DE CMP Funds Expended for Administrative Uses in CY 2025: $14,439.74
DE CMP Funds Expended for Emergency Uses in CY 2025: $0.00
DE Active CMP Funded Projects in CY 2025: 3

d) Nursing homes benefit by helping staff experience what residents of dementia feel with their conditions. This leads to greater empathy and better caregiver skills for the staff. Better caregiver skills can lead to less behavioral or stressful incidents occurring for nursing home residents, thus leading to an overall improved quality of care for nursing homes.

e) Not applicable.

Funded Entity(ies):

AGE-u-cate Training Institute

Results of the Project:

Interim Results: Thirteen progress reports have been submitted to date. Nine respondents reported "good" progress, while four indicated "minimal" progress. All 11 participating certified nursing facilities (CNFs) have received the Dementia Live Gear Pack, access to the online Dementia Live Coach Training, unlimited REVEAL Aging course access, and entry to the Dementia Live Coach Resources portal. Implementation support has been provided through email communication, newsletters, a Resource Guide, and bi-monthly virtual meetings. Progress on the REVEAL Aging courses and resident outcome measures is ongoing, with insufficient data currently available for full evaluation. As of January 16, 2026, four of the eleven reporting facilities have shown reductions in staff-reported physical stress reactions, verbal stress reactions, and rejection of care, nearing or achieving the target 10% decrease. The vendor continues outreach to facility administrators and is supporting sustainability efforts to promote training completion.

Project Title: Instructional Virtual Workshops: RAI/MDS 3.0 Training

Unique Identifier: DE-1224-DHCQ-1255

Project Duration: 07/09/2025 to 12/02/2025

Total Amount of CMP Funds Approved for this Project: $7,500.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $7,500.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of this training is to provide certified nursing homes and surveyors the most recent updates on the Minimum Data Set (MDS) 3.0, section by section; detail the guidelines for capturing

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Delaware

DE CMP Funds Expended for Administrative Uses in CY 2025: $14,439.74
DE CMP Funds Expended for Emergency Uses in CY 2025: $0.00
DE Active CMP Funded Projects in CY 2025: 3

activities of daily living (ADLs); describe coding, management, and care of pressure ulcers per the Resident Assessment Instrument (RAI) User's Manual; and, how to apply RAI instructions to develop Care Area Assessments. The training will also discuss the importance of therapy services and documentation.

b) The goal of this project is to provide long-term care (LTC) facility staff and Division of Health Care Quality (DHCQ) compliance nurses/surveyors with training on the most recent updates on MDS 3.0. This survey will assess the overall quality of the course, the presenter, and how well the objectives were met. Key objectives that will be measured via Likert scale include the following: Verbalize building blocks of the RAI process, State the requirements to complete the MDS, Code and evaluate the accuracy and competency of the MDS assessment, Interpret and utilize the Care Area Assessments (CAA), and verbalize the framework of CAA writing. The Likert scale portion of the survey will quantitatively measure project goals and objectives through an average score calculated from five questions. The average score ranges from 1 to 5, with 5 being the highest rating. The quantifiable goal of this project is for an average score of at least 4/5 (80%) to be measured for all participants.

c) Knowledge and application of the RAI help nursing home staff to gather definitive information on a resident's strengths and needs, which must be addressed in an individualized care plan. One of the three components of the RAI is the MDS. The items in the MDS (common definitions and coding categories) standardize communication about resident problems and conditions within and between nursing homes. Utilizing sound mechanisms to inform, identify strengths, and intervene when there are problems are requirements for providing quality care to residents.

d) MDS training will benefit nursing homes by providing both beginners and seasoned nursing home staff with knowledge on topics that improve the overall quality of care being implemented. For beginner participants, this knowledge allows newer trainees to experience how to assess, implement, and evaluate quality of care and services with respect to patient specific strengths and needs. For seasoned participants, attendance of this training allows staff to further reinforce their knowledge on the MDS 3.0 while also taking notice of any revisions/updates in data collection and in assessing, implementing, and evaluating quality of care services to residents.

e) Not applicable.

Funded Entity(ies):

Delaware Division of Health Care Quality

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Delaware

DE CMP Funds Expended for Administrative Uses in CY 2025: $14,439.74
DE CMP Funds Expended for Emergency Uses in CY 2025: $0.00
DE Active CMP Funded Projects in CY 2025: 3

Results of the Project:

Final Project Report: For the summer, July 9, 2025, through July 10, 2025, "Seasoned" and "Beginner" two-day virtual sessions, “Seasoned” attendees recorded an average score of 4.6 on learning objectives on July 9, 2025, with one indicating a poor score and five an excellent score. This average score of 4.6 reflected a strong satisfaction with the content and clarity of instruction among “Seasoned” attendees. On average 85% of “Seasoned” attendees, indicated in their evaluations via a Likert scale survey range from “Strongly Disagree” to “Strongly Agree” that they strongly agreed on the following: presentations were well organized, teaching methods were effective, lecture content aligned with objectives, session covered sufficient information, handouts and slides were helpful, educational objectives were met, and virtual environment was conductive to learning. For the “Beginner” attendees, an average score of 5.0 was recorded for comprehension on learning objectives on July 10, 2025. This average score of 5.0 reflected an excellent satisfaction with the content and clarity of instruction among “Beginner” attendees. On average, 91% of “Beginner” attendees indicated in their evaluations via a Likert scale survey that they strongly agreed on the following: presentations were well organized, teaching methods were effective, lecture content aligned with objectives, session covered sufficient information, handouts and slides were helpful, personal educational objectives were met, and that the learning environment was conductive to engagement. For the fall/winter, November 18, 2025, and December 2, 2025, "Seasoned" and "Beginner" 2-day virtual sessions, “Seasoned” attendees recorded an average score of 4.88 on learning objectives on December 2, 2025, with one indicating a poor score and five an excellent score. This average score of 4.88 reflected a strong satisfaction with the content and clarity of instruction among “Seasoned” attendees. On average, 83% of “Seasoned” attendee responses indicated via a Likert scale survey range of “Strongly Disagree” to “Strongly Agree” that attendees strongly agreed on the following: presentations were well organized, teaching methods were effective, lecture content aligned with objectives, session covered sufficient information, handouts and slides were helpful, educational objectives were met, and virtual environment was conductive to learning. For the “Beginner” attendees, an average score of 4.88 was recorded for comprehension on learning objectives on 11/18/25. This average score of 4.88 reflected an excellent satisfaction with the content and clarity of instruction among “Beginner” attendees. On average, 76% of “Beginner” attendee responses via a Likert scale survey indicate that attendees strongly agreed on the following: presentations were well organized, teaching methods were effective, lecture content aligned with objectives, session covered sufficient information, handouts and slides were helpful, personal educational objectives were met, and that the learning environment was conductive to engagement. Overall, these responses for both summer and winter sessions are indicative of successful training.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Delaware

DE CMP Funds Expended for Administrative Uses in CY 2025: $14,439.74

DE CMP Funds Expended for Emergency Uses in CY 2025: $0.00

DE Active CMP Funded Projects in CY 2025: 3

Project Title: Wound Care Training

Unique Identifier: DE-0725-DHCQ-1368

Project Duration: 10/09/2025 to 10/09/2025

Total Amount of CMP Funds Approved for this Project: $8,156.41

Total Amount of CMP Funds Expended During CY 2025 for this Project: $8,156.41

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose is to provide CMS (Centers of Medicare and Medicaid) certified nursing home nurses and surveyors training on the most recent updates in wound care so that they can ensure that wounds are appropriately assessed and monitored daily until viewed weekly by a consultant wound care nurse or physician. The training also provides a review of current standards for skin and wound care assessment, treatment, evaluation, and documentation.

b) The goals of this project, which are anticipated to benefit both facility residents and nursing staff, are as follows: 1) Improving the sense of well-being among the residents with wounds; 2) Improving the quality of wound care; 3) Prevention of complications; 4) Promoting and improving wound healing; 5) Reducing Hospitalization; 6) Empowering the staff; 7) Improving patient and family satisfaction; and 8) Improving the collaboration between disciplines. After the training, project goals will be measured via a survey that includes Likert scale questions. Questions that can be measured quantitatively will total to a maximum score of 17. This training hopes to obtain an average score of at least 80% (13.6/17) from all participants who complete the post-training survey.

c) Nursing home staff knowledge and application of current wound care practices will enable nursing home residents with wounds to heal more quickly without adverse complications, additional treatments, or hospitalization.

d) The Division of Health Care Quality (DHCQ) will invite the provider community (long-term care (LTC) facility nursing staff) to participate in this training. DHCQ compliance nurses/surveyors will also take part in the training to inform their observations of facility wound care practices during survey. By the end of the training attendees will be able to: understand, define, and identify pressure injuries and lower extremity ulcers, state the various wound dressing categories and treatment modalities, articulate the nutritional needs of residents with wounds and associated lab studies important to wound healing, understand the legal and professional responsibilities in wound care, and complete

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On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Delaware

DE CMP Funds Expended for Administrative Uses in CY 2025: $14,439.74
DE CMP Funds Expended for Emergency Uses in CY 2025: $0.00
DE Active CMP Funded Projects in CY 2025: 3

the wound identification and assessment exercise with between 80-100% accuracy. Overall, this would improve the knowledge of wound care treatment for nursing home staff, allowing for enhanced delivery of quality care.

e) Not applicable

Funded Entity(ies):

Delaware Division of Health Care Quality (DHCQ)

Results of the Project:

The project received an average evaluation score of 97% from 36 participants. Feedback on the wound care training was highly positive: 97% agreed that the lab component enhanced their understanding of the lectures. Thirty-one participants rated the program as “excellent” (five of five), and the remaining five rated it “very good” (four of five). Similarly, 30 participants rated the program’s ability to meet its objectives as “excellent,” while six rated it “very well.” Speaker expertise was also rated highly, with 32 participants indicating “extremely knowledgeable” and four indicating “very knowledgeable.” These results demonstrate that the project successfully delivered an effective wound care training program for nursing staff with a score of 97% being well above the goal of 80%. Challenges included participant retention after project delivery and venue-related costs. Lessons learned suggest including a post-implementation measure to assess the training’s long-term impact on quality of care in nursing homes and strengthening participant outreach to improve retention, as only 12 of the original 30 Delaware long-term care participants remained engaged (with DHCQ (Division of Health Care Quality) nurses/surveyors comprising the rest of the final group).

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

State Civil Money Penalty Reinvestment Projects Funded in Calendar Year (CY) 2025
Philadelphia Long-Term Care Location

District of Columbia

DC CMP Funds Expended for Administrative Uses in CY 2025: $0.00
DC CMP Funds Expended for Emergency Uses in CY 2025: $0.00
DC Active CMP Funded Projects in CY 2025: 0

The state had no CMP-funded projects in calendar year 2025.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Maryland

MD CMP Funds Expended for Administrative Uses in CY 2025: $74,389.97

MD CMP Funds Expended for Emergency Uses in CY 2025: $0.00

MD Active CMP Funded Projects in CY 2025: 1

Project Title: Dementia Live: A Foundational Experiential Education Tool Leading to Competent and Empathetic Care Partners for People Living with Dementia in Maryland Certified Nursing Communities

Unique Identifier: MD-0824-AGE-1191

Project Duration: 01/01/2025 to 02/01/2026

Total Amount of CMP Funds Approved for this Project: $49,888.45

Total Amount of CMP Funds Expended During CY 2025 for this Project: $45,355.49

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) Purpose: Provide dementia simulation and training for nursing home (NH) staff and resident families. The goal of this project is to enhance the standard of care for long-term nursing home residents in Maryland who are living with dementia. Nursing home staff will be led through *Dementia Live* by designated facility coaches who undergo a comprehensive 6-hour online training program to become certified *Dementia Live* coaches. Units of training are administered for each facility.

b) Goals and objectives: To enhance the standard of care provided to long term NH residents living with dementia in nine skilled nursing facilities (SNFs). The project aims to advance employee knowledge and grow skills to improve care partner interactions, as well as equip the NHs with internal resources to sustain quality dementia training for all stakeholders.

c) Benefit to NH residents: Training will increase quality of care and life for NH residents with dementia. This will be achieved through best practice implementation in care protocols.

d) Benefit to the NH: *Dementia Live* participants gain access to valuable tools for enhancing communication skills and refining care approaches to align with dementia care best practices. To ensure the sustainability of the program, facility-embedded *Dementia Live* coaches will receive ongoing guidance and support from AGE-u-cate throughout the project. Additionally, participating communities will receive redemptions for AGE-u-cate's one-hour online course, "*Foundations of Dementia Care*, "which expands upon the core teachings of *Dementia Live*. This supplementary course covers a range of topics, including recognizing challenges faced by individuals with dementia, managing symptoms and stress reactions, effective communication strategies, fostering engagement, adopting a person-first approach to care, and collaborating with families.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Maryland

MD CMP Funds Expended for Administrative Uses in CY 2025: $74,389.97
MD CMP Funds Expended for Emergency Uses in CY 2025: $0.00
MD Active CMP Funded Projects in CY 2025: 1

e) Target audiences beyond NH residence: The training is also accessible to caregivers and families of residents with dementia. This will improve understanding of their relatives' conditions and increase quality of life and care.

Funded Entity(ies):

AGE-u-cate Training Institute

Results of the Project:

AGE-u-cate Training Institute has not had good results with including the REVEAL Aging courses. They will evaluate this for future projects moving forward. The vendor indicates virtual options is a potential limitation to their intervention and would need to include travel costs for future initiatives of this kind. The project shows success from the two facilities that delivered staff training. Both of these facilities reported an impact on the residents. In addition, these facilities reported impact on the staff by being more aware and prepared of ways to interact with people living with dementia. For concrete project deliverables, all nine participating certified nursing facilities (CNFs) have received the following: Dementia Live Gear Pack, Access to the online Dementia Live Coach training, unlimited access to the REVEAL Aging courses; *Foundations of Dementia Care, Preventing and Responding to Stress Reactions, Cultivating Empathy*. Coaches who completed training have access to "Dementia Live Coach Resources" on the AGE-u-cate Training Institute website portal. Guided implementation through email communications, newsletters, a resource guide, and bi-monthly implementation virtual meetings. AGE-u-cate diligently tried to reach contacts associated with the nine participating facilities by email and phone calls. The vendor provided a resource guide that put all the information in one spot and hosted five implementation virtual support meetings in 2025 on March 20th, May 15th, July 15th, September 18th, and November 20th. Access to the online Coach Resources portal was made accessible to the eleven individuals who completed the Dementia Live Coach training. Coaches also received AGE-u-cate's monthly newsletter, invitations to attend our monthly coach boot camp, quarterly Dementia Live Coach Chats, and free webinars. The vendor reports that the majority of trained coaches did not use these resources during the award period. One facility underwent a change in ownership and chose not to extend renewal. Other participants have been offered renewal at a discounted rate.

State Civil Money Penalty Reinvestment Projects Funded in Calendar Year (CY) 2025
Philadelphia Long-Term Care Location

Pennsylvania

PA CMP Funds Expended for Administrative Uses in CY 2025: $0.00
PA CMP Funds Expended for Emergency Uses in CY 2025: $0.00
PA Active CMP Funded Projects in CY 2025: 0

The state had no CMP-funded projects in calendar year 2025.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Virginia

VA CMP Funds Expended for Administrative Uses in CY 2025: $0.00

VA CMP Funds Expended for Emergency Uses in CY 2025: $0.00

VA Active CMP Funded Projects in CY 2025: 20

Project Title: Reading2Connect®: A One-of-a-Kind Program to Enhance the Social-Emotional Wellbeing of Long-Stay Residents Through the Power of Age/Dementia-Friendly Books

Unique Identifier: VA-0522-AGE-954

Project Duration: 11/01/2022 to 06/30/2025

Total Amount of CMP Funds Approved for this Project: $445,070.65

Total Amount of CMP Funds Expended During CY 2025 for this Project: $36,374.24

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The project aims to train and certify staff to implement *Reading2Connect*®, a program centered on books adapted for adults living with dementia. *Reading2Connect*® is a resident-centered and resident-directed activity that involves reading independently and collaborating with the facility's Life Enrichment programs.

b) Goal #1: increase *Reading2Connect*® programming in 30 skilled nursing facilities (SNFs) and train up to three staff from each facility to administer the program. Objective #1: SNF staff participating in training will achieve a score of at least 80% on the competency assessment. Objective #2: 70% of SNF staff receiving the training will demonstrate knowledge, skill, and confidence per post-training learner feedback. Goal #2: alleviate emotional distress and elevate the well-being of SNF residents living with dementia. Objective #1: Quarterly questionnaires completed by staff will measure frequency of resident participation in a three-month period (goal: 60% (often), frequency of observing positive responses from resident participants (goal: 60% (often), and percentage of residents demonstrating an increased interest in participating in activities (goal: 30%).

c) The project should benefit the residents by addressing the seven dimensions of wellness as identified by the International Council on Active Aging: socially by providing opportunities and support for authentic conversation; emotionally by enabling fun, self-affirming, autonomous experiences; intellectually by reviving memory, language, and thinking skills; vocationally by fostering self-directed experiences and opportunities to initiate, lead, and help others; spiritually by offering books with religious and devotional content; environmentally by promoting inclusion and diversity with culturally specific book content; and physically by keeping residents awake and participatory in unscripted, spontaneous activities.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Virginia

VA CMP Funds Expended for Administrative Uses in CY 2025: $0.00
VA CMP Funds Expended for Emergency Uses in CY 2025: $0.00
VA Active CMP Funded Projects in CY 2025: 20

d) The participating facilities will benefit from increased resident and staff engagement.

e) Nursing facility staff who are trained to facilitate *Reading2Connect®.*

Funded Entity(ies):

AGE-u-cate Training Institute

Results of the Project:

Goals and Objectives, Outcomes, Deliverables, Successes, and Sustainability: Sixteen of the 29 participating skilled nursing facilities (SNFs) submitted at least one outcomes report to AGE-u-cate. Twelve of these submitted more than one report, with two submitting five reports since the beginning of the project. Based on these reports, approximately 874 Virginia nursing home residents participated in *Reading2Connect*, and 318 of these residents showed an increased interest in participating in activities (36%). This exceeded the expected result of 30%. Another notable finding is that 76% of the time, the facilities report that they are using books often (versus sometimes or never). This also exceeded the expected result of 60%. Of the staff trained in *Reading2Connect,* 100% scored at least 80% on the competency assessment and 100% of participants demonstrated knowledge, skill and confidence per the post trainer learner feedback following the practicum, exceeding the goal of 70%. The subjective feedback about this project was wonderful and continued to reinforce that when facilities introduce this program it is well received. Like any program, the amount of interest and energy put forth by the staff inspires the acceptance and enjoyment of the residents. Offering these books occasionally will not have the same impact as being offered often. In fact, the goal is to have the books available to the residents, families, and staff 100% of the time. But many SNFs find this difficult to accomplish due to space limitation or security concerns. Challenges and Lessons Learned: *Reading2Connect* demonstrated itself to be a valuable and effective program for engaging residents, promoting independence, autonomy, and encouraging retained abilities, among other things. The first lesson the project team identified was that the onsite practicum is essential for launching the program on the right foot and inspiring the staff and showing them all the various ways that the program can be utilized. This is a program that someone must see in action to believe how well it works, because many people believe that people with dementia can't read. However, the funding restrictions do not allow for the onsite practicum, and the lesson learned may be moot. The second lesson the project team identified is that a three-year project is difficult to sustain a high level of engagement. It doesn't seem feasible to lock a SNF into the same project for three years. It was difficult getting the participants to be in regular contact with AGE-u-cate despite deploying differing tactics.

Virginia

VA CMP Funds Expended for Administrative Uses in CY 2025: $0.00

VA CMP Funds Expended for Emergency Uses in CY 2025: $0.00

VA Active CMP Funded Projects in CY 2025: 20

Project Title: Baby Farm Animal Program

Unique Identifier: VA-0522-GWH-957

Project Duration: 09/01/2022 to 06/30/2025

Total Amount of CMP Funds Approved for this Project: $144,680.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $40,000.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of the project is to provide residents of four skilled nursing facilities with regular visits from farm animal vendors to help counteract the negative effects of institutional living, specifically the exacerbated risk of depression, anxiety, difficult behaviors, stress, and loneliness.

b) The project will implement the *Baby Farm Animal Program*, featuring regular visits from an animal vendor, at four nursing facilities. The impact of the visits will be measured through post-visit surveys given to nursing facility staff. The goal of the project was for 75% of residents to demonstrate improved mood, higher satisfaction, and increased engagement as measured using the post-visit survey.

c) Participation will decrease chances of residents experiencing social isolation which is a proven detriment to health. They will be engaged with their neighbors and the staff and experience a higher quality of life.

d) Nursing facilities will benefit from increased resident and staff engagement.

e) While not a direct target, nursing facility staff benefit from observing animal activities and engaging with residents afterward, who demonstrate improvement in their quality of life.

Funded Entity(ies):

Goodwin House Incorporated

Results of the Project:

Cumulative Total: Using the averages from years 1 and 2, along with the detailed numbers from year 3, using an estimate provided by the project for a total of 2,236 instances of attendance at animal visits. Please note that this figure reflects the total number of visits rather than unique individuals, as some

Virginia

VA CMP Funds Expended for Administrative Uses in CY 2025: $0.00
VA CMP Funds Expended for Emergency Uses in CY 2025: $0.00
VA Active CMP Funded Projects in CY 2025: 20

residents attended multiple times across different months. The goal of the project was for 75% of residents to demonstrate improved mood, higher satisfaction, and increased engagement as measured using the post-visit surveys. A final measurement for this goal was 77%. Challenges and Lessons Learned: One key area for growth identified by the project would be expanding the educational and thematic components of the visits. Although the animal interactions were joyful and engaging on their own, incorporating more structure such as a featured “Animal of the Month" could enhance the experience by providing residents with a lasting takeaway. For example, offering small keepsake cards with a picture of the animal they held, along with a fun fact or short story about that animal, would add both a personal and educational element. This could also serve as a memory aid and a conversation starter with staff, peers, and visiting family members. Logistical challenges, such as coordinating with facility schedules and accommodating all interested residents (including those in memory care or with mobility limitations), required flexibility but were overcome through strong collaboration with staff and the vendor’s willingness to adjust as needed. The project reports it aims to integrate more structured learning opportunities, themed visits, and tactile keepsakes that connect emotional engagement with cognitive stimulation. These additions would not only deepen the residents' connection to the animals, but animals but also enrich the overall therapeutic value of the program.

Project Title: Therapeutic Equine Experience

Unique Identifier: VA-0522-GwH-959

Project Duration: 11/01/2022 to 06/30/2025

Total Amount of CMP Funds Approved for this Project: $384,000.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $88,800.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of the project is to engage skilled nursing facility residents with equine farm visits, a scientifically documented therapeutic experience.

b) The project will include regular visits to equine facilities, where residents from four skilled nursing facilities will observe a working stable, learn the horses' names and their histories, draft poems and stories about their impressions, and practice mindfulness and movement to improve focus and verbalization. The measurable goals and objectives include: 1. Goal of four facilities each making 30

Virginia

VA CMP Funds Expended for Administrative Uses in CY 2025: $0.00
VA CMP Funds Expended for Emergency Uses in CY 2025: $0.00
VA Active CMP Funded Projects in CY 2025: 20

visits a year for a total of 120 visits. 2. Goal of four to six residents per facility participating in each visit. 3. Improvement in Mood - 75% participants will show rise in mood by one point. Decrease in agitation/aggression - 75% of participants will show decrease in agitation/aggression by one point. Increase in socialization - 75% of participants will show improvement by one point. Increase in morale/motivation - 75% of participants will show improvement by one point. Increase in self-esteem - 75% of participants will show improvement by one point. Relief of tedium and boredom - 75% of participants will show improvement by one point. Improvement will be measured through survey questions about mood pre- and post-visit of residents as well as open-ended questions; observations from staff about resident mood, behavior, and benefit after the visit and program participation; and resident care plans will document impact on psychosocial well-being, mood, cognition, and behavior, and carry over to in-house life enrichment goals.

c) Participants will benefit through improved moods, psychosocial well-being, life satisfaction, engagement, and learning.

d) Nursing facilities will benefit from increased resident and staff engagement.

e) While not a direct target, nursing facility staff benefit from observing animal activities and engaging with residents afterward, who demonstrate improvement in their quality of life.

Funded Entity(ies):

Goodwin House Incorporated

Results of the Project:

The equine-assisted program had a deeply emotional and therapeutic impact on residents and staff alike. Survey data reflected overwhelmingly positive responses with an overall program average of 98% of residents reported feeling “very happy” or “somewhat happy” after each visit. Qualitative data from firsthand stories and reflections demonstrated the program's value. In the final year, the program received a 100% rating for overall improvement in resident quality of life. The project fell short of the goal to reach 75% in all individual survey categories, the data still reflects strong impact in several areas. Approximately 90% of respondents reported improvements in mood and engagement, both key indicators of well-being. Improved behavior was noted by 69% of staff respondents, motivation by 61%, and self-esteem by 49%. Lessons Learned and Challenges: The primary challenge was transportation. Goodwin House Alexandria (GHA) and Goodwin House Bailey's Crossroads (GHBC) had to alternate attendance during the first two months of the project due to limited driver availability and mechanical issues with their transport vans. These disruptions,

Virginia

VA CMP Funds Expended for Administrative Uses in CY 2025: $0.00
VA CMP Funds Expended for Emergency Uses in CY 2025: $0.00
VA Active CMP Funded Projects in CY 2025: 20

though outside of the project's control, led to missed sessions and disappointment among residents who look forward to the equine visits each week.

Project Title: Addressing the Impacts of Social Isolation with the Stronger Memory Program

Unique Identifier: VA-0522-GWH-960

Project Duration: 10/01/2022 to 06/30/2025

Total Amount of CMP Funds Approved for this Project: $324,907.73

Total Amount of CMP Funds Expended During CY 2025 for this Project: $96,880.83

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of the project is to implement the *Stronger Memory Program*, an evidence-based intervention designed to improve cognitive function, in nursing facilities throughout Virginia. The *Stronger Memory Program* aims to alleviate the decline many residents experienced during the COVID-19 pandemic through simple math, reading aloud, and handwriting activities said to stimulate the brain.

b) The goal is to implement the *Stronger Memory Program* in 100 skilled nursing facilities by the end of the project, reaching at least 750 long-stay residents with mild cognitive impairment. The project aims to demonstrate that among participating residents, at least 80% report an improvement in their cognitive function. Other goals for the project include at least 75% of the facilities that implement the program will have conducted at least one additional session with five or more residents with mild cognitive impairment, and at least 50% of the facilities will have incorporated *Stronger Memory* into their regular programming.

c) The program empowers residents to take proactive steps in caring for their brain health. Residents take pride in what they can accomplish and enjoy an improved quality of life by engaging with others and forming deeper connections while exercising their minds.

d) Nursing facilities will benefit from increased resident and staff engagement.

e) Nursing facility staff and volunteers trained to facilitate *Stronger Memory* activities.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Virginia

VA CMP Funds Expended for Administrative Uses in CY 2025: $0.00
VA CMP Funds Expended for Emergency Uses in CY 2025: $0.00
VA Active CMP Funded Projects in CY 2025: 20

Funded Entity(ies):

Goodwin House Incorporated

Results of the Project:

Performance Measure 1: 91 of Virginia skilled nursing facilities (SNFs) implemented *Stronger Memory* (goal of 100 nursing facilities (SNFs) by end of project). Performance Measure 2: 862 of nursing home residents who have mild cognitive impairment participated in *Stronger Memory* (goal of 750 long-stay residents by end of project). Performance Measure 3: 75.9% of residents reported improvement in cognitive function (goal of 80%). Performance Measure 4: 51% of SNFs that implemented *Stronger Memory* conducted at least one additional group of five or more residents (goal of 75%). Performance Measure 5: 51% of SNFs that conducted at least one additional group have incorporated Stronger Memory into programming (goal of 50%). Issues and Challenges: Nursing homes continue to have a limited ability to plan and launch a new initiative due to existing pre-planned activities, staffing challenges, regulatory updates, and survey readiness. Administrator and Activity Director turnover in addition to resident and staff communicable disease outbreaks impacted recruitment and cohorts already in progress. The project provides additional education, plus training on demand, to ensure *Stronger Memory* sessions continue. Changes in nursing home ownership caused recruitment challenges. In response, the project added a corporate recruitment strategy. Recruitment in Cohorts 4, 5, 6, 8 and 9 showed an increase in enrollment of facilities with a corporate parent company. Attracting attention of Activity Directors for recruitment strategy led to increased facility enrollment. The informational flyer and recruitment materials were updated with revised verbiage: i.e., changed "brain health program" to "brain health activity". Administrators made regulatory changes to their facility assessment requirements and activities that are person-centered should be provided to residents and be included in their facility assessments. Updated messaging for Cohort #8 included person-centered activity to attract administrators' interest in Stronger Memory. Health Quality Innovators (HQI) created and distributed new flyers for an added *Stronger Memory* webinar on "*Stronger Memory- A Person-Centered Activity*". *Stronger Memory* participation data is not always provided timely by facilitators.

Project Title: SNFClinic

Unique Identifier: VA-0522-LTCC-963

Project Duration: 09/01/2022 to 06/30/2025

Total Amount of CMP Funds Approved for this Project: $738,750.00

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Virginia

VA CMP Funds Expended for Administrative Uses in CY 2025: $0.00

VA CMP Funds Expended for Emergency Uses in CY 2025: $0.00

VA Active CMP Funded Projects in CY 2025: 20

Total Amount of CMP Funds Expended During CY 2025 for this Project: $159,600.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of the project is to provide a centralized technology-based system for training, staff management, and resident care resources. *SNFClinic* is an extension project designed to address the issue of training of employees and new nursing home staff in an environment of high staff turnover rates.

b) The goal of the project is to address the issue of training current and newly hired staff in an environment of high turnover rates. *SNFClinic* also provides a centralized technology-based system for training, staff management, and resident care resources. Goal #1: Implement the SNFClinic project in 25 1-, 2-, and 3-star skilled nursing facilities (SNFs) over three years in order to address staff training gaps that result from high turnover rates. Objective #1: Participating SNFs will see an increase in the overall quality of person-centered care by comparing baseline data of nine Minimum Data Set (MDS) quality measures collected prior to SNFClinic implementation with data collected quarterly. Objective #2: Participating SNFs will see a reduction in survey deficiencies by comparing deficiencies noted on annual survey results collected prior to SNFClinic implementation with deficiencies noted throughout project timeline. Objective #3: Participating SNFs will see an improvement in scope and severity tags by comparing results from the annual survey collected prior to SNFClinic implementation with increases or decreases of severity tags noted on surveys conducted throughout the project timeline. Objective #4: Participating SNFs will see improvement in compliance by comparing the acceptance rate of Plans of Correction (POC) for surveys completed prior to SNFClinic implementation with acceptance rates of Plans of Correction for surveys conducted throughout project timelines.

c) SNF residents will benefit from having a more competent and knowledgeable staff because of the staff training offered through the project. Additionally, the resident quality of life will benefit from improvements to the four outcome measures being tracked through this project.

d) SNFs will benefit from the staff management system and the resources, as well as from improvements to the four outcome measures being tracked through this project.

e) Facility staff who utilize the SNFClinic resources.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Virginia

VA CMP Funds Expended for Administrative Uses in CY 2025: $0.00

VA CMP Funds Expended for Emergency Uses in CY 2025: $0.00

VA Active CMP Funded Projects in CY 2025: 20

Funded Entity(ies):

Long Term Care Consultants, LLC

Results of the Project:

Goals, Objectives, Outcomes, Deliverables, Successes, Sustainability: Of the 11 skilled nursing facilities (SNFs) that were the subject of recertification health inspection surveys during the project, 36% reduced the number of survey deficiencies and improved (reduced) their overall Health Inspection Score (HIS). Overall, the surveyed facilities' average HIS improved (reduced) their HIS from 124.4 to 99.5, a significant 25% improvement. The 11 facilities that were the subject of recertification health inspection surveys during the project reduced Level G or above survey tags from six total (an average of 0.5 per facility) to four total (an average of 0.3 per facility). Twenty-three of the 24 facilities (96%) improved their overall Minimum Data Set (MDS) Quality Measure (QM) performance. The average facility improved in 55% of the measured MDS QM datasets. This shows a significant improvement in the overall quality of care provided by the facilities during the project. The 11 facilities that were the subject of recertification health inspection surveys during the project had a baseline of 42 days on average to prepare an approved Plan of Correction (POC). The final average number of days was 43. Hence, there was no material change in the time it took to prepare approved POCs over the course of the project. Eighteen of the 24 facilities (75%) have elected to continue using SNFClinic as private-pay clients. This evidences the overall success of the project and the sustainability of SNFClinic. Challenges and Lessons Learned: A series of delays by CMS in publishing data relevant to the project, which was exacerbated by the 2025 federal government shutdown, resulted in reporting delays. On January 14, 2026, CMS published data relevant to the project through June 30, 2025.

Project Title: It's Never Too Late (iN2L) Equipment and Software at the Sitter and Barfoot Veterans Care Center

Unique Identifier: VA-0522-SBV-966

Project Duration: 09/01/2022 to 06/30/2025

Total Amount of CMP Funds Approved for this Project: $71,899.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $11,140.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Virginia

VA CMP Funds Expended for Administrative Uses in CY 2025: $0.00
VA CMP Funds Expended for Emergency Uses in CY 2025: $0.00
VA Active CMP Funded Projects in CY 2025: 20

a) The purpose of the project is to address the psychosocial and individual cognitive needs of skilled nursing facility residents using It's Never Too Late (iN2L), a computer-based program that engages residents in personalized digital experiences and activities.

b) Goal #1: Enhance resident mental, cognitive and psychosocial needs. Objective #1: Participants will demonstrate improvement on Quality-of-Life surveys. Goal #2: Provide individual learning and entertainment tailored to resident preferences. Objective #1: 20% of overall census will have a tailored iN2L Resident Profile.

c) The technology will provide residents with individualized opportunities to stay engaged and experience person-centered care that enhances their quality of life.

d) The nursing facility will benefit from increased resident and staff engagement.

e) Nursing facility staff who engage with residents and the iN2L program.

Funded Entity(ies):

Sitter and Barefoot Veterans Care Center

Results of the Project:

Goals and Objectives, Outcomes, Deliverables, Successes, Sustainability: The It's Never Too Late (iN2L) system has really become an integral part of the skilled nursing facility (SNF) daily operations. Staff rely on easy access to appropriate engagement tasks from games, trivia, music, videos, worship services and namaste programming. The system is used an average of 465 hours per month for person-centered unique programming. The Memory Care Unit residents especially enjoy the music features, 100% of residents participate in at least one group or individual activity weekly using iN2L, and 75% of memory care residents use iN2L programming at least daily. Twenty-five percent of the overall census have a tailored iN2L Resident Profile. The SNF adjusted their activities budgets to start paying for the system after the project is completed. Challenges and Lessons Learned: The project reported that they did not experience challenge, and they thoroughly enjoyed everything about the iN2L system and training.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Virginia

VA CMP Funds Expended for Administrative Uses in CY 2025: $0.00

VA CMP Funds Expended for Emergency Uses in CY 2025: $0.00

VA Active CMP Funded Projects in CY 2025: 20

Project Title: It's Never Too Late (iN2L) Equipment and Software at the Virginia Veterans Care Center

Unique Identifier: VA-0522-VVCC-968

Project Duration: 11/01/2022 to 06/30/2025

Total Amount of CMP Funds Approved for this Project: $71,899.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $11,140.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of the project is to address the psychosocial and individual cognitive needs of nursing facility residents (SNF) using It's Never Too Late (iN2L), a computer-based program that engages residents in personalized digital experiences and activities.

b) Goal: Utilize person-centered iN2L technology to cater to individual residents' interests to enhance engagement and create a sense of community among residents who share interests. Objective: Increase resident participation in small group activities and individualized activities by 50% during the course of a year. Engagement and impact on residents will be measured through improved Quality of Life Survey and the iN2L monthly usage report.

c) The technology will provide residents with individualized opportunities to stay engaged and experience person-centered care that enhances their quality of life.

d) The nursing facility will benefit from increased resident and staff engagement.

e) Nursing facility staff who engage with residents and the iN2L program.

Funded Entity(ies):

Virginia Veterans Care Center

Results of the Project:

Goals and Objectives, Outcomes, Deliverables, Successes, Sustainability: Through utilizing the It's Never Too Late (iN2L) technology over for the last three years, the skilled nursing facility (SNF) was able to significantly increase resident participation within planned group activities as well as one to one interaction with individual residents to help better meet their personalized activity preferences. Throughout the

Virginia

VA CMP Funds Expended for Administrative Uses in CY 2025: $0.00
VA CMP Funds Expended for Emergency Uses in CY 2025: $0.00
VA Active CMP Funded Projects in CY 2025: 20

reporting periods of the iN2L project, the majority of resident participation in planned activities continues to be 85-90%. The project reports using the devices and the variety of programs offered to offer new activities to all residents. Staff enjoy learning the residents' preferences and engaging residents' day to day. The SNF reports that they would love to be able to continue to use iN2L in their activities programming as they find it easy to use and appreciate the numerous ideas and programs that help staff provide residents the best quality of life. They hope to find funds in their budget to continue the programming. Challenges and Lessons Learned: The iN2L devices are very user friendly, but there was still a bit of a learning curve. One area for improvement was increasing use by other staff such as nursing to help the activities staff to engage residents through therapeutic recreation.

Project Title: Friendship Certified Dementia Practitioner Training

Unique Identifier: VA-0524-FSF-1154

Project Duration: 07/12/2024 to 06/30/2027

Total Amount of CMP Funds Approved for this Project: $40,620.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $13,140.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The goal of the project is to provide opportunities for personalized therapeutic productive engagement to improve the quality of life of residents living with dementia. By August 31, 2026, Friendship Foundations aims to provide supplies for life skill activities for residents at three skilled nursing facilities (SNFs).

b) Friendship Foundation will engage residents participating in these activities. The target is for at least 50% of participating residents with a dementia diagnosis who engage with the life stations to show improved Minimum Data Set (MDS) 3.0, Section E, Behavior scores.

c) The SNF residents will benefit from the use of the stations to meet the goals that benefit their lives.

d) The SNFs will benefit from residents exhibiting less aggressive behaviors.

e) Not applicable

Virginia

VA CMP Funds Expended for Administrative Uses in CY 2025: $0.00

VA CMP Funds Expended for Emergency Uses in CY 2025: $0.00

VA Active CMP Funded Projects in CY 2025: 20

Funded Entity(ies):

Friendship Foundation

Results of the Project:

As of the fourth quarter of 2025, 34 hardcopy student handout notebooks and eight sets of materials for Certified Alzheimer's Disease and Dementia Care Trainer (CADDCT) seminars have been received. To date, 51 employees have participated in the Alzheimer's Disease and Dementia (DCP) Certification (76%), and eight have also received CADDCT.

Project Title: Cognitive Wellness Environment Project

Unique Identifier: VA-0524-SHG-1155

Project Duration: 10/01/2024 to 09/30/2025

Total Amount of CMP Funds Approved for this Project: $18,759.64

Total Amount of CMP Funds Expended During CY 2025 for this Project: $13,362.48

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The project aims to establish an environment for reminiscence therapy to enhance therapeutic memory care for residents living with dementia in four skilled nursing facilities (SNFs).

b) The nursing home will achieve this by providing sensory activities and adding life skills stations to existing dedicated socialization spaces. Residents who participate will undergo assessments using the Patient Health Questionnaire-2 (PHQ-2), PHQ-9, and Minimum Data Set (MDS) 3.0, Section E. Behavior surveys will be administered at the beginning of the project to establish baseline measures for mood and cognition, which will be evaluated and reported. The goal is for residents to exhibit improvement in these measures. A target percentage of improvement was not provided. Another objective was to receive reports from 100% of the communities participating. Participating communities will then complete quarterly assessments to measure improvements in global cognition and mood.

c) The project will aid in promoting and improving the residents' physical, social, and cognitive activities.

Virginia

VA CMP Funds Expended for Administrative Uses in CY 2025: $0.00
VA CMP Funds Expended for Emergency Uses in CY 2025: $0.00
VA Active CMP Funded Projects in CY 2025: 20

d) The nursing home will benefit from the existence of dedicated socialization spaces where persons with dementia can safely engage in activities that orient them to their personhood, bring purpose to their lives, decrease negative behaviors and habits, and allow the facility to provide enhanced engagement catering to the residents' dementia symptoms.

e) Not applicable

Funded Entity(ies):

Saber Healthcare Group

Results of the Project:

The project observed enhanced resident engagement and wellbeing. Residents demonstrated greater interest and participation in daily activities. Families and staff noticed positive shifts in residents' behavior, mood, and interpersonal interactions. The project had a positive impact on staff practices and morale. Staff received targeted education on cognitive wellness approaches, resulting in improved confidence and increased use of person-centered care techniques. A more unified and compassionate care culture emerged. Environmental modifications supported better outcomes. Physical changes to the memory care units, such as personalized spaces, clearer visual cues, and homelike features, appeared to contribute to reduced resident confusion and a more calming atmosphere. Programmatic shifts led to more purposeful daily routines. New programming strategies were introduced that focused on cognitive, life history, and meaningful engagement. Activity calendars reflected a broader variety of therapeutic stimulation and wellness-focused offerings. This project demonstrated that even modest changes, when rooted in person-centered philosophy, can make a substantial difference in the lives of residents with cognitive impairment. By combining environment, staff education, and enriched daily programming, the facilities experienced meaningful shifts in how memory care was delivered and perceived. The total number of facilities report a success rate of 75%. Challenges and Lessons Learned: Implementing the project consistently across four different facilities across the state with different staff teams was challenging at times, especially in regard to keeping projects moving along at the same rate. During implementation, the project encountered challenges with sourcing and safely installing the lightbulb projectors originally planned for the sensory engagement component of the project. They modified this aspect of the program to ensure safety, feasibility, and continued benefit to residents.

Virginia

VA CMP Funds Expended for Administrative Uses in CY 2025: $0.00

VA CMP Funds Expended for Emergency Uses in CY 2025: $0.00

VA Active CMP Funded Projects in CY 2025: 20

Project Title: Memory Care Enhancements for Sitter and Barfoot Veterans Care Center

Unique Identifier: VA-0524-SBV-1156

Project Duration: 10/01/2024 to 09/30/2025

Total Amount of CMP Funds Approved for this Project: $4,968.05

Total Amount of CMP Funds Expended During CY 2025 for this Project: $559.89

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of the project is to improve the quality of life for nursing home residents with dementia-related behaviors.

b) The interdisciplinary team, in addition to admission assessments, completes quarterly assessments, annual and significant change assessment. These assessments will help Sitter and Barfoot Veterans Care Center pinpoint residents' wellbeing, quality of life, and diagnosis and the success of this project in reducing behaviors and depression and improving resident quality of life over time. Sitter and Barfoot will purchase sensory activities for individuals living with dementia. The items requested in this proposal can be used to promote physical, cognitive, social, and sensory levels. Objective #1: Reduce anxiety behaviors through use of sensory items. Objective #2: Increase resident quality of life as indicated on the Quality-of-Life survey.

c) The activities will help promote the residents' physical, social, and cognitive well-being.

d) The project will benefit the skilled nursing facility by providing enhanced engagement, catering to the residents' symptoms of dementia and their progress.

e) Staff will benefit from additional tools for supporting residents with dementia.

Funded Entity(ies):

Sitter and Barefoot Veterans Care Center

Results of the Project:

Goals and Objectives, Outcomes, Deliverables, Successes, Sustainability: Sensory Items continue to be used for residents living with dementia to promote wellbeing and decrease distress. Residents

Virginia

VA CMP Funds Expended for Administrative Uses in CY 2025: $0.00
VA CMP Funds Expended for Emergency Uses in CY 2025: $0.00
VA Active CMP Funded Projects in CY 2025: 20

demonstrated an increase in positive emotions when using the items. Staff can recognize either signs of distress or need for increased engagement and provide these items. This allowed the skilled nursing facility (SNF) to modify residents' behaviors more quickly. Throughout implementation, staff have observed reductions in anxiety behaviors among 10-20 residents each quarter because of the sensory items. Additionally, Quality of Life scores improved for around 30 residents each quarter. The SNF plans to continue to use the items purchased and would likely replace any items that become damaged from general wear and tear as each item has been beneficial. Additional items have been purchased using SNF's operating budget.

Project Title: Memory Care Enhancements at the Virginia Veterans Care Center

Unique Identifier: VA-0524-VVCC-1158

Project Duration: 10/01/2024 to 09/30/2025

Total Amount of CMP Funds Approved for this Project: $4,912.96

Total Amount of CMP Funds Expended During CY 2025 for this Project: $3,712.96

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of the project is to improve the quality of life for nursing home residents with dementia-related behaviors.

b) Goal: Improve the quality of life of nursing home residents with dementia-related behaviors by providing them with sensory activities (Tru Door Murals and HUG devices) and tracking behaviors. Objective #1: Murals will provide feelings of security as well as 50% decrease in exit seeking behaviors as shown through the duration of the project of the residents on the memory care unit. Objective #2: HUGs will provide a 50% decrease in socially inappropriate behaviors of the residents on the memory care unit.

c) The activities will help promote the residents' physical, social, and cognitive well-being.

d) The use of sensory items will benefit the skilled nursing facility (SNF) by reducing common disruptive behaviors.

e) Staff will benefit from additional tools for supporting residents with dementia.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Virginia

VA CMP Funds Expended for Administrative Uses in CY 2025: $0.00
VA CMP Funds Expended for Emergency Uses in CY 2025: $0.00
VA Active CMP Funded Projects in CY 2025: 20

Funded Entity(ies):

Virginia Veterans Care Center dba Davis and McDaniel

Results of the Project:

Goals and Objectives, Outcomes, Deliverables, Successes, Sustainability: Ten residents were chosen to utilize the HUG units. Residents were assigned numbers: #1 showed 92% success rate in reducing behaviors; #2 showed a 75% success; #3 showed 80% success; #4 showed 100% success; #5 showed a 50% success rate; #6 showed a 66% success; #7 showed 81%; #8 showed 100% success; #9 showed 100% success; #10 showed 91% success; #11 showed 85% success; and # 12 showed 75% success. Many residents enjoy holding the HUGs, even residents who are not "assigned" one. One resident was asked if he liked the HUG he was walking around holding, and he said "YES! It makes me feel good." The facility reports that the HUGs have been a great tool for helping create a sense of well-being and comfort for residents. It appears to decrease risk of trying to stand and fall. Some residents have expressed love for their HUGs. Regarding the murals, they appear to decrease residents' attempts to leave the unit, especially higher functioning residents. A few of the lower functioning residents have a pattern of coming into the dining room or activity area and heading straight for the door, which seems to occur at about the same frequency or may be less. Activities Assistant: "Over the weekend, [a resident] was asking where his baby went so I found his HUG and gave it to him. He smiled brightly and seemed very content afterwards. The exit seeking hasn't seemed as frequent since the murals went up." Resident nurse (RN): "Many residents roll up to the 1W doors in the dining room and just look without trying to open the door. Usually, they try pushing the door, but they just stare at it now." Unit Social Worker: "I definitely say they've both been successful. I see fewer people going to the doors (aside from [a resident] who can't be fooled!!). [A resident] told me in the solarium that he wanted to go outside but couldn't go "that way" because it "leads to the library." All the fellows enjoyed the hugs – even the ones who felt they were just "told to babysit" them. The facility will continue to provide the HUG for any residents on the unit who may be showing any socially inappropriate behaviors to help calm their agitation, anxiety, or loneliness. Challenges and Lessons Learned: Several challenges occurred with ordering the murals and having them installed. Most of these issues were on the part of the manufacturer. "If we were to repeat the project, I think we would have liked to have gotten more HUG units and focused more on that than the mural project. The HUG units have shown a positive impact on the unit with our memory care residents, and I believe we would like to utilize them on other units as well."

Virginia

VA CMP Funds Expended for Administrative Uses in CY 2025: $0.00

VA CMP Funds Expended for Emergency Uses in CY 2025: $0.00

VA Active CMP Funded Projects in CY 2025: 20

Project Title: Dementia Live: A Foundational Experiential Education Tool Leading to Competent and Empathetic Care Partners for Persons Living with Dementia

Unique Identifier: VA-0524-AGE-1161

Project Duration: 10/01/2024 to 09/30/2025

Total Amount of CMP Funds Approved for this Project: $49,394.07

Total Amount of CMP Funds Expended During CY 2025 for this Project: $49,394.07

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The project aims to extend the *Dementia Live®: A Foundational Experiential Education Tool Leading to Competent and Empathetic Care Partners for Persons Living with Dementia* project for one year in 10 skilled nursing facilities (SNFs). The purpose is to improve the quality of life and care of long-stay nursing home residents in Virginia who have dementia or dementia-related conditions.

b) Objectives identified by the project in their application are: 1. Each participating facility administrator will sign a Participation Agreement so that expectations of participation are defined and agreed upon. 2. AGE-u-cate will host a virtual kick-off meeting with the facility leadership so that the goals and objectives of the project are understood, along with the implementation process. 3. The facility will appoint its project leader to serve as the main point of contact with AGE-u-cate so that communication is efficient to guide project implementation. 4. The facility will select up to three staff members to take the 6-hour online Dementia Live Coach training course so that the facility is internally prepared to deliver the *Dementia Live* experience to employees and other stakeholders. 5. The project lead will distribute redemptions for three REVEAL Aging courses to selected employees so that they gain additional knowledge and skills regarding quality dementia care (*Foundations of Dementia Care, Stress Reactions: How to Support People Living with Dementia and Cultivating Empathy: From Caregiver to Empathetic Caregiver*). 6. The *Dementia Live* coaches will deliver the *Dementia Live* experience for employees (four at a time) for an approximately 45-minute training session) one time per week.

c) Staff participants in the *Dementia Live*® program are empowered with new tools to enhance their communication skills and care practices, which will help increase residents' well-being.

d) These new skills can be implemented by staff as they perform their daily tasks in the nursing home.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Virginia

VA CMP Funds Expended for Administrative Uses in CY 2025: $0.00
VA CMP Funds Expended for Emergency Uses in CY 2025: $0.00
VA Active CMP Funded Projects in CY 2025: 20

e) Staff participating in the *Dementia Live* training will be able to take the skills and practices into any Virginia skilled nursing facility.

Funded Entity(ies):

AGE-u-cate Training Institute

Results of the Project:

Goals and Objectives, Outcomes, Deliverables, Successes: The project aimed to extend the *Dementia Live®: A Foundational Experiential Education Tool Leading to Competent and Empathetic Care Partners for Persons Living with Dementia* project for one year in 10 skilled nursing facilities (SNFs). All facilities received the Dementia Live Gear Pack. By the conclusion of the project, six individuals from three participating facilities completed coach training with competency scores ranging from 80% to 97%. However, the project did not receive sign-in sheets or competency tools from participants and thus were unable to report on number of skilled nursing facility (SNF) staff that completed the REVEAL Aging courses or the number of SNF staff that completed the onsite *Dementia Live* training. The original sustainability plan was the train-the-trainer model of the program. The project does not believe this will work for all SNFs and notes that while cost effective, the alternative is purchasing the program. Challenges and Lessons Learned: Challenges noted by the project were the length of time that passed between obtaining letters of support from facilities and the project implementation. Many facilities experienced turnover in ownership, administrator, or other leadership roles that had previously been the authority to commit the facility to the project.

Project Title: The Java Project: Addressing Social Isolation and Loneliness

Unique Identifier: VA-0524-LAV-1162

Project Duration: 07/12/2024 to 06/30/2027

Total Amount of CMP Funds Approved for this Project: $253,485.08

Total Amount of CMP Funds Expended During CY 2025 for this Project: $81,023.25

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

Virginia

VA CMP Funds Expended for Administrative Uses in CY 2025: $0.00
VA CMP Funds Expended for Emergency Uses in CY 2025: $0.00
VA Active CMP Funded Projects in CY 2025: 20

a) The purpose is to improve quality of life of nursing home residents by decreasing loneliness, social isolation, and increasing happiness.

b) Goal #1: Decrease loneliness and social isolation through the implementation of three evidence based standardized peer support activity programs: *Java Music, Java Memory* (renamed *Java Time*), and *Java Mentorship*. Objective #1: The recreation and life enrichment staff at 17 Virginia skilled nursing homes (SNFs) will implement the suite of *Java* programs over three years - *Java Music* in year 1, *Java Time* in year 2, and *Java Mentorship* in year 3. Objective #2: By the end of year 3, the recreation and life enrichment staff will see improvements in resident loneliness, social isolation, and happiness measured through the Java Scale (goal of 50% of residents assessed will indicate 10% improvement in loneliness, social isolation, and happiness).

c) Skilled nursing facility residents will benefit from the *Java* programs by developing stronger social and emotional bonds with one another. Through sharing grief, sorrow, and happiness in the *Java* groups, empathetic connections are built, and these social relationships carry over to other activities and nursing home life.

d) Nursing facilities will benefit from increased resident and staff engagement.

e) Recreation and life enrichment staff in the 17 participating facilities.

Funded Entity(ies):

LeadingAge Virginia

Results of the Project:

Deliverables, Quantified Outcomes, Key Achievements: The three-year *Java* initiative is implemented in the participating nursing homes using a phased approach - *Java Music* was implemented in year 1; *Java Memory* (also known as "*Java Time*") in year 2; *Java Mentorship* will be implemented in year 3. The cohort of nursing homes continue to implement and report on the *Java Time* program, which can be delivered in groups sessions or individually in one-on-one sessions. At the conclusion of the second quarter in year 2, *Java Time* has been implemented in 10 of the 16 participating communities (63%), with some exceptions noted: One community is still running *Java Music* program, reporting continued hosting of *Java Music* until *Java Time* training can be completed in January 2026. One nursing home has not yet completed *Java Time* training due to staffing challenges and is scheduled to complete this training in January 2026. One community completed the training but did not have data to report in this quarter, likely due to the winter holidays. Three communities did not report data. Feedback from the engaged communities remains

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Virginia

VA CMP Funds Expended for Administrative Uses in CY 2025: $0.00
VA CMP Funds Expended for Emergency Uses in CY 2025: $0.00
VA Active CMP Funded Projects in CY 2025: 20

positive: Communities reported strong participation and enthusiasm, with many residents eager to attend sessions, especially to hear the weekly music selections. Residents are actively engaged in singing, reminiscing, and sharing meaningful memories, often recalling stories they had not thought about in years. Smiles, increased discussion, and strong engagement, particularly when using memory care photos and music, were frequently observed. Several communities welcomed new participants to the *Java* program this quarter, and facilitators successfully tailored sessions to accommodate residents with varying cognitive abilities. One-on-one sessions continued consistently. While one community experienced a brief delay in launching *Java Time* due to staffing shortages, training was completed in December, and sessions are expected to begin in January 2026.

Project Title: Person-Centered, Trauma-Informed Care Training Series

Unique Identifier: VA-0924-VDMAS-1209

Project Duration: 01/01/2025 to 12/31/2027

Total Amount of CMP Funds Approved for this Project: $260,100.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $62,285.56

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of this project is to offer virtual trainings on *Person-Centered Trauma-Informed (PCTI) Care* to staff at all Virginia skilled nursing facilities (SNFs), ensuring that staff is equipped to respond to the unique needs of this dynamic and diverse population.

b) The overall project aim is to improve resident care by increasing nursing facility staff's knowledge, competency, and confidence to provide person-centered trauma-informed care to residents. Objective #1, Increased Knowledge: 85% of participants completing the course will demonstrate an increase in knowledge about the principles of person-centered, trauma-informed care, as measured by course evaluations and course reflections. Objective #2, Improved Competency: 85% of participants completing the course will demonstrate improvement in competency in applying person-centered, trauma-informed care in their practice, as measured by course evaluations and course reflections. Objective #3, Increased Confidence: 85% of participants completing the course will report an increase in confidence in their ability to provide person-centered, trauma-informed care

Virginia

VA CMP Funds Expended for Administrative Uses in CY 2025: $0.00
VA CMP Funds Expended for Emergency Uses in CY 2025: $0.00
VA Active CMP Funded Projects in CY 2025: 20

and course reflections. Objective #4, High Learner Engagement: At least 75% of enrolled participants will complete all training modules.

c) Person-centered Trauma-Informed care promotes respect and dignity of individuals, improving trust and preventing re-traumatization. This will build connectedness between staff and residents, resulting in an improved experience and quality of life for residents.

d) Staff that exhibit higher levels of competence and confidence are more effective employees and have higher rates of retention. The PCTI care will decrease stress that may lead to escalated interactions and will promote a more respectful environment in the SNF.

e) The target audience is SNF staff at all levels in all roles. This training could also benefit inspectors, ombudsmen, and others who are tangentially involved with care of SNF residents.

Funded Entity(ies):

Virginia Department of Medical Assistance Services (DMAS)

Results of the Project:

The course soft-launched in September 2025, enrolling its first group of learners. In December 2025, the subcontractor Virginia Commonwealth University (VCU) released a digital badge certification for course completion. To date, 21 learners have registered, and two have completed the course and received certification (10%). The most significant challenge faced is awareness and participation. Both the Virginia Department of Medical Assistance Services (DMAS) and the subcontractor, VCU, are working with their respective marketing teams to improve marketing plans. Both are set to launch in early 2026. Initial qualitative feedback is being collected from learners through pre- and post-course surveys.

Project Title: Rethinking Dementia Care: Learning and Relearning

Unique Identifier: VA-1224-VAD-1263

Project Duration: 05/16/2025 to 05/15/2028

Total Amount of CMP Funds Approved for this Project: $261,000.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $19,681.04

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Virginia

VA CMP Funds Expended for Administrative Uses in CY 2025: $0.00
VA CMP Funds Expended for Emergency Uses in CY 2025: $0.00
VA Active CMP Funded Projects in CY 2025: 20

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of this three-year virtual dementia care training program is to enhance the quality of dementia care in 290 Virginia skilled nursing facilities (SNFs) by equipping staff at all levels with innovative, evidence-based knowledge and practical strategies.

b) Using the themes of unlearning and relearning, the program aims to improve the well-being of SNF residents living with dementia by increasing employee knowledge and capacity to support person-centered care. Objectives: 1. Increased Knowledge: 85% of participants completing each workshop will demonstrate an increase in knowledge of foundational concepts of person-centered dementia care, as measured by participant evaluations conducted via online polling and course reflections required to complete before receiving their certificates. 2. Increased Knowledge: 85% of participants completing each workshop will demonstrate an increased understanding behavioral expressions of people living with dementia, as measured by participant evaluations conducted via online polling and course reflections required to complete before receiving their certificates. 3. Increased Knowledge: 85% of participants that complete each leadership workshop will demonstrate an increase in knowledge of strategies for creating inclusive communities through a culture of learning and collaboration, as measured by participant evaluations conducted via online polling and course reflections required to complete before receiving their certificates. 4. Improved Competency: 85% of participants completing each workshop will demonstrate improvement in competency in applying person-centered care approaches to individualizing daily life for people living with dementia, as measured by as measured by participant evaluations conducted via online polling and course reflections required to complete before receiving their certificates. 5. Increased Confidence: 85% of participants completing the course will report an increase in confidence in their ability to provide person-centered care to residents with dementia, as measured by participant evaluations conducted via online polling and course reflections required to complete before receiving their certificates.

c) Caring for residents living with dementia in a person-centered way promotes respect and dignity of individuals, improves communication, and can minimize stressful interactions and situations. This will build connectedness between staff and residents, resulting in improved experience and quality of life for residents.

d) Staff that exhibit higher levels of competence and confidence are more effective employees and have higher rates of retention. Unlearning problematic ideas and unsuccessful methods for deescalating situations care will promote a more respectful environment in the SNF and allow for smoother operations.

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Virginia

VA CMP Funds Expended for Administrative Uses in CY 2025: $0.00
VA CMP Funds Expended for Emergency Uses in CY 2025: $0.00
VA Active CMP Funded Projects in CY 2025: 20

e) The target audience is SNF staff at all levels in all roles. This training could also benefit inspectors, ombudsmen, and others who are tangentially involved with care of SNF residents.

Funded Entity(ies):

Virginia Department of Medical Assistance Services (DMAS)

Results of the Project:

Three webinars and three huddle up opportunities have been offered. One hundred thirty-nine (139) of Virginia's 290 skilled nursing facilities (SNFs) have been represented by attendees of the webinars. Interim results for the project show an 81% increase in Objective #1, Increased knowledge in foundational concepts. The project aims for an 85% increase by the conclusion of the project. For Objective #2, 85% Increase knowledge of behavioral expressions of individuals living with dementia, the project has seen a 100% increase. Interim project outcomes indicate a 91% increase in Objective #5, for which the goal is 85% increase. At this stage in the project, Additional objectives have not yet been measured.

Project Title: See Me - an Activities Program to Improve Quality of Life

Unique Identifier: VA-0125-NOMI-1265

Project Duration: 10/15/2025 to 10/14/2028

Total Amount of CMP Funds Approved for this Project: $419,496.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $16,361.01

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of this project is to improve residents' mood and quality of life (QoL) by increasing socialization and participation in activities by creating a biographical life story book to use in reminiscence of the resident's life.

b) Goal #1: The goal of this program is to improve residents' mood and quality of life (QoL) by increasing socialization and participation in activities by creating a biographical life story book and using it in reminiscence of the residents' life story. Objective #1: 2nomi will implement the Life Story Book program in 28 Virginia skilled nursing facilities (SNFs) and see a 10% relative decrease in the severity of depressive symptoms in the total number of residents participating in the program by the

Virginia

VA CMP Funds Expended for Administrative Uses in CY 2025: $0.00
VA CMP Funds Expended for Emergency Uses in CY 2025: $0.00
VA Active CMP Funded Projects in CY 2025: 20

end of three years. Objective #2: 2nomi will implement the Life Story Book program in 28 Virginia SNFs and see a 10% reduction in the feelings of social isolation reported by the total number of residents participating in the program by the end of three years.

c) Nursing home residents will experience a decrease in severity of depressive symptoms and reduced feelings of social isolation because of participation.

d) SNFs will benefit from increased resident engagement.

e) Nursing home staff will learn more about their residents through this project which will lead to increased job satisfaction and retention.

Funded Entity(ies):

2nomi

Results of the Project:

Interim results are not yet available.

Project Title: Friendship Life Skill Activities

Unique Identifier: VA-0325-FSF-1320

Project Duration: 09/01/2025 to 08/31/2026

Total Amount of CMP Funds Approved for this Project: $13,076.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $0.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of this project is to provide opportunities for personalized therapeutic productive engagement to improve the quality of life of residents living with dementia.

b) The project aims to achieve its goal in the following ways: Friendship Foundation will provide supplies for life skill activities for residents at three nursing homes, engage residents in participating in these activities, and have 50% of residents with a diagnosis of dementia or Alzheimer's show improved Minimum Data Set (MDS) 3.0, Section E, Behavior scores.

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Virginia

VA CMP Funds Expended for Administrative Uses in CY 2025: $0.00
VA CMP Funds Expended for Emergency Uses in CY 2025: $0.00
VA Active CMP Funded Projects in CY 2025: 20

c) The project will benefit the nursing home residents as they will measure success in high resident satisfaction, outstanding quality of care, low hospital re-admission rates, and thousands of seniors who have called Friendship their home since its inception, also involving direct care staff and support staff, especially maintenance staff and Activity Coordinators. Nursing home residents will experience an increase in empathetic treatment by trained staff. *Friendship Life Skill Activities* will directly benefit nursing home residents by providing supplies for life skill activities that simulate laundry, gardening, childcare, and other daily living skills for individuals living at three facilities (Friendship Health and Rehabilitation Center, Friendship Health and Rehabilitation Center South, and Friendship Richfield Health Center), especially those experiencing dementia. Because of the expanded capacity for engaging and therapeutic activities these supplies will provide, this project will improve the quality of life of all the residents at Friendship's three nursing facilities.

d) The nursing home will benefit from the direct care staff, specialized care providers trained staff.

e) Nursing home staff will develop an increased understanding of conditions experienced by residents and will learn more about their residents through this project. They will also receive training which will increase staff satisfaction and retention.

Funded Entity(ies):

Friendship Foundation

Results of the Project:

Interim results are not yet available.

Project Title: Staff Training on Value-Based Purchasing Quality Metrics - Avoiding Negative Care Events

Unique Identifier: VA-0325-DMAS-1322

Project Duration: 10/01/2025 to 09/20/2028

Total Amount of CMP Funds Approved for this Project: $261,000.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $0.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Virginia

VA CMP Funds Expended for Administrative Uses in CY 2025: $0.00
VA CMP Funds Expended for Emergency Uses in CY 2025: $0.00
VA Active CMP Funded Projects in CY 2025: 20

a) This project will provide training on quality improvement and avoidance of negative care events in six topic areas that align with the Virginia Value-Based Purchasing (VBP) program. Virginia identified performance measures (PMs) for the VBP Program in consult with a large and diverse group of stakeholders.

b) Objectives: 1. Increased Knowledge: 85% of participants completing each workshop will demonstrate an increase in knowledge of foundational concepts related to the specific training topic, as measured by participant evaluations conducted via online polling. 2. Improved Competency: 85% of participants completing each workshop will demonstrate an improvement in competency in applying the skills taught, as measured by self-reported confidence scores and course reflections required to complete before receiving their certificates. 3. Enhanced Confidence: 85% of participants completing the course will report an increase in confidence in their ability to implement person-centered care strategies in value-based care activities. 4. Sustained Engagement: At least 75% of participants who attend one workshop will attend at least one "office hour." 5. Leadership Implementation: 85% of leadership-focused participants will report an increased ability to implement policy and system level.

c) Avoidance of the identified negative care events will promote better physical health for residents.

d) Improvement in VBP metrics is cost-effective for skilled nursing facilities (SNFs).

e) The target audience is SNF staff at all levels in all roles. This training could also benefit inspectors, ombudsmen, and others who are tangentially involved with care of SNF residents.

Funded Entity(ies):

Virginia Department of Medical Assistance Services (DMAS)

Results of the Project:

Interim results are not yet available.

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Virginia

VA CMP Funds Expended for Administrative Uses in CY 2025: $0.00

VA CMP Funds Expended for Emergency Uses in CY 2025: $0.00

VA Active CMP Funded Projects in CY 2025: 20

Project Title: Immersive Empathy: Training that Improves Quality of Care for Residents

Unique Identifier: VA-0325-LAV-1325

Project Duration: 11/07/2025 to 11/06/2027

Total Amount of CMP Funds Approved for this Project: $199,956.70

Total Amount of CMP Funds Expended During CY 2025 for this Project: $90,216.50

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of the project is to improve the quality of care provided by nursing home (NH) staff to residents using training modules provided by Embodied Labs that simulate conditions commonly experienced by nursing home residents and nursing home residents.

b) Goal #1: Improve the quality of care provided by nursing home staff to residents using training modules provided by Embodied Labs that simulate conditions commonly experienced by nursing home residents and nursing home residents. Objective #1: By the conclusion of the project: at least 50% of staff at each of 20 NHs will have completed at least one training module. Objective #2: Staff will show a collective 20% increase in confidence to perform job duties. Objective #3: Staff will show a collective 20% increase in awareness of conditions like dementia, vision loss, and social isolation. Objective #4: Staff will show more than 30% reduction in staff work related stress. Objective #5: Staff will show a more than 30% improvement in staff communication with residents, coworkers, and families. Objective #6: Staff will show a more than 30% increase in staff emotional intelligence and resilience. Objective #7: After each year, an observable staff retention of more than 50% among staff that completed Embodied Labs Immersive Experience training. Objective #8: As reported once annually, administrators will report 80% satisfaction with the program.

c) Nursing home residents will experience increased empathy by trained staff.

d) The nursing home will benefit from specialized training received by staff.

e) Nursing home staff will develop an increased understanding of conditions experienced by residents.

Funded Entity(ies):

LeadingAge Virginia

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Virginia

VA CMP Funds Expended for Administrative Uses in CY 2025: $0.00
VA CMP Funds Expended for Emergency Uses in CY 2025: $0.00
VA Active CMP Funded Projects in CY 2025: 20

Results of the Project:

Interim results are not yet available.

Project Title: Reducing Loneliness and Increasing Engagement Through In-room Visits from a Miniature Horse

Unique Identifier: VA-0425-GHBC-1326

Project Duration: 09/01/2025 to 08/31/2028

Total Amount of CMP Funds Approved for this Project: $59,400.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $0.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) Goodwin House aims to reduce loneliness, skin hunger, and social isolation by offering high-touch, interactive visits with a potty-trained miniature horse. This unique program will provide nursing home residents with an emotionally enriching experience that enhances their quality of life.

b) The project aims to achieve quarterly, at least 75% of residents who receive in-room visits from the miniature horse will report a positive impact related to life satisfaction, such as feeling less lonely or more connected, as measured by a single-question post-visit survey administered verbally by staff or volunteers. Quarterly, at least 75% of participating residents will exhibit observable signs of emotional engagement—such as smiling, verbal reactions, or physical touch with the horse—during visits, as documented by a simple observational checklist completed by staff or volunteers.

c) Goodwin House facilities hold regular Resident Council meetings to which family members are invited. There is an active Healthcare Committee that endorses the program. Life Enrichment participates in the meetings and reports back to the committee. The nursing department and Medical Director are available to guide and support the program. Staff and family members involved in the program are surveyed to gather feedback and assess satisfaction. Connections with family members will be strengthened through more meaningful visits.

d) The facility will benefit by an increase in social engagement for residents with limited mobility.

e) Not applicable

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Virginia

VA CMP Funds Expended for Administrative Uses in CY 2025: $0.00
VA CMP Funds Expended for Emergency Uses in CY 2025: $0.00
VA Active CMP Funded Projects in CY 2025: 20

Funded Entity(ies):

Goodwin House Bailey's Crossroads

Results of the Project:

Interim report, the project is encouraging early progress toward its goals of reducing loneliness and increasing emotional engagement among residents through therapeutic miniature horse visits. While formal survey and checklist data collection will begin next quarter, staff observations across two visits indicate strong alignment with project objectives and meaningful impact on resident well-being the project is on track to move into more structured outcome measurement next quarter while continuing to build moments of joy, connection, and shared experience within the community. Staff observed that more than 75% of participating residents showed clear signs of increased life satisfaction and emotional engagement during visits. Residents frequently smiled, reached out to touch the horse, initiated conversation, and asked when the horse would return. Several residents who are typically quieter appeared more animated and engaged following the visits, often interacting more with staff afterward. These moments suggested not only enjoyment, but a sense of connection and anticipation that extended beyond the visit itself. The visits also fostered a shared sense of community within the facility. Staff reported smiles in nearly every room that welcomed the miniature horse, and many residents sought physical closeness with the horse, reinforcing the calming and relational nature of the intervention. In response to the positive reception, staff are exploring ways to invite family members to participate in future in-room sessions, further strengthening connections among residents, caregivers, and loved ones.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

West Virginia

WV CMP Funds Expended for Administrative Uses in CY 2025: $0.00
WV CMP Funds Expended for Emergency Uses in CY 2025: $0.00
WV Active CMP Funded Projects in CY 2025: 0

The state had no CMP-funded projects in calendar year 2025.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Alabama

AL CMP Funds Expended for Administrative Uses in CY 2025: $0.00

AL CMP Funds Expended for Emergency Uses in CY 2025: $0.00

AL Active CMP Funded Projects in CY 2025: 1

Project Title: Fewer Drugs and Bugs

Unique Identifier: AL-0321-UAB-762 / 2021-04-AL-0329

Project Duration: 06/01/2021 to 05/31/2025

Total Amount of CMP Funds Approved for this Project: $1,660,812.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $0.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The project aims to significantly improve resident care in 25 long-term care (LTC) facilities by focusing on staff training, medication management, infection control, and best practices.

b) To achieve this, the project has three quantifiable goals: conduct training for 90 percent of the direct care staff in participating skilled nursing facilities with a focus on nurses and certified nursing assistants; reduce antipsychotic drug use in residents by at least 25 percent; and decrease preventable infection rates by 20 percent.

c) The project will enhance nursing home (NH) residents' well-being through safer living conditions and improved infection control, resulting in reduced medication use and a higher quality of life.

d) The project can boost nursing home staff morale and efficiency, decrease healthcare costs, and promote a culture of ongoing enhancement.

e) Not applicable

Funded Entity(ies):

University of Alabama at Birmingham

Results of the Project:

Goals and Objectives: The project aimed to reduce antipsychotic drug use and preventable infections such as pneumonia, cellulitis, and urinary tract infections among dementia residents in Alabama long-term care facilities. Staff were trained to manage care-resistant behaviors (CRB) using non-drug, person-centered strategies integrated with infection prevention practices. Outcomes and Successes: Over 90% of nurses and certified nursing assistants (CNAs) at participating facilities received CRB and infection prevention training. Many sites added this training to new employee orientation. Licensed nurse coaching goals

Alabama

AL CMP Funds Expended for Administrative Uses in CY 2025: $0.00
AL CMP Funds Expended for Emergency Uses in CY 2025: $0.00
AL Active CMP Funded Projects in CY 2025: 1

exceeded expectations, though CNA participation was limited by turnover. One facility reduced antipsychotic use by 8% and psychotropic use by 11%. Another saw a 16% drop in psychotropics. Two facilities achieved a 50% drop in infections, and materials were incorporated into policies, care plans, and orientation. Challenges were high staff turnover, limited time, and resistance from some clinicians affected results. Facilities with strong leadership support showed better outcomes. Technical and space limitations also interrupted training. Lesson learned was making training part of staff orientation ensured participation. Presenting "coaching" as "help" improved engagement. Leadership support, brief shift-overlap sessions, and collaboration with infection control nurses enhanced program success. Conclusion: The *Fewer Bugs and Drugs* project effectively reduced medication reliance, improved infection control, and promoted person-centered dementia care. Despite challenges, its integration into facility operations established a lasting foundation for safer, more compassionate care statewide.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Florida

FL CMP Funds Expended for Administrative Uses in CY 2025: $76,345.60

FL CMP Funds Expended for Emergency Uses in CY 2025: $0.00

FL Active CMP Funded Projects in CY 2025: 10

Project Title: SNFClinic

Unique Identifier: FL-1121-LTCC-878 / 2021-04-FL-1122

Project Duration: 07/01/2022 to 06/30/2025

Total Amount of CMP Funds Approved for this Project: $795,100.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $152,000.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The *SNFClinic* project will offer participating skilled nursing facilities tools, reference materials, and training.

b) The project aims to improve overall staff performance and accountability. Outcome A Measurement: Increase resident satisfaction and person-centered care through staff training. Outcome B Measurement: Reduction in survey deficiencies. Outcome C Measurement: Improvement in scope and severity tags. Outcome D Measurement: Improvement in compliance.

c) By implementing pre-made, industry-tested policies and procedures, residents of the participating facilities will likely benefit from the overall improvement in their quality of care.

d) SNFClinic platform directly benefits nursing homes and their residents by improving the overall quality of care.

e) Not applicable

Funded Entity(ies):

Long-Term Care Consultants, LLC

Results of the Project:

Final Results: Project Summary: The purpose of the project was to provide up to 28 one-, two- and three-star skilled nursing facilities (SNFs) in Florida with the SNFClinic electronic learning management system for up to 36 months. SNFClinic provides, among other functions: Training videos that demonstrate how to correctly perform nursing procedures common to the nursing home environment. In-service training and participation tracking tools. “What-If” checklist feature that allows staff to quickly review policies and procedures for common occurrences in the nursing home environment. A customizable and searchable

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Florida

FL CMP Funds Expended for Administrative Uses in CY 2025: $76,345.60
FL CMP Funds Expended for Emergency Uses in CY 2025: $0.00
FL Active CMP Funded Projects in CY 2025: 10

policy and procedure database that includes policies and procedures written by industry leaders and compliant with the Medicare and Medicaid requirements of participation. A searchable database that compiles and updates the most prevalent F-Tag citations that nursing homes receive nationwide and approved plans of corrections for those citations. Training progress reports that allow the nursing home to monitor staff completion of training requirements. A message center that allows for electronic communication via email and text. A customizable assessments database that covers initial, focus, time-lapsed and emergency assessments that can be used to implement a base-line plan of care for each resident. Outcomes and Measurement of Results - The following data was tracked during the project in order to measure increases or decreases in the quality of care provided to nursing home residents: Increases and/or decreases in the number of survey deficiencies reported by CMS on Form CMS 2567. Any improvement in the scope and severity of the deficiencies cited for participating nursing homes. Any improvement in the compliance aspects of the participating nursing homes' development of Plans of Correction that meet the requirements of the Department of Health and the survey teams. Performance on select quality of care measures published on the CMS Nursing Home Compare website. Project Implementation and Deliverables: The project was implemented in twenty-eight (28) Florida nursing home facilities. Completed Deliverables - At all times during the project, the facilities were provided with 24/7 access to SNFClinic. The deliverables included the following: Creation of facility-specific SNFClinic accounts for each of the facilities, including the loading of all facility personnel into the SNFClinic system. This involves overseeing the collection and input of employee names, telephone numbers, email addresses, and departmental information. Training of key staff on using SNFClinic. Customization of each facility's SNFClinic account on issues such as, without limitation, (a) monthly training calendars; (b) new employee onboarding training services; and (c) creating and uploading facility-specific training modules. Monthly access to an unlimited number of staff at the facilities to all SNFClinic features. Ongoing facility staff training on SNFClinic as needed. Ongoing facility-specific customization as needed. Ongoing customer service, including outbound calls the facilities every month to determine whether they require any additional assistance. Development and release of expanded training modules and nursing and administrator continuing education units (CEUs) as approved by the appropriate governing boards. Ongoing system enhancement, as needed. Ongoing system design, updates, and maintenance. Over the course of the project, the facilities used SNFClinic to collectively assign 420,694 training and education modules. The facilities' overall average completion rate was 71.2%. In other words, the facilities collectively completed 299,534 training and education modules during the project. Project Outcomes: Performance Monitoring and Evaluation - Long-Term Care Consultants (LTCC) monitored and reported on the health survey and Minimum Data Set (MDS) Quality Measure (QM) data published by CMS during the project as described above. Challenges: As previously reported, delays by CMS in publishing project data have resulted in delayed reporting. Project data through June 30, 2025, was published in January 2026. Final

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Florida

FL CMP Funds Expended for Administrative Uses in CY 2025: $76,345.60

FL CMP Funds Expended for Emergency Uses in CY 2025: $0.00

FL Active CMP Funded Projects in CY 2025: 10

Outcomes: Recertification Health Surveys and Health Inspection Scores - One facility (3.6%) had no change in its survey performance. One facility (3.6%) had a reduction (i.e., improvement) in its health inspection score only. One facility (3.6%) had an increase (i.e., worsening) in its health inspection score only. Eleven facilities (39.3%) failed to improve in either their deficiency count or health inspection score. Fourteen facilities (50%) (a majority of the facilities) improved in both their deficiency count and health inspection score. Minimum Data Set (MDS) Quality Measures (QM) Scores: All the facilities (100%) improved in at least one of the measured MDS QM categories. On average, the facilities improved in 3.7 (49%) of the measured categories. Conclusion: Based on the data presented in this final report, the project can be characterized as a success. The facilities' use of SNFClinic to assign and complete training and education modules was robust. In addition, the majority of facilities improved the quality of care provided to residents in measurable ways.

Project Title: The Commons Goes Virtual Project

Unique Identifier: FL-0922-COL-1014 / 2022-04-FL-0826

Project Duration: 04/01/2023 to 03/31/2026

Total Amount of CMP Funds Approved for this Project: $17,100.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $4,200.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The *Commons Goes Virtual Project* will implement the Rendever virtual reality (VR) program, designed to reduce social isolation in senior living communities by harnessing the power of shared positive experiences. This program will enhance the quality of life for nursing home residents.

b) The project's primary goal is to reduce social isolation. The project aims to increase resident participation in group activities by 15-20% and in individualized activities by 15-20%.

c) Through shared experiences, evidence suggests strengthening relationships among individual residents, residents and staff, residents and their families, and staff and families.

d) Strengthening of relationships between individual residents, residents and staff, residents and their families and staff between the families.

e) Not applicable

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Florida

FL CMP Funds Expended for Administrative Uses in CY 2025: $76,345.60

FL CMP Funds Expended for Emergency Uses in CY 2025: $0.00

FL Active CMP Funded Projects in CY 2025: 10

Funded Entity(ies):

The Commons at Orlando Lutheran Towers

Results of the Project:

Interim Results: The residents continue to benefit from and enjoy the Rendever project. Usage is down a little this quarter due to decrease in census, lots of new rehabilitation residents who bring their own electronics and are more interested in rehabilitation and choose not to attend activities. Also, unfortunately the facility has lost some residents who enjoyed the program. They also had a busy three months with the holidays. The program offered lots of fun holiday activities that consumed most of the time on our calendar. The project is back on track for January and expects usage to increase to prior levels. The videos that the residents enjoyed coincided with the holiday season. Residents continue to enjoy videos about animals, tours of different cities, music, calm adventures, meditation, et cetera. There continues to be something new for everyone to enjoy. Rendever does a great job adding videos to the monthly collection based on the type of videos our residents enjoy and watch the most. The headsets continue to work without issue. Technical support is available if needed. To meet infection disease standards, staff continue to clean the headsets and tablet after each use and return them to their charging station, so they are ready for the next day. This project has given the facility an opportunity to enhance the daily lives of residents through the wide variety of available videos and socializing within the group. Target 1 - Group activity participation in the latest quarter increased 55% when compared to the first three months of use. Target 2 - Individual activity participation in the latest quarter increased 104% when compared to the first three months of use. This data is as of December 31, 2025, reporting quarter.

Project Title: Compassionate Touch®: A Caregiving Technique to Improve Resident Wellbeing and Promote Recovery from COVID-Related Isolation

Unique Identifier: FL-0324-SPHR-1126 / 2024-04-FL-0228

Project Duration: 08/01/2024 to 07/31/2025

Total Amount of CMP Funds Approved for this Project: $4,827.60

Total Amount of CMP Funds Expended During CY 2025 for this Project: $225.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

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Florida

FL CMP Funds Expended for Administrative Uses in CY 2025: $76,345.60
FL CMP Funds Expended for Emergency Uses in CY 2025: $0.00
FL Active CMP Funded Projects in CY 2025: 10

a) *Compassionate Touch*® is a non-pharmacological approach to responding to and preventing behavioral expressions in individuals with dementia. *Compassionate Touch*® includes the skills of expressive touch and compassionate presence for direct and indirect caregivers of nursing home residents. The vision is that all personnel will be attentive and engaged with the residents' well-being and human connections.

b) The project aims to achieve the following goals/outcomes: A 10% reduction in observed resistance in care delivery for residents receiving *Compassionate Touch*®. (Minimum Data Set (MDS) E800). A 10% reduction in observed verbal behavioral stress reactions for residents receiving *Compassionate Touch*® (MDS E0200C). A 10% reduction in observed physical behavioral stress reactions for residents receiving *Compassionate Touch*®. (MDS E0200A). A 10% reduction in overall signs of ill-being (crying, isolating, refusing activities) MDS 0200C.

c) The project aims to enhance the well-being and quality of life for residents of nursing facilities. The *Compassionate Touch*® care approach combines compassionate presence with skilled touch techniques to help facilities create an environment that promotes comfort, attachment, inclusion, and love, thereby enhancing the well-being and quality of life for all residents.

d) *Compassionate Touch*® facilitates human connection with residents and reduces isolation, depression, and loneliness.

e) Not applicable

Funded Entity(ies):

Sabal Palms Health and Rehabilitation

Results of the Project:

Final Results: Outcome Measures for this project included reviewing several sections of the Minimum Data Set (MDS) related to the observed behaviors. The following reviews the findings of chart reviews for behavior documentation and related MDS sections. 1. Observed resistance in care delivery for residents receiving *Compassionate Touch*® *(CT)* (MDS E800.) Goal: a 10% reduction in observed resistance in care delivery for residents receiving *Compassionate Touch*® as documented in MDS E800. Results: a 0% reduction in observed resistance in care delivery for residents receiving *Compassionate Touch*® as documented in MDS E800. Charts reviewed for all Memory Care Unit residents during the grant period. One resident had documented changed in MDS marker – MDS E800 with previous score - three: Behavior of this type occurred daily to new score - one: Behavior of this type occurred one to three days. This

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Florida

FL CMP Funds Expended for Administrative Uses in CY 2025: $76,345.60
FL CMP Funds Expended for Emergency Uses in CY 2025: $0.00
FL Active CMP Funded Projects in CY 2025: 10

indicates the success of implementing the *CT* technique during times of stress for this resident. One resident had documented changed in MDS marker – MDS E800 with previous score - zero: behavior was not exhibited to new score - one: Behavior of this type occurred one to three days. All other residents' scores for this MDS marker remained unchanged during the grant period. 2. Observed verbal behavioral stress reactions for residents receiving *Compassionate Touch*® (MDS E0200C.) Goal: A 10% reduction in observed verbal behavioral stress reactions for residents receiving *Compassionate Touch*® as documented in MDS E0200C. Results: 0% reduction in observed verbal behavioral stress reactions for residents receiving *Compassionate Touch*® as documented in MDS E0200C. Charts reviewed for all Memory Care Unit residents during the grant period No residents scores for this MDS marker changed during this period and ranged from score of 0 – behavior not exhibited to score of 1 – behavior of this type occurred one to three days. 3. Observed physical behavioral stress reactions for resident receiving *Compassionate Touch*® (MDS E0200A.) Goal: A 10% reduction in observed physical stress reactions for residents receiving *Compassionate Touch* as documented in MDS E0200A. Results: 0% reduction in observed physical stress reactions for residents receiving *Compassionate Touch* as documented in MDS E0200A. Charts reviewed for all Memory Care Unit residents during the grant period. No residents scores for this MDS marker changed during this period and ranged from score of 0 – behavior not exhibited to score of 1 – behavior of this type occurred one to three days. 4. Overall signs of ill-being (crying, isolating, refusing activities) (MDS 0200C.) Goal: A 10% reduction in overall signs of ill-being (crying, isolating, refusing activities) as documented in MDS 0200C. Results: 0% reduction in overall signs of ill-being (crying, isolating, refusing activities) as documented in MDS 0200C. Charts reviewed for all Memory Care Unit residents during the grant period. No residents scores for this MDS marker changed during this period and ranged from score of 0 – behavior not exhibited to score of 1 – behavior of this type occurred one to three days. Even though there were limited changes in MDS markers, there were several examples of anecdotal evidence of situational improvement in behavioral reactions reported verbally by team members during and after implementing *Compassionate Touch*®*.* These were reported on the Outcomes Tracking Forms. Most commonly, there were noted to be decrease in verbal outbursts, increased social interaction, positive facial expression, more actively participating in activities of daily living (ADLs), and decreased restlessness. Program Successes: The training of *Compassionate Touch*® allowed for more personal approaches to residents, particularly those residents with dementia, and created a positive interaction between residents and caregivers. Having a large percentage of team members trained in the *Compassionate Touch*® technique, this allows for the use of *CT* during any shift and for any need that may arise. The ability for team members to use the techniques learned in the *CT* training outside of the workplace allows them to address not just work-place stressors, but personal and home life stressors as well. Being able to support each other using the *CT* technique in times of acute work-place stress is an added benefit to Sabal Palms. One of the *Compassionate Touch*® coaches works on the Memory Care Unit and can implement regular

Florida

FL CMP Funds Expended for Administrative Uses in CY 2025: $76,345.60
FL CMP Funds Expended for Emergency Uses in CY 2025: $0.00
FL Active CMP Funded Projects in CY 2025: 10

practice of the technique by incorporating it in the weekly activity schedule. This allows residents to be familiar with the technique and respond positively. This weekly activity is scheduled before the evening meal and during a time of transition on the unit, which can traditionally be a more stressful time of day for residents with dementia. Ongoing training will be provided as the benefit of *Compassionate Touch*® has been observed on the Memory Care Unit. The positive involvement and encouragement of leadership in the community contributed to the success of this program. Program Challenges: Initial challenges with finding three people to be coaches was overcome with the addition of the Regional Life Enrichment Director stepping into the role of a coach. One of the people initially identified as a potential coach dropped out after determining her workload would not allow for her involvement. The occurrence of two hurricanes back-to-back at the start of the grant period impacted the ability to complete training early on, with team members reporting to other duties needed during that time and the subsequent flooding on the training area. Both situations have resolved. During the review of MDS on residents living on the Memory Care Unit, it was identified that staff have been underreporting behavioral symptoms. The lack of change in the MDS consistently across the grant period has initiated a more in-depth look at how staff are documenting daily behaviors. This will continue to be investigated and potentially lead to revised training for all care staff responsible for documenting and understanding the importance of daily behavior documentation. While this has created a challenge for this grant period, it has helped to provide improvement opportunities going forward. Staff turnover has and will be an ongoing challenge to keep a high level of team members trained in *Compassionate Touch*® but will be addressed by holding quarterly trainings and refreshers for new and previously trained team members to stay current and active with using the technique. The turnover of the Life Enrichment Director position impacted the ability for the Life Enrichment team to fully engage in the process but has stabilized. This department was responsible for driving the use of the technique throughout the facility. Finally, the loss of one of the trained coaches at the end of the grant period will impact future training and limit the number of trainings that will be able to be completed. Summary: This implementation and completion of this grant project has positively impacted the lives of the residents residing at Sabal Palms Health and Rehabilitation. The ability to provide this training and approach would not have been possible without the use of Civil Money Penalty Grant funds. Sabal Palms thanks the State of Florida for the opportunity to use these funds to improve the quality of life of the residents.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Florida

FL CMP Funds Expended for Administrative Uses in CY 2025: $76,345.60

FL CMP Funds Expended for Emergency Uses in CY 2025: $0.00

FL Active CMP Funded Projects in CY 2025: 10

Project Title: Twelve Months of Proactive Practices to Reduce Falls

Unique Identifier: FL-0324-EDUC-1128 / 2024-04-FL-0318

Project Duration: 08/01/2024 to 07/31/2027

Total Amount of CMP Funds Approved for this Project: $140,220.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $46,740.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The *Twelve Months of Proactive Practices to Reduce Falls* project will educate nursing home professionals in 30 skilled nursing facilities (SNFs) on simple, doable, no-cost, individualized, and proactive practices that can reduce falls when intentionally implemented, while also individualizing care and supporting resident-directed living.

b) The anticipated goals for each year of the project include by the end of 12 months, each of the 10 nursing homes (NHs) participating in the project will implement at least 12 proactive practices to prevent falls for residents living in their homes, as evidenced by a reduction in the average number of falls per month. It is anticipated that homes will experience a reduction in falls over the 12-month period, resulting in an overall 25% decrease from baseline.

c) Teaching nursing homes to be more proactive and offer more person-centered care will reduce resident falls, thus improving their quality of life.

d) This project will directly benefit the home by educating NH staff on proactive practices of care.

e) Not applicable

Funded Entity(ies):

Edu-Catering, LP

Results of the Project:

Interim Results (Year 1): Project Successes and Barriers: Successes: In six of the 10 participating nursing homes, residents experienced fewer falls with reduced average number of falls pre- to post- project. Average percentage change was 2.33%. Reasons for increase in falls are listed below. Four homes had increased falls. However, for one of these homes the increase was miniscule, so average monthly falls

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Florida

FL CMP Funds Expended for Administrative Uses in CY 2025: $76,345.60
FL CMP Funds Expended for Emergency Uses in CY 2025: $0.00
FL Active CMP Funded Projects in CY 2025: 10

stayed the same. Average knowledge gained was from 2.76 to 4.66 on a scale of (low) one to five (high). The average number of months that falls decreased was 4.4. Average number of proactive practices implemented was 10. Barriers observed by participants for increased number of people falling include new, respite, higher acuity, hospice, terminal agitation, therapy, impulsivity, people who were falling at home, people with psych diagnoses, not necessarily more staff or time to serve them, people who are falling fall more, sick, infections, flu, antibiotics, more isolated, and also when staff are sick. One home underwent new ownership and couldn't give their all to the project, plus a new team. Basic education is needed. 240 residents mean a lot more employees are needed on a daily basis. The former corporation pulled everything with them. One home had to get a new team as the former team was ineffective and not doing jobs. Some families are not involved at all; therefore, it is harder to get items of interest on low budgets. Changes as a result from this year's project include requesting the administrator to be the project champion as they have authority to gather all team members for both education and coaching call and follow up; champions for each topic; Pep Talk Tuesday – weekly reminder/pep talk; encourage use of Self-Assessment monthly; keep Action Plans in front each month and indicate progress on each, each month. A new practice idea learned from participants to share with others is that the concierge role really helps.

Project Title: SNFClinic

Unique Identifier: FL-0424-LTCC-1144 / 2024-04-FL-0326

Project Duration: 02/06/2025 to 01/31/2028

Total Amount of CMP Funds Approved for this Project: $567,720.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $131,791.68

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The SNFClinic project will offer participating skilled nursing facilities tools, reference materials, and training.

b) The expected outcomes (i.e., realistic, actionable goals) of the project are: 1. On average, the participating facilities will improve in 30% of their Quality Measures; and 2. 50% of the participating facilities' Quality Measure star ratings will improve.

c) Implementing pre-made, industry-tested policies and procedures, residents of the participating facilities will benefit from the overall improvement in their quality of care.

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Florida

FL CMP Funds Expended for Administrative Uses in CY 2025: $76,345.60
FL CMP Funds Expended for Emergency Uses in CY 2025: $0.00
FL Active CMP Funded Projects in CY 2025: 10

d) SNFClinic platform directly

benefits nursing homes and their residents by improving the overall quality of care.

e) Not applicable

Funded Entity(ies):

Long-Term Care Consultants, LLC

Results of the Project:

Interim Results: Since the date of delivery, all participating facilities have had uninterrupted access to SNFClinic in accordance with the agreement. Other than the impact of CMS's delay in publishing up-to-date project data, the project is going well. Project challenges and delays caused by the federal government shutdown have delayed publication of project data. The goals of the project are as follows: Goal 1: On average, a 30% improvement across the facilities in the Minimum Data Set (MDS) Quality Measures (QM) used to calculate CMS's Quality Measure star rating. Goal 2: 50% of the facilities' Quality Measure star rating will improve. Results Reporting - MDS QM project data current as of June 30, 2025. All (100%) of the facilities improved in at least one (11%) of the MDS QM categories. On average, the facilities improved in 43.6% of the MDS categories. Overall, the facilities' average QM star rating did not change. Long-Term Care Consultants (LTCC) expect that larger trends will be measurable as the project progresses.

Project Title: Senior Buddy Program

Unique Identifier: FL-0824-STC-1189 / 2024-04-LTC-0819

Project Duration: 01/01/2025 to 12/31/2025

Total Amount of CMP Funds Approved for this Project: $15,000.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $5,000.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

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Florida

FL CMP Funds Expended for Administrative Uses in CY 2025: $76,345.60
FL CMP Funds Expended for Emergency Uses in CY 2025: $0.00
FL Active CMP Funded Projects in CY 2025: 10

a) The program is designed to provide practical, emotional, and social support to nursing home residents, helping to combat the effects of loneliness and improve overall health. Additionally, the ongoing companionship and support aim to reduce the stress on caregivers and facility staff.

b) The Campaign to End Loneliness Measurement Tool will be used to measure change in loneliness because of the program. It is a 3-question scale with positive language, unlikely to cause embarrassment or distress to the seniors. Each question is scored from zero (0) to four (4) based on how strongly they agree or disagree with the statement. The scores for each question are totaled, with sums ranging from zero to 12, with lower scores indicating lower levels of loneliness. Each point on the scale does not represent an equal increase or decrease in the degree of loneliness, rather the scale is to be used to compare total scores at different intervals in time. The project will incorporate the scale into participant registration form at the start of the program to collect a baseline score and then volunteers will readminister the survey at 3-month intervals. After 12 months of visits, the project aims for 90% of participants' scores to decrease, resulting in a decrease in loneliness.

c) StudentsCare provides interaction and companionship to isolated nursing home residents, helping to reduce the stress placed on their families, alleviating the burden on hospital and facility staff. The one-on-one buddy visits, as well as group activities allow nursing home residents to reap the many benefits of social connection. The program is designed to provide practical, emotional, and social support to nursing home residents, helping to combat the effects of loneliness and improve overall health.

d) Improve relationships between residents and staff.

e) Not applicable

Funded Entity(ies):

StudentsCare

Results of the Project:

Final Results: Outcomes and Impact - Social Connection and Loneliness: The Campaign to End Loneliness survey was administered to registered participants (n=10). Fifty percent (50%) of respondents reported feeling they did not have enough people that felt comfortable asking for help. Survey administration prompted real-time staff intervention in at least one case, where a resident's reported, emotional distress was linked to unmanaged pain and addressed immediately by nursing staff. While the project was not able to complete formal post-surveys due to challenges, qualitative observations and volunteer logs consistently

Florida

FL CMP Funds Expended for Administrative Uses in CY 2025: $76,345.60
FL CMP Funds Expended for Emergency Uses in CY 2025: $0.00
FL Active CMP Funded Projects in CY 2025: 10

indicated the following: increased resident engagement, improved mood during and after activities, strong anticipation for recurring volunteer visits. Relationship-Building: Consistent volunteer presence enabled volunteers to function as trusted listeners and informal liaisons between residents and staff. Personalized engagement (e.g., birthday celebration) demonstrated the depth of relationships formed and the emotional value of continuity. Challenges and Program Conclusion - During the last quarter, several compounding challenges limited the program's ability to achieve its intended impact at this site: site location and transportation barriers for volunteers; limited and delayed communication from on-site staff; high physical and cognitive care needs of residents requiring advanced volunteer preparedness; graduation of a key volunteer coordinator and difficulty transitioning leadership. As a result, the program conducted an internal evaluation and determined that continuing programming at this site would not allow for sustainable or equitable outcomes. The organization formally concluded programming and terminated the grant agreement effective December 31, 2025. Key Learnings and Future Application - Year 1 of the Senior Buddy Program reinforced several critical lessons: consistent staffing support and reliable site communication are essential for data collection and volunteer retention; transportation accessibility is a major determinant of volunteer sustainability; even limited engagement can yield meaningful social and emotional benefits for residents when relationships are prioritized. These insights will directly inform future site selection, volunteer recruitment strategies, and program design to ensure stronger long-term impact in subsequent implementations. Conclusion - Despite operational challenges in the latter part of the year, the Senior Buddy Program successfully engaged volunteers and nursing home residents, facilitated meaningful intergenerational relationships, and demonstrated the potential of structured volunteer companionship to address loneliness in long-term care settings. StudentsCare remains committed to refining and expanding this model in environments where the conditions support sustainable impact.

Project Title: Virtual Dementia Tour Comprehensive Education Program

Unique Identifier: FL-1024-SWD-1229 / 2024-04-FL-1025

Project Duration: 04/01/2025 to 03/31/2027

Total Amount of CMP Funds Approved for this Project: $750,000.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $265,358.83

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Florida

FL CMP Funds Expended for Administrative Uses in CY 2025: $76,345.60
FL CMP Funds Expended for Emergency Uses in CY 2025: $0.00
FL Active CMP Funded Projects in CY 2025: 10

a) Second Wind Dreams (SWD) will implement the *Virtual Dementia Tour (VDT) Experiential Education Program* in 125 skilled nursing facilities (SNFs).

b) The program is intended to improve resident care through evidence-based training. Additionally, staff will be assessed with the Dementia Aware Competency Evaluation (DACE) tool, providing an evidence-based and quantifiable assessment. The applicant will train two facilitators in a train-the-trainer model, and the facilitators will then train all existing facility caregivers within one year. After one year, the Dementia Center of Excellence trainers will train new personnel. After the *VDT* has been conducted twice, a comparative analysis of the data will be conducted by SWD. The project aims to increase empathy for those living with dementia. The success of this goal will be determined by an increase in empathic care compared to results before *VDT* (significant positive variance between pre/post surveys). DACE scores closer to five indicate greater empathic person-centered care being performed.

c) The *VDT* takes something intangible, like empathy, and makes it tangible by allowing staff members to see themselves as impaired and behave in ways that simulate their residents. Through this understanding, staff begin to identify how their care towards their residents with dementia will change, directly impacting the residents. This is the core of empathic person-centered care, the ability to look at the residents living with dementia, identify with them, and respond accordingly.

d) Improved understanding for staff on how to care for residents with dementia.

e) Not applicable

Funded Entity(ies):

Second Wind Dreams

Results of the Project:

Interim Results: For this quarter, Second Wind Dreams (SWD) analyzed the first and second DACE assessment forms from 12 nursing homes. The results are as follows: during DACE, staff are scored using a five-point Likert scale across four domains of care. The average score at the first DACE (prior to the first *VDT*) was 2.84 out of five, the average score of the second DACE (after the first *VDT*) was 4.12 out of five This shows a marked improvement in providing person-centered care during activities of daily living (ADL) after going through the *Virtual Dementia Tour® (VDT).* Staff members utilize cueing, giving the resident choices, praising them, making eye contact with touch increased in all categories by almost a full point. Calm, gentle touch during care as opposed to rough and abrupt touch gives the person with dementia a

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Florida

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FL Active CMP Funded Projects in CY 2025: 10

sense of well-being that the care partner is paying attention to them in a caring way. Additionally, the increase in positive praise means that the care partners were focused on doing a task with the person with dementia rather than doing a task to them. After the *VDT*, staff also gave the residents more choices in how they would like to receive care. Keeping the person with dementia engaged in ADLs helps provide a sense of control over the process and creates diversion when necessary. Allowing the residents living with dementia the ability to make their own decisions decreases the likelihood of behavioral challenges during the caregiving session. After experiencing the social and environmental barriers of dementia during the *VDT,* staff's ability to provide a more person-centered approach to care increased. Challenges: a. The continued loss of two National Center for Competency Testing (NCCT) trainers has significantly reduced training capacity, however, this has not had a negative impact to date on our ability to staff and schedule the onsite training courses. SWD is actively recruiting for additional NCCTs and will request an amendment when suitable candidates are identified. b. One facility cancelled their quarterly site visit. c. CMS has determined that no new facilities will be allowed to take the place of facilities that either now choose they do not want to participate, or they have closed permanently. Case: One facility closed and has subsequently been demolished since the start of the project. Unfortunately, two other nursing homes have since declined to participate in the program.

Project Title: Enhancing Resident Care and Knowledge through Comprehensive Brochures and Digital Access

Unique Identifier: FL-1224-EPE-1243 / 2024-04-FL-0418

Project Duration: 07/01/2025 to 06/30/2026

Total Amount of CMP Funds Approved for this Project: $291,000.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $284,395.93

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The project addresses the critical gap of the lack of consumer information materials by developing an extensive suite of printed educational materials designed to empower nursing home residents and their families, enabling them to engage actively in care decisions and advocate for their rights. The program blends traditional printed brochures with modern digital technology utilizing dual QR (Quick Response) codes and a dedicated kiosk system.

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Florida

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b) The primary goal of *Enhancing Resident Care and Knowledge through Comprehensive Brochures and Digital Access* is to effectively bridge the informational divide within nursing homes. The project's commitment is centered around several key aims. Knowledge Enhancement: equip residents with comprehensive educational materials that bolster their understanding of personal health rights, care options, and resources available within the nursing home context. Resident Empowerment: empowering residents and their families, enabling them to actively engage in care decisions, making informed choices, and advocating for their preferences with confidence. Promotion of Person-Centered Care: foster a culture within nursing homes that deeply value open communication, informed decision-making, and collaborative partnerships between all stakeholders. Improvement of Quality of Life: improve the residents' quality of life by addressing key concerns such as appropriate medication management, injury prevention, and the advancement of proactive care planning. The project aims to collect the following outcome metrics. The number and percentage of brochures distributed in each language (based on nursing home resident demographics), the number of brochures distributed in each topic area (based on nursing home priority selections), the number of brochures taken from stands by residents and families (tracked through the kiosk scanning system during restocking), and feedback from nursing home staff on the effectiveness and utilization of the brochures (gathered through quarterly meetings). The overall brochure utilization rate is calculated by comparing the number of brochures taken from stands to the total number distributed to each nursing home.

c) The project will help foster an environment where residents feel truly empowered to participate in their own care, enhancing both their quality of life and the quality of care they receive.

d) This project will help benefit the nursing home by offering consumer information to residents and families on top topics of care and allowing staff to focus on direct care.

e) Not applicable

Funded Entity(ies):

Eperture, LLC

Results of the Project:

Interim Results: Exceptional Kiosk Adoption - Steady Growth in User Activity: The count over time shows a surge starting in mid-August at the start of the program and stays consistent as time went on. This trajectory indicates that once residents discover the kiosk, they aren't just using it once—they are making it a consistent part of their daily routine. High-Intent Engagement: An incredible 81% of total users triggered

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the "user engagement" event. In Google Analytics 4, this specifically indicates they didn't just walk by or tap the screen once, they actively interacted with the content for at least 10 seconds or viewed multiple screens. Deep Content Exploration: Users are interested in the information the project provides. With over 18,000 screen views showing users exploring different sections. Active Feedback Loop: The presence of nearly 1,000 "brochure feedback shown" event proves that residents are highly motivated to share their positive experiences. A core strength of this project is the integration of physical brochures alongside the digital kiosk platform. This multi-modal approach ensures that content is accessible regardless of a resident's technological comfort level, maximizing the reach of critical information such as "*Hurricane Prep*" and "*Heart Health*". 1. Substantive Reach Through Physical Media - Data collected during regional webinars reveals that physical brochure utilization is a significant driver of program awareness. a. Active Circulation: Facility staff reported that brochure usage consistently ranged from 10% to 40% across all participating locations. b. Established Baseline: The program has achieved a solid average utilization rate of 21%. In the context of self-service educational materials in a nursing home environment, this represents a high level of proactive engagement. c. Resource Efficiency: Notably, current inventory levels have proven sufficient to meet this demand, as no requests for restocking or additional ordering were triggered during this period. This indicates a highly efficient distribution model where resources are utilized effectively without waste. 2. Synergy with Digital Performance - The physical brochure data serves as a powerful "force multiplier" for the digital analytics already recorded: a. Total Ecosystem Engagement: While the kiosk recorded over 130,000 total events, the 20% average usage of physical brochures suggests a secondary layer of engagement that occurs away from the screen. b. Content Validation: The "Wonderful" and "Helpful" feedback rate of 89.94% likely extends to these physical materials, as the brochure content mirrors the successful digital modules such as "*Dementia (Family)"* and "*Hurricane Prep*". c. Holistic Communication: By providing both a digital and a physical takeaway, the project addresses diverse learning styles and physical needs. The combined data paints a picture of a robust, dual-track communication strategy. The digital kiosk provides deep, trackable engagement metrics (81% active engagement rate), while the physical brochures provide a consistent entry point for members of the community to access information quickly and easily. This synergy is a key indicator of project health where diverse resident needs must be met. Executive Summary: The applicant is thrilled to present this comprehensive analysis of the second quarter kiosk data, spotlighting the positive user feedback. With 507 total responses analyzed, the kiosks are performing very well, with an 89.94% overall positive feedback rate (encompassing "It was wonderful.", "It was helpful"). This report transforms raw data into a visual narrative, revealing trends that show consistent user delight, areas for targeted growth, and creative recommendations for improvement. Key Highlight: Feedback peaked with "It was wonderful." at 82.25%, indicating users are not just satisfied—they're educated. However, positivity remained sky-high, with "wonderful" ratings dominating and negative feedback dropping to 0% in December. Focusing on the top-

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performing brochures (covering ~70% of data), *Hurricane Preparation* has emerged as the clear volume leader, while several health topics achieved a "flawless" record with zero negative feedback. Other top brochures include *Arthritis and Pain*, *Fall Prevention*, *Senior Nutrition*, *Physical Activity*, *Chronic Illness*, Dementia (Family), *Heart Health, and Dementia (Resident)*. *Hurricane Preparation* dominates attention with over 100 feedbacks and an impressive 90%+ "Wonderful" rating. *Dementia (Family)* holds the title for the highest percentage of "Wonderful" ratings (95.24%). *Fall Prevention*, *Physical Activity*, and *Heart Health* - all receiving 0% negative feedback. Positive Insights: User Enchantment Dominates: 82% "wonderful" feedback, far surpassing industry benchmarks. Helpfulness on the Rise: November's 10% helpful rate shows growing practical impact—users aren't just entertained; they're empowered. Format Flexibility Wins Hearts: Text and video tie for high engagement, proving our multimodal approach resonates. "More Info" sections, though fewer, punch above their weight in helpfulness. December Triumph: Zero remaining negatives signal a strong close to the second quarter, and momentum for the third quarter. The kiosks aren't just functional, they're transformative, learning in everyday interactions. Recommendations: To build on this positive foundation and minimize the 3.55% remaining "wasn't helpful" (primarily voice/sounds and clarity issues), here are data-driven thoughts on how the project can improve. Voice and Sound Symphony: with 67% of residual negatives tied to audio, the program will implement warmer, more diverse tones and will A/B test "soothing narrator" vs. "energetic guide" in videos with the aim is to boost wonderful ratings by 5-10%. Clarity Crusade: 28% of residuals cite confusion, as result, the Eperture, LLC will enhance with simplified language in text and more information. This could elevate helpfulness to 15% overall. Emotional Elevation: Rare upsets (5%) suggest sensitive topics need softer framing. Eperture, LLC will update content to a softer tone on more sensitive topics (like Chronic Illness or Dementia Memory) that have shown this feedback. By implementing these, the project strives for the positive rate to increase in the third quarter. Successes: The kiosk data exceeded expectations on acceptability and usefulness with overwhelmingly positive feedback on the information presented. Webinars for those who attended were highly informative and sparked productive discussions regarding the implementation of the project. Challenges: Communication remains as the biggest challenge of the project. Getting responses to correspondence, whether through emails or phone calls proved difficult. Webinar participation was 33%. Getting responses to webinar invites and those invites to translate into attendees is a challenge. Lessons Learned: The project learned that contrary to common assumptions about technology and nursing home residents, they are eager to engage with digital tools when the interface is intuitive, and the content (like Hurricane Prep) is relevant to their immediate needs. There is a significant lack of education on the topics provided not only for residents and their families but also for staff members.

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Florida

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FL CMP Funds Expended for Emergency Uses in CY 2025: $0.00

FL Active CMP Funded Projects in CY 2025: 10

Project Title: Improving Dementia Capability with CARES Dementia 5-Step Method

Unique Identifier: FL-0325-HCI-1327

Project Duration: 08/01/2025 to 07/31/2028

Total Amount of CMP Funds Approved for this Project: $299,847.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $92,549.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The project aims to provide *CARES Dementia 5-Step Method* training to 20 Lilac Group locations to address the lack of evidence-based and evidence-informed staff dementia care training in non-pharmacological approaches in a consistent, sustainable manner. According to the Alzheimer's Association, training all levels of staff maximizes person-centered care outcomes (2018). In addition, training is essential for new staff and should be included in ongoing education for all staff members.

b) The goal is to help improve quality of care delivered to all Lilac residents, especially those living with Alzheimer's disease and related dementias (ADRD). To do this the project will implement a dementia training program for staff using the *CARES*® dementia online training, certification, and credentialing programs. The objectives include: 1. By March 31, 2028, Lilac Health Group will train 25% of staff in 20 nursing homes using the *CARES® Dementia 5-Step Method*™ and have 25% of staff participants receive their *CARES® Dementia 5-Step Certification*™. 2. By March 31, 2028, Lilac Health Group will train 15% of staff in 20 nursing homes using *CARES® Dementia Safety Topics*™ and have 15% of staff participants receive their *CARES® Dementia Safety Topics Certification*™. 3. By March 31, 2028, Lilac Health Group will train 15% of staff in 20 nursing homes using *CARES® Dementia-Related Behavior*™ and have 15% of staff participants receive their *CARES® Dementia-Related* Behavior™. 4. By March 31, 2028, Lilac Health Group will have three staff members per location earn *CARES® Dementia Specialist™ (C.D.S)* credentialling.

c) This project directly benefits residents improving their person-centered care and quality of life in the following ways: 1. Improved care delivery by teaching staff the evidence-based, non-pharmacological *CARES Dementia 5-step Method* called the *CARES Approach* (C-Connect with the Person, A-Assess Behavior, R-Respond Appropriately, E-Evaluate What Works, and S-Share with Others) to specifically focus on responding to challenging behavior and preventing escalation from the beginning of each care interaction. 2. Teaching staff non-escalation and de-escalation techniques that can lead to improved quality of care and decreased use of antipsychotic

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Florida

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medications. 3. Improving staff engagement with residents focusing on connecting with the resident in a deep and meaningful way. 4. Encouraging positive culture change based on person-centered values and practices including choice, dignity, respect, self-determination, and purposeful living.

d) Improve staff knowledge on how to care for dementia residents.

e) Not applicable

Funded Entity(ies):

HealthCare Interactive, Inc.

Results of the Project:

Interim Results: Training and Certification Progress - *CARES® Dementia 5-Step Method™:* Started: 149 (% Total Staff: 5.6%). Completed: 134. Certification Completed: 123. *CARES® Dementia Safety Topics™:* Started: Six (% Total Staff: 0.2%. Completed: Two Certification Completed: One. *CARES® Dementia-Related Behavior™:* Started: Three (% Total Staff: 0.1%) Completed: Three. Certification Completed: Two. *CARES® Dementia Specialist™* Credential: Distributed (but not started): 20. Completed: 0. Certification Completed: 0. Successes - 1. The applicant is experiencing wonderful partnership with Lilac Health Care! Staff members have been very responsive, communicative with site champions, collaborative with consultants from RB Health Partners, and extremely positive to work with. 2. *CARES* has begun in all sites with a successful kick-off to the project. 3. RB Health Partners held two monthly webinars (September 11, 2025, and October 23, 2025) with excellent participation by sites. 4. RB Health Partners held two monthly "Office Hours" (September 25,2025 and October 9, 1025) with excellent participation by sites. Challenges: The applicant had some early challenges with sites starting the first program but worked with Lilac to kick off a virtual training for *CARES Dementia 5-Step Method* (the first program) so that staff members and site champions could attend via Zoom and complete the entire program. Three sessions were led by *CARES* founder with great success. Lessons Learned: 1. The biggest lesson learned was the need to roll things out a bit more slowly than anticipated so as not to overwhelm the 20 participating nursing facilities. 2. The second lesson learned was the huge success of the virtual Zoom-based trainings led by John Hobday. Of the eight sites attending sessions this week, six sites ranked the virtual sessions as a 10 out of 10 in satisfaction with zero suggestions for improvement or critiques.

Florida

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FL CMP Funds Expended for Emergency Uses in CY 2025: $0.00

FL Active CMP Funded Projects in CY 2025: 10

Project Title: Rehospitalization Reduction Collaborative

Unique Identifier: FL-0425-FHCE-1328

Project Duration: 09/01/2025 to 08/31/2026

Total Amount of CMP Funds Approved for this Project: $224,166.60

Total Amount of CMP Funds Expended During CY 2025 for this Project: $55,240.93

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The *Rehospitalization Reduction Collaborative* is an educational, highly interactive one-year pilot initiative aimed at reducing rehospitalizations in nursing homes by addressing the underlying causes of hospital readmissions. Through a series of collaborative learning sessions, practical application of Quality Assurance Performance Improvement (QAPI) principles and team coaching, nursing home providers will learn to apply data-driven approaches to address root causes of rehospitalizations, implement evidence-based interventions, and effectively monitor progress.

b) The goal of the *Rehospitalization Reduction Collaborative* is to empower nursing home administrators and their respective teams by fostering a culture of continuous improvement and providing a skillset to influence change management. Through targeted education on quality improvement methods and tools (e.g., Root Cause Analysis (RCA), Plan-Do-Study-Act (PDSA)) in addition to clinical topics associated with rehospitalizations, participating nursing home staff will be equipped with the knowledge and tools needed to systematically address avoidable rehospitalizations and strengthen facility-level QAPI efforts which can be conveyed to other quality improvement initiatives. Given the increasingly complex nature of operations, nursing home leadership needs to understand and feel comfortable creating QAPI Programs that integrate all components of operations and include members of their entire interdisciplinary team. Self-Rated Assessment Score: A self-assessment will be completed by members of each participating facility team at the beginning and end of the program in order to compare pre-post measurements, a unique identifier will be assigned to each individual based upon the facility they represent. The purpose of the assessment is to allow teams to collectively evaluate performance within the organization related to key factors associated with rehospitalizations. Given the appropriateness of a situational assessment prior to implementation, scores will be used to aid in targeted planning, desired outcomes for participants, and should lead to sustainable outcomes. Score ranges will be from 27 to 135 with a lower score equating to a better score. The assessment will be distributed via Qualtrics®,

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a web-based software frequently utilized for data collection. GOAL #1: By May 31, 2026, participating provider self-rated assessment scores will improve (higher scores are better) by 10% from the baseline assessment which will be collected in June 2025. Facility-Level Rehospitalization Rates: Two measures of facility-level short and long rehospitalization rates from each participating provider will be collected at baseline, at the midpoint of the project, and at the conclusion of the project. Participants will be asked to provide their rates utilizing their electronic health records in order to capture real-time data and to ensure that improvement initiatives are aligned with current QAPI efforts. Initial requests for metric information will be made via Qualtrics®, and follow-up requests will be made, as needed, in order to ensure data reliability for the project. GOAL #2: By May 31, 2026, short stay rehospitalization rates for participating providers will improve by 5%, on average, from the baseline assessment which will be collected in June 2025. GOAL #3: By May 31, 2026, the average long stay rehospitalization rate for participating providers will improve by 3%, on average, from the baseline assessment which will be collected in June 2025.

c) Reducing rehospitalizations improves continuity of care, leads to better health outcomes, fewer disruptions in daily routines, and provides residents with a stronger sense of security.

d) Fostering closer relationships between residents and caregivers, thus promoting an elevated person-centered approach to care.

e) Not applicable

Funded Entity(ies):

Florida Health Care Education and Development Foundation (FHCEDF)

Results of the Project:

Interim Results: Summary of Program Activities: Program activities which took place for each month of the project reporting period were kick-off meetings, virtual education, baseline data collection, and individual team discussions. A total of four (4) live kick-off meetings were held at the offices of Aston Health Consulting Services located at 10150 Highland Manor Drive in Tampa, Florida. All other meetings were held virtually. ElevateLTC, a web-based educational platform hosted by Q3 operates as a central repository for all meeting recordings, slide decks, resource handouts, data submission templates, and on-demand training modules. This platform enabled participating providers to stay abreast of project activities if an activity was missed and also afford participants an opportunity to share education and resources with other team members in their respective centers. Data Collection: Baseline data for three measures were collected during the first quarter of the collaborative. Specific measures and reported data are as follows -

State Civil Money Penalty Reinvestment Projects Funded in Calendar Year (CY) 2025
Atlanta Long-Term Care Location

Florida

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Baseline Short-Stay (SS) Rehospitalization Rate: Measure defined as the number of short-stay rehospitalizations (hospitalized/total number of SS residents being treated). During the first quarter of the collaborative, 53% (n=24) participating providers submitted baseline short stay dates. Rates averaged 27.65% (rehospitalization rates for baseline utilized three months of data (June, July, August) which were averaged to obtain the baseline rate.). Baseline Long-Stay Rehospitalizations: Measure defined as the number of long-stay rehospitalizations hospitalized/total number of long-stay residents being treated). During the first quarter of the project, 53% (n=24) facilities submitted baseline long-stay rates with an average of 8.18 % (rehospitalization rates for baseline utilized three months of data (June, July, August) which were averaged to obtain the baseline rate.). Self-Assessment Score: Individual facilities rated their knowledge of QAPI methodologies and use of Interact tools. During the first quarter of the collaborative, 71% of the participating facilities (n=31) submitted baseline self-assessment data. Scores ranged from 45 points (score of 39%) to 115 points (score of 100%). The average was 74.81% and the median score was 71%. Program Successes/Challenges/Lessons Learned: Successes: Notable successes were made during the first quarter of the project term. Active support has been observed in both the live kick-off meetings as well as the October and November virtual meetings. Overall, participation of engaged leaders is reporting significant system improvements within their respective facilities and have provided feedback related to strengthening systems in their facility, improved data awareness and use as well as feedback related to educational content delivery. With regard to systems improvement, many facilities have made a commitment to educating staff on early identification and changes in condition and have seen significant reductions. For example, one facility improved from 42 to 24 hospitalizations over a 60-day period. Another expanded electronic Point of Care documentation in Point Click Care® (PCC) capability beyond clinical staff to include all staff (e.g., housekeeping, maintenance). Other participating providers have signified systems improvement related to medication reconciliation enhancements (multi-step verification and pharmacy involvement), expanded use of INTERACT tools (Stop and Watch, Situation-Background-Assessment-Recommendation (SBAR), change-in-condition workflows), focused monitoring during the first 72 hours post-admission, clear escalation expectations prior to hospital transfer, increased Medical Director and mid-level provider involvement in high-risk case review, and improved family communication through palliative and interdisciplinary engagement. With regard to data use, facilities have reported increased use of PCC Hospital Tracker and quality improvement (QI) tools to: review transfers by the day of week and time of day, support case-level discussions, and reduce reliance on anecdotal or gut-based decision-making. Providers have also noted that the process of structured data review was beneficial even if no clear trend was identified. Feedback has also been obtained relative to the education delivery model with participating providers suggesting live virtual meetings were beneficial for real-time discussion, clarification, and application; whereas on-demand access to recorded sessions supported: Leadership turnover, Staff onboarding, Just-in-time education. Finally, the blended live and recorded format appeared to improve

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consistency and continuity across facilities despite leadership turnover. Challenges: Notable challenges were identified during the first quarter of the program. First, monitoring, updating, and repetitive onboarding to the project was necessary due to high turnover rates across the participating providers. Second, some providers were reluctant to schedule 30-minute calls each month indicating that a new focus by corporate staff in addition to the project created an additional workload for facility level team members. Additional challenges noted included limited foundational understanding and operational use of QAPI tools among some nursing home administrators (NHAs) and directors of nursing (DONs). This resulted in observable gaps which included: determinations based on perception rather than structured analysis, limited interdisciplinary involvement, and findings from root cause analyses not being documented or reviewed in QAPI meetings. Other QAPI related issues identified were providers with no active performance improvement project (PIP) in place, outdated PIPs not aligned to evidence-based return-to-hospital (RTH) drivers, PIPs functioning as static documents rather than operational roadmaps, and a lack of clear goals, metrics, ownership, timelines, and monitoring cadence. These gaps limit sustained systems improvement and the ability to reliably distinguish avoidable from unavoidable rehospitalizations. Lessons Learned - The first three months of the collaborative reinforced that successful large-scale improvement efforts depend as much on program design, recruitment strategy, and engagement structure as on technical content. Aligning recruitment with real-time data, ensuring facility-level commitment, involving corporate leadership early, tailoring engagement depth to facility readiness, and explicitly addressing QAPI capability are critical to maximizing impact and sustainability in future initiatives. Specific lessons learned included: 1. The time lag between reviewing publicly reported rehospitalization data, recruiting facilities, and initiating grant activities reduced the program's momentum and relevance for some participants. By the time engagement began, several facilities had already initiated improvement efforts independently, which diluted urgency and complicated attribution of early outcomes. Future initiatives should shorten the interval between data review and program launch, consider rolling or staggered enrollment, or use more contemporaneous data sources to ensure recruitment aligns with current performance conditions. 2. While corporate-level recruitment enabled broader system participation, it frequently resulted in limited awareness, ownership, or commitment at the facility level. In some cases, facility leaders were unclear about expectations or did not perceive the initiative as aligned with their immediate priorities. Recruitment strategies should intentionally include facility-level agreement and readiness confirmation, potentially through documented buy-in, defined participation expectations, or identification of an on-site project lead responsible for execution. 3. Facilities with visible corporate or regional involvement demonstrated greater consistency in data submission, monitoring, and follow-through. Where this support was absent, facilities often struggled with prioritization, access to data, or sustained engagement. Future collaboratives should formally include corporate and/or regional leadership in kick-off meetings to reinforce expectations, ensure data availability, and support outcome monitoring across the life of the project. 4. Monthly 30-minute calls were insufficient for facilities

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FL CMP Funds Expended for Emergency Uses in CY 2025: $0.00
FL Active CMP Funded Projects in CY 2025: 10

needing deeper support in data interpretation, root cause analysis, and performance improvement planning. Short calls limit the ability to move beyond surface-level discussion, particularly for facilities with lower QAPI maturity or leadership turnover. Programs should incorporate flexible engagement models, such as longer or less frequent deep-dive sessions, tiered support based on readiness, or structured agendas focused on analysis and action rather than status updates. 5. Variation in QAPI knowledge and operational maturity across participating facilities significantly affected how effectively guidance could be applied. In several cases, improvement efforts were constrained by limited understanding of how to operationalize root cause analysis, integrate findings into QAPI, or use PIPs as active management tools. Future initiatives should explicitly assess and address baseline QAPI capability early and incorporate foundational education or prerequisites to ensure participating facilities can fully leverage improvement support. 6. The project demonstrated that engagement level, not enrollment, was the primary driver of progress. Facilities with active leadership participation, consistent data review, and internal accountability structures derived the greatest value from the initiative. Future project design should incorporate clear participation criteria, including leadership involvement, data submission requirements, and minimum engagement expectations, to maximize impact and efficient use of resources. 7. Leadership turnover was a persistent reality across participating facilities and required repeated onboarding and reorientation, consuming time, and resources. Collaborative models should be intentionally designed for high-turnover environments, with structured onboarding pathways, clear documentation of expectations, and mechanisms to maintain continuity despite leadership changes. Conclusion: The Rehospitalization Reduction Collaborative has demonstrated measurable progress in increasing facility engagement, strengthening data-informed decision-making, and supporting the implementation of evidence-based practices to reduce avoidable hospitalizations. Through structured assistance, facilities implemented meaningful process improvements while identifying a critical opportunity to strengthen leadership competency in QAPI, RCA, and operational performance improvement planning. These findings will guide ongoing support and targeted improvement efforts.

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Georgia

GA CMP Funds Expended for Administrative Uses in CY 2025: $79,026.69

GA CMP Funds Expended for Emergency Uses in CY 2025: $0.00

GA Active CMP Funded Projects in CY 2025: 4

Project Title: Georgia Long-Term Care Infectious Disease Educational Program

Unique Identifier: GA-1120-UGARFI-692 / 2020-04-GA-1117

Project Duration: 05/01/2021 to 11/30/2025

Total Amount of CMP Funds Approved for this Project: $1,576,873.39

Total Amount of CMP Funds Expended During CY 2025 for this Project: $65,365.99

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The three-year *Georgia Long-Term Care Infectious Disease Educational Program* will be available to all Georgia-certified long-term care (LTC) facility clinicians. The program will provide resources via printed materials, a thumb drive, online password-protected portals, a project webpage, biannual e-newsletters, and three educational videos.

b) The project will provide 21 *LTC Infectious Disease* – Foundations Courses and 21 LTC Infectious Disease – Principles Courses, resulting in a total of 14 course offerings per project year.

c) Increased participation in facility-level infection control programs can decrease infection rates and facilitate improved hygiene practices, improving the quality of care for the residents.

d) The educational program aims to enhance community partnerships and reduce infection rates, benefiting the residents of nursing homes in Georgia.

e) Partnering agencies include the Georgia Health Care Association, the Georgia Department of Public Health, Project Firstline, the Centers for Disease Control and Prevention, and the Georgia Healthcare Coalition leadership.

Funded Entity(ies):

University of Georgia Research Foundation, Inc.

Results of the Project:

Over the project period and no-cost extension, the program delivered 48 educational courses (42 in-person, six virtual) to clinical and non-clinical nursing home (NH) staff statewide. Sixty-one percent (61%) of Georgia's nursing homes (NHs) participated in the educational program with an average knowledge gain of 20 points across two courses and delivery methods. Numerous resources were developed and distributed

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Georgia

GA CMP Funds Expended for Administrative Uses in CY 2025: $79,026.69
GA CMP Funds Expended for Emergency Uses in CY 2025: $0.00
GA Active CMP Funded Projects in CY 2025: 4

including six biannual e-newsletters, three educational videos, and two password-protected online resource portals. The program received overwhelmingly positive feedback, particularly on the program's organization, resources, and knowledgeable instructors. One nursing home reported a reduced infection rate from 13.9% to 3.6% after program participation. Engaging infection prevention education for all NH staff improves staff confidence, strengthens compliance with regulatory standards, and reduces infection rates. The virtual courses offered through the no-cost extension period were beneficial for staff to participate in the program with fewer access barriers.

Project Title: A Trauma-Informed Approach to Improving Dementia Care in Georgia's Nursing Homes

Unique Identifier: GA-0621-GSU-809 / 2021-04-GA-0628

Project Duration: 09/01/2021 to 08/31/2025

Total Amount of CMP Funds Approved for this Project: $1,578,486.33

Total Amount of CMP Funds Expended During CY 2025 for this Project: $189,093.48

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The project supports the delivery of person-centered dementia care by resourcing Georgia's skilled nursing home staff to develop competencies through several modalities, including microlearning videos, live and asynchronous webinars, and access to continuing education. Education will equip staff with key competencies in the following areas: trauma-informed approach, person-centered dementia care, non-pharmacological approaches, resident engagement, inclusive communication, culture change, and evidence-based quality improvement processes.

b) The project will publish a total of 36 micro-learnings related to the seven competency areas, deliver at least 18 contact hours of live and asynchronous webinars targeting the development of the seven competency areas, provide "seats" for 450 nursing home staff to complete intensive education on person-centered care and non-pharmacological approaches to dementia care, demonstrate positive change in practice for nursing home staff related to person-centered care, culture change, quality improvement practices, and non-pharmacological approaches. Changes in practice will be evaluated pre- and post-intensive education using the Kansas Culture Change instrument.

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Georgia

GA CMP Funds Expended for Administrative Uses in CY 2025: $79,026.69
GA CMP Funds Expended for Emergency Uses in CY 2025: $0.00
GA Active CMP Funded Projects in CY 2025: 4

c) The training will benefit nursing home residents, as staff will provide advanced, person-centered dementia care by developing relationships with them, identifying each resident's individual needs and behaviors, fostering empathy, and creating a care plan tailored to meet the needs of each resident with dementia.

d) The project will enhance the nursing home environment and foster a culture change for both staff and residents. Changes in practice around the misuse of antipsychotic drugs and non-pharmacological approaches will be assessed using reported practice measures.

e) Nursing home staff and stakeholders, including residents, informal care partners for a resident (family, friend, volunteer), the Georgia Long Term Care Ombudsman, and the State of Georgia Surveyors.

Funded Entity(ies):

Georgia State University, Gerontology Institute

Results of the Project:

By the end of 2025, the project reached individuals working at 165 nursing centers in Georgia with at least one contact hour of training. This cumulative number includes those who have completed a webinar, Georgia Health Care Association (GHCA) virtual event, the pre-conference intensive at Georgia Medical Directors Association (GMDA) and those using seats for intensive training, e.g., Certified Eden Associate Training, Dementia Beyond Drugs). Eighty (80) nursing homes had staff that attended multiple events. There were more than 1,907 registrants for the 26 live webinars and hybrid events delivered, including staff and stakeholders from 69 nursing homes (with 15 of them being late adopters or one-star rated homes). For Certified Eden Associate Training (CEAT), 82 staff and stakeholders and staff from 14 nursing homes have completed the 2022 training, 70 staff and stakeholders from 11 nursing homes have completed the 2023 CEAT class, and 88 nursing home participants from 12 nursing homes completed the 2024 CEAT class, which concluded April 30, 2024. For Dementia Beyond Drugs (DBD), 124 staff and stakeholders from 24 nursing homes completed the first training session in 2022, 109 staff and stakeholders completed the second DBD training in 2023, and 95 staff and stakeholders completed the third DBD training, which concluded September 26, 2024. There has been a positive impact of the intensive training. In evaluating the results from the pre- and post-test for the *Dementia Beyond Drugs* training, a significant improvement is seen with a moderate effect size on relationship quality, staff empowerment and quality improvement practices as measured by the three subscales of the Kansas Culture Change Instrument (p=<0.05). This indicates that improvements have been made to support person-centered care, on average, at nursing

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Georgia

GA CMP Funds Expended for Administrative Uses in CY 2025: $79,026.69
GA CMP Funds Expended for Emergency Uses in CY 2025: $0.00
GA Active CMP Funded Projects in CY 2025: 4

homes whose staff completed training. Further, there was a significant increase in the staff discussions of appropriate anti-psychotic drug use within the nursing home (p=< 0.05). To date, sixteen quarterly newsletters were distributed via email distribution list with links to compiled person-centered dementia care resources. Approximately 880 social media posts and digestible microlearning educational content (including reposts) have been made, and 26.5 contact-hours of person-centered dementia care content have been delivered through live webinars and asynchronous options for nursing home staff (26.5 contact hours have been delivered live; 25 contact hours were available asynchronously). Moreover, nursing staff and stakeholders have opportunities to access project content via two websites, including newsletters, video-blogs, and educational social media. The applicant's social media sites, specifically their YouTube channel, where they published microlearning videos from the project, have increased dramatically up to 544 subscribers (from 78 subscribers in 2021) with more than 127,000 views (up from 14,753 views in 2021).

Project Title: Georgia It's Never Too Late (iN2L) iNSIGHT Project

Unique Identifier: GA-1121-INL-867 / 2021-04-GA-1103

Project Duration: 03/01/2022 to 02/28/2025

Total Amount of CMP Funds Approved for this Project: $642,227.50

Total Amount of CMP Funds Expended During CY 2025 for this Project: $9,958.98

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The *Georgia iNSIGHT (Integrate Fun, Sustainable, Innovative, Groundbreaking and Helpful Technology) Project* will be implemented in nine skilled nursing facilities focusing on internet access that can serve as a communications medium and a means for residents to interact with their communities of affinity (family, friends, and those who share their interests) outside the facility or to use for various programs and tools for residents' engaged entertainment.

b) The project goals are to create resident profiles with 80% of the resident census in each participating skilled nursing facility and increase activity participation by 20%.

c) It's Never Too Late (iN2L) enables skilled nursing facilities (SNFs) to provide their residents with dignity and additional opportunities for choice, social integration, and interaction with their caregivers, family, and friends. Engagement technology offers residents opportunities to stay

Georgia

GA CMP Funds Expended for Administrative Uses in CY 2025: $79,026.69
GA CMP Funds Expended for Emergency Uses in CY 2025: $0.00
GA Active CMP Funded Projects in CY 2025: 4

connected through experiences and life-enriching activities, while improving or maintaining their level of function.

d) iN2L's content offers various function levels and interests to engage residents, including those with cognitive impairment, resulting in improved quality of life and better overall health outcomes.

e) Not applicable

Funded Entity(ies):

iN2L (It's Never Too Late)

Results of the Project:

Over the course of the grant period, the *Georgia iNSIGHT Project* demonstrated meaningful success in enhancing resident engagement, activity participation, and overall quality of life through utilizing the Its Never Too Late (iN2L) group systems across the nine participating communities. Despite challenges such as COVID-19 outbreaks, staff turnover, and technical issues, the program achieved strong adoption and sustained usage, totaling more than 16,000 hours of system engagement. On average, six of the nine communities consistently qualified as “super users,” reflecting successful integration of iN2L into daily operations and resident programming. Quality of Life (QOL) survey data collected quarterly throughout the project indicates positive outcomes across key wellness indicators. Overall results show increases in positive emotions, decreases in negative emotions, and notable improvements in activity participation and social connection. Importantly, six of the nine communities met or exceeded the project goal of increasing activity participation by 20%, with several communities significantly surpassing this benchmark. These findings reinforce iN2L’s value as an effective engagement tool that supports emotional well-being and social interaction among residents. Resident profile creation also demonstrated progress, with 384 resident profiles created across all communities. Through ongoing training and support, three communities achieved the target of enrolling at least 80% of their census, reflecting strong staff engagement and sustained implementation efforts. The successful integration of technology into daily activities was further evidenced by qualitative feedback from participating communities. Testimonials, such as the experience shared by a participating nursing home, highlight high resident enthusiasm, ease of use, and meaningful enrichment of residents’ daily lives contributing to continued adoption beyond the grant period. In conclusion, the Georgia iNSIGHT grant project met its core objectives and delivered lasting value to residents, staff, and families. As a testament to the program’s impact, six of the nine communities elected to continue their iN2L subscriptions after the grant concluded, ensuring ongoing access to engaging, resident-centered

Georgia

GA CMP Funds Expended for Administrative Uses in CY 2025: $79,026.69

GA CMP Funds Expended for Emergency Uses in CY 2025: $0.00

GA Active CMP Funded Projects in CY 2025: 4

technology. Overall, the project successfully advanced resident wellness, engagement, and quality of life while establishing a sustainable model for continued use.

Project Title: Inclusive Virtual Dementia Tour Education Program

Unique Identifier: GA-0724-SWD-1208 / 2024-04-GA-0426

Project Duration: 09/01/2024 to 08/31/2026

Total Amount of CMP Funds Approved for this Project: $698,076.71

Total Amount of CMP Funds Expended During CY 2025 for this Project: $215,315.08

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of the Second Wind Dreams, Inc. (SWD), *Virtual Dementia Tour Comprehensive Education Program* project is to provide the *Virtual Dementia Tour® (VDT®),* the Dementia Aware Competency Evaluation® (DACE®), and the newest program, the *Inclusive Virtual Dementia Tour (IVDT)* to 75 skilled nursing homes across the state of Georgia. The *IVDT* project specific purpose is to educate and equip nursing home staff to provide emphatic person-centered care for patients with dementia.

b) In this project, nursing home staff will receive training on the experience of dementia under a standard care environment through the *VDT* in year on. In year 2, staff will be guided through the experience of care delivery in an inclusive, empathic person-centered environment through training and implementation of the *IVDT* in year two. Each nursing home will achieve a collective 90% or higher score indicating a high level of knowledge to care for residents with dementia by utilizing person-centered care principles. This metric will be analyzed through data collection of pre- and post-*VDT* training surveys.

c) This project will benefit the nursing home residents directly through enhanced and emphatic care and greater understanding of the daily life of their residents with dementia.

d) The *IDVT* project will benefit the nursing home staff directly because of improved care competencies, and significant change in staff attitudes toward all residents, specifically those residents with dementia.

Georgia

GA CMP Funds Expended for Administrative Uses in CY 2025: $79,026.69
GA CMP Funds Expended for Emergency Uses in CY 2025: $0.00
GA Active CMP Funded Projects in CY 2025: 4

e) The Culture Change Network of Georgia, the Georgia Health Care Association, Alliant Health Solutions (QIN-QIO), and LeadingAge Georgia will be included in awareness initiatives to encourage nursing homes to take advantage of this project. Additionally, residents and family members of residents will be encouraged to be involved in *VDT* and *IVDT* site visits.

Funded Entity(ies):

Second Wind Dreams, Inc.

Results of the Project:

In the first year of the *Virtual Dementia Tour®,* Second Wind Dreams successfully implemented the program in 64 nursing homes across 52 Georgia counties, training 1,011 staff members. Activities included on-site *Virtual Dementia Tour*® experiences, Dementia Aware Competency Evaluation® (DACE®) assessments, behavioral observations, post-tour debriefs, and facilitator support. Standardized training materials, surveys, evaluation tools, and site visit documentation were deployed as approved deliverables. Pre-and post-survey data and DACE results demonstrate measurable improvements in staff empathy, person-centered caregiving behaviors, and understanding of dementia-related behaviors. 94% of participants reported the training would change how they care for residents. Challenges included incomplete paperwork submissions, training cancellations due to staffing or weather, facilities that declined to participate, and one facility closure. Corrective actions included enhanced follow-up, coaching, and flexible scheduling.

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Kentucky

KY CMP Funds Expended for Administrative Uses in CY 2025: $66,536.22

KY CMP Funds Expended for Emergency Uses in CY 2025: $0.00

KY Active CMP Funded Projects in CY 2025: 23

Project Title: Stories in Mind

Unique Identifier: KY-0621-FHM-801 / 2021-04-KY-0527

Project Duration: 05/23/2022 to 05/22/2025

Total Amount of CMP Funds Approved for this Project: $581,059.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $106,012.73

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The project aims to provide nine certified nursing facilities (CNFs) with weekly programming options focusing on art, music, theatre, and history. The program aims to engage, entertain, and provide socialization opportunities, creating purposeful, collaborative works, such as stories, plays, songs, and artwork, which can be shared among residents, their family members, and staff.

b) The program will provide a total of 2,718 engagement sessions at nine CNFs over three years with the goal of 90% of facilities agreeing that the programming will help residents combat feelings of loneliness and isolation; help to create confidence via a sense of purpose and accomplishment; provide increased opportunities for meaningful connections between residents, family members, and staff; provide fun and entertainment at each session; help to increase calmer behavior among participating residents, which leads to increased success in general care procedures such as bathing, dressing, medical checks, and eating behaviors; increases verbal communication; improves attitudes and general demeanor.

c) The project will improve residents' quality of life by providing engaging, creative art and history-centered activities that cater to residents regardless of their cognitive abilities.

d) The programming provides a meaningful activity for the residents.

e) The target audience beyond the residents includes the certified nursing facility (CNF) staff and residents' families, who will receive training to understand how the *Stories in Mind* program works and provide input on the types of engagements that are interesting and beneficial to the residents.

Funded Entity(ies):

Frazier History Museum

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Kentucky

KY CMP Funds Expended for Administrative Uses in CY 2025: $66,536.22

KY CMP Funds Expended for Emergency Uses in CY 2025: $0.00

KY Active CMP Funded Projects in CY 2025: 23

Results of the Project:

The project delivered on-site cultural programming in fine arts, theatre, music, and storytelling, incorporating historical events and artifacts to engage residents. Program goals included reducing isolation and loneliness, fostering confidence through purpose and accomplishment, increasing opportunities for socialization, and providing meaningful enjoyment and entertainment. A total of 1,192 sessions were conducted across 14 campuses, reaching 11,893 total attendees and averaging 9.97 participants per session. One hundred percent (100%) of reporting certified nursing facilities (CNFs): Notice a positive change in participating residents' demeaner with 75% reporting "a great deal", 16.7% "a lot", and 8.3% "a moderate amount". Observed a reduction in feelings of loneliness and depression among residents with 83.3% reporting "a great deal," and 16.7% "a lot." Noticed a stronger sense of community among residents, with 91.7 reporting "a great deal" and 8.3% "a lot." Observed an increase in residents' enthusiasm for lifelong learning, along with a stronger sense of pride, purpose, and creativity, with 75% reporting "a great deal", 16.7% "a lot", and 8.3% "a moderate amount." Rated the Stories in Mind program as either "a very high quality" (91.7%) or "high quality" (8.3%). Resident feedback was overwhelmingly positive, with many describing the program as "the best thing they attended" and "the only reason they leave their room."

Project Title: Promoting Health Across the Lifespan Among Kentucky Certified Nursing Facility Residents Through Bingocize®, an Evidence-based Health Promotion Program

Unique Identifier: KY-0621-UKRF-806 / 2021-04-KY-0614

Project Duration: 07/01/2022 to 06/30/2025

Total Amount of CMP Funds Approved for this Project: $1,086,310.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $297,962.11

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The project's purpose is to implement *Bingocize*® (a combination of physical exercise and the game of bingo) in 30 certified nursing facilities (CNFs) over a three-year term to improve the quality of life (QOL) of nursing home residents.

b) The project will expand on previous efforts by expanding the *Bingocize*® program and staff training to 30 additional CNFs, recruiting a minimum of 12 faculty and 120 students from a minimum of six

Kentucky

KY CMP Funds Expended for Administrative Uses in CY 2025: $66,536.22
KY CMP Funds Expended for Emergency Uses in CY 2025: $0.00
KY Active CMP Funded Projects in CY 2025: 23

Kentucky universities to be trained to lead *Bingocize*® with residents, and improving the quality of life of CNF residents at the 30 participating CNFs across Kentucky with the goal of 75% of residents demonstrating improved functional status and social engagement after participating in *Bingocize*®.

c) The program will benefit residents by improving functional performance, leading to maintenance in activities of daily living (ADLs), reducing fall risk, and improving social engagement by allowing residents to communicate with other residents, staff, and university faculty and students.

d) Provides a meaningful activity for residents.

e) The direct care staff, faculty, and students trained to lead *Bingocize* sessions are the target audience beyond the resident. In addition to assisting the CNF with implementing the program, students provide social and inter-generational relationships that benefit both the student and the resident.

Funded Entity(ies):

The University of Kentucky Research Foundation

Results of the Project:

The project recruited 21 certified nursing facilities (CNFs) and seven university partners to participate in the project. By the end of Year 2, the project exceeded its objectives for the number of participating residents, student volunteers, and CNF staff trained in *Bingocize*®*:* 1,877 residents reached, exceeding the goal of 1,100; 323 student volunteers engaged with *Bingocize*® sessions, exceeding the goal of 120; and 72 CNF staff trained as *Bingocize*® coaches, exceeding the goal of 60. At project close, facilities received final communications and resources to support independent continuation or planned conclusion of *Bingocize*® programming based on site-specific capacity and needs. Thirteen CNFs plan to continue *Bingocize*® sessions beyond the project period, funding curriculum reinforcement through facility budgets or donations.

Project Title: Accelerating Quality Improvement for Long-Stay Residents in Kentucky Nursing Homes Using Culture Change During COVID-19

Unique Identifier: KY-0821-AI-822 / 2021-04-KY-0728

Project Duration: 06/30/2022 to 06/29/2025

Total Amount of CMP Funds Approved for this Project: $1,724,366.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $592,412.08

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Kentucky

KY CMP Funds Expended for Administrative Uses in CY 2025: $66,536.22
KY CMP Funds Expended for Emergency Uses in CY 2025: $0.00
KY Active CMP Funded Projects in CY 2025: 23

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The project aims to maximize residents' quality of life (QOL) by using the *Eden Alternative Path to Mastery* protocol in eight certified nursing facilities (CNFs) over three years in two phases (Milestones 1 and 2).

b) Participating CNFs will go through the *Eden Path to Mastery* training and education for the Eden Alternative Milestones 1 and 2, receive consultation and technical assistance from Altarum and Eden staff, and receive performance feedback to drive sustained quality and process improvements. Desired outcomes include: Each nursing home will report progress on at least 50% of the Systems Change Tracking Tool (SCTT) items. Each home's residents report progress on at least 40% of the items in the Resident Systems Change Tracking Tool (R-SCTT). Among those registered to attend, 90% of nursing home staff members will receive certification through Certified Eden Associate Training (CEAT). Throughout the project, nursing staff turnover will be reduced by 5% aggregate across all participating nursing homes.

c) Residents will benefit from improved quality of life by utilizing the Eden Alternative to reduce social isolation.

d) More knowledgeable staff will benefit the nursing home overall.

e) The CNF staff, administration, and resident families.

Funded Entity(ies):

Altarum Institute

Results of the Project:

The three-year project aimed to improve quality of life and advance person-directed care through implementation of the *Eden Alternative Path to Mastery*® within eight certified nursing facilities (CNFs) across seven Kentucky counties, impacting 761 residents. Training and technical assistance provided by the Eden and Altarum teams accelerated culture change across participating facilities. Final Results: Seven of eight CNFs achieved full implementation in more than 50% of Systems Change Tracking Tool (SCTT) goals. All CNFs received the R-SCTT; six received targeted R-SCTT training as part of case study development, and four incorporated the tool into QAPI initiatives. Staff training participation reached 90%, with 251 CNF staff completing Certified Eden Associate Training (CEAT). Improved workplace and leadership culture contributed to measurable staffing retention gains, with six CNFs reducing turnover by at

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Kentucky

KY CMP Funds Expended for Administrative Uses in CY 2025: $66,536.22
KY CMP Funds Expended for Emergency Uses in CY 2025: $0.00
KY Active CMP Funded Projects in CY 2025: 23

least 10% between Q2 2022 (57.5%) and Q4 2024 (46.6%). One participating CNF entered the project with only 12 nurses directly employed, relying primarily on agency and contract staff. Over the three-year period, the facility transitioned to direct employment, attributing the shift to cultural improvements that strengthened staff engagement and perceived organizational value.

Project Title: Providing Enrichment Around Residents' Lives (PEARL)

Unique Identifier: KY-1021-RSN-859 / 2021-04-KY-1013

Project Duration: 07/01/2022 to 06/30/2025

Total Amount of CMP Funds Approved for this Project: $38,741.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $6,220.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The project aims to deliver a person-centered experience and to meet the specific needs of Redbanks' residents, staff, and families with It's Never Too Late (iN2L) technology.

b) The project will implement iN2L adaptive computer technology to improve the quality of life (QOL) of 50 residents and improve communication between them, their families, friends, and the community. Specifically, the project will create 50 personal page buttons, increase residents' participation in group activities by 20%, and increase participation in individualized activities by 20%.

c) The project will benefit residents by providing access to person-centered technology and communication applications that connect residents, friends, and the community, offering more personalized, life-enriching activities. The program will allow staff to interact with residents in more meaningful ways.

d) The project will benefit the facility by providing residents with engaging, personalized activities that support cognitive, emotional, and social well-being. iN2L enhances quality of life, promotes mental stimulation, and helps combat feelings of isolation, all while offering staff an easy-to-use platform to tailor activities to individual needs and preferences.

e) The target audience beyond residents includes the staff, who will receive training on the use of iN2L technology, and residents' families and friends, who will also receive training on using iN2L technology to encourage its use with residents and provide additional means of communication.

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Kentucky

KY CMP Funds Expended for Administrative Uses in CY 2025: $66,536.22
KY CMP Funds Expended for Emergency Uses in CY 2025: $0.00
KY Active CMP Funded Projects in CY 2025: 23

Funded Entity(ies):

Henderson County Healthcare Corporation dba Redbanks Skilled Nursing

Results of the Project:

The three-year project delivered a person-centered experience of residents with It's Never Too Late (iN2L) technology. Unfortunately, the project did not meet all its goals and objectives due to several issues with the equipment and equipment provider. The full start of program was delayed due to missing equipment during initial setup in August 2022. Repeated equipment failures, and lack of timely responses and fixes from the equipment provider created a significant barrier to the project during the project's final year. The facility utilized the devices to the best of their ability. Despite the equipment failures, residents still asked to use the devices. Project outcomes consisted of 49 of 50 personal page buttons created and 1,480 total usage hours over course of project (significantly lower than anticipated due to equipment failures). The outcome of a 20% increase in participation in group activities and/or individualized activities was unmet due to recurring equipment failures and significant delays in repairing said equipment by the vendor.

Project Title: Engage With Your Community

Unique Identifier: KY-1221-CCC-898 / 2021-04-KY-1227

Project Duration: 07/11/2022 to 07/10/2025

Total Amount of CMP Funds Approved for this Project: $495,397.52

Total Amount of CMP Funds Expended During CY 2025 for this Project: $90,950.03

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The project aims to improve the quality of life (QOL) for 500 residents from 25 certified nursing facilities (CNFs) through meaningful engagement and to help decrease negative perceptions of aging. Program implementation will promote intergenerational virtual interactions with each participating resident to complete a single joint project or multiple mini projects that are important to each resident.

b) The project will develop goal-oriented projects to achieve two objectives: 1) increase the sense of purpose in 50% of participating residents and 2) decrease loneliness in 50% of participating residents.

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Kentucky

KY CMP Funds Expended for Administrative Uses in CY 2025: $66,536.22
KY CMP Funds Expended for Emergency Uses in CY 2025: $0.00
KY Active CMP Funded Projects in CY 2025: 23

c) The project will facilitate relationships between participating residents and volunteers.

d) Nursing home staff will benefit from the education and resources provided.

e) The target audience beyond the nursing home residents is the volunteers who engage with the participating residents. Up to 500 volunteers will be trained to implement the project and utilize the Engage workbooks.

Funded Entity(ies):

Create Circles Corporation

Results of the Project:

Over the course of the project, 44 certified nursing facilities (CNFs) opted to participate, with 18 fully onboard. A total of 315 volunteers were recruited, of whom 165 completed the program's required training. Additionally, 78 residents were enrolled in the program; 41 were paired with volunteers, resulting in 21 resident–volunteer projects. Evaluation outcomes demonstrated positive impacts across multiple domains: Sense of Purpose: Average score of 3.9 out of five (5), indicating participating residents experienced an increase/strong sense of purpose through program involvement. Loneliness: Average score of 2.1 out of five (5), indicating reduced feelings of loneliness among participating residents. Companionship: Average score of 2.9 out of five (5). While companionship alone was not the primary objective of the program, meaningful social connection emerged as an important outcome alongside the development of purpose-driven engagement.

Project Title: Quality Assurance and Performance Improvement (QAPI) Project

Unique Identifier: KY-1221-PMR-900 / 2021-04-KY-1228

Project Duration: 03/03/2023 to 03/02/2025

Total Amount of CMP Funds Approved for this Project: $495,141.30

Total Amount of CMP Funds Expended During CY 2025 for this Project: $34,731.76

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

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Kentucky

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KY Active CMP Funded Projects in CY 2025: 23

a) The *Quality Assurance and Performance Improvement Project* will provide training on designing and implementing a quality assurance and performance improvement (QAPI) program to improve care in 40 certified nursing facilities (CNFs). The project will provide 100-200 participants with a two-day in-person training on designing and implementing a QAPI program in a CNF, followed by a 90-day practice implementation period for at least 40 CNFs. Participants will learn the skills needed to design, implement, and maintain documentation and evidence of their ongoing, comprehensive program to improve quality of care (QOC) and quality of life (QOL) for the residents within the CNFs, to improve the participating facility's CMS Quality Measure Star Rating (one to five stars), reducing QAPI-related citations, and overcoming barriers to QAPI program success.

b) Expected project outcomes are: A minimum of 20% of participating CNFs will have an improvement in their 5-Star Quality Measure Rating. A 15% reduction in QAPI related citations (F865-F868) for each participating CNF and in the statewide aggregate for all participating CNFs. Eight percent (80%) of participants will identify at least one solution to overcome an identified barrier to QAPI program success per the facility performance self-assessment. At least 85% of all participants will rate their satisfaction via workshop evaluation given after each live training event, rating the program as good or excellent. A minimum of 25% of participants who attend the initial two-day training workshop will complete all portions of the program. • At least 20 participants will successfully complete a minimum of three of the 10 online webinar modules via GoTo™ Webinar on-demand training links as demonstrated by attendance verification reports available through the webinar platform.

c) Nursing home (NH) residents will benefit when the staff in their facilities receive the QAPI training and resources provided to enable them to provide better care to residents, thus improving their QOC and QOL.

d) The project will benefit the CNF by equipping staff with the tools and knowledge to systematically identify, address, and prevent issues related to care quality. Emphasizing data-driven decision-making, resident-centered care, and accountability will also help create a culture of continuous improvement.

e) The target audience beyond the NH residents is the CNF staff participating in the training.

Funded Entity(ies):

Proactive Medical Review

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Kentucky

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KY Active CMP Funded Projects in CY 2025: 23

Results of the Project:

A total of 76 certified nursing facilities (CNFs) enrolled, with 40 CNFs completing all program requirements, and more than 250 individuals participating in at least one component of the project. All project goals were met or exceeded. Fifty percent (50%) of the participating CNFs improved or maintained a 5-Star overall rating, surpassing the goal of 20%. QAPI-related citations (F865–F868) were eliminated among participating CNFs during the FY2023–FY2024 monitoring period, exceeding the target 15% reduction. Statewide QAPI citations decreased from 14 in the baseline period to 10 in 2023 and three in 2024. All participants completing the project (100%) completed the facility performance self-assessment and identified at least one barrier to QAPI program success, exceeding the 80% target. Fifty-eight percent (58%) of participants (97 of 166) who attended the initial two-day workshop completed all program components, more than double the 25% goal. One hundred twenty-six (126) participants successfully completed at least three online webinar modules, far exceeding the minimum goal of 20 participants.

Project Title: Dementia Live®: A Foundational Experiential Education Tool Leading to Competent and Empathetic Care Partners for Persons Living with Dementia

Unique Identifier: KY-0524-AGE-1160 / 2024-04-KY-0328

Project Duration: 02/24/2025 to 02/23/2026

Total Amount of CMP Funds Approved for this Project: $79,602.62

Total Amount of CMP Funds Expended During CY 2025 for this Project: $73,972.80

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of this project is to improve the quality of care for residents living with dementia in 16 certified nursing facilities (CNFs).

b) *Dementia Live* will deliver an experiential education program that simulates cognitive and sensory impairments, providing participants with an "in-their-shoes" understanding of dementia. Project goals are to: 1) enhance quality of care by increasing employee knowledge and strengthening care partner interactions, and 2) equip each facility with sustainable internal dementia training resources. Training Objective A: The designated Dementia Live Coach training participants will be prepared to conduct the in-house *Dementia Live*® simulation experience for employees, evidenced by a minimum score of 80% of the training competency assessment. Training Objective B: Staff taking the REVEAL Aging

Kentucky

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courses will achieve an average competency score of 75%. Resident Objective A: A 10% reduction in reported resident stress reactions in Minimum Data Set (MDS) E0200A – Physical behavioral symptoms, MDS E0200B – Verbal behavioral symptoms, MDS 0200C – Other behavioral symptoms not directed towards others, and MDS E800 – Rejection of care.

c) Residents will benefit from more competent, empathetic staff who communicate with understanding, validate feelings and needs, foster comfort and connection, and reduce dementia-related stress reactions.

d) This initiative will improve dementia care within the CNF by fostering a culture of empathy and understanding among staff and families.

e) The target audience beyond the residents is CNF staff and resident families.

Funded Entity(ies):

AGE-u-cate Training Institute

Results of the Project:

Interim Results: To date, 24 certified nursing facility (CNF) staff members have been trained as Dementia Live Coaches, and 414 staff across all 16 CNFs have participated in the *Dementia Live* experience. Nine of the 16 participating CNFs have submitted feedback surveys, reporting an observed 10% reduction in residents exhibiting physical behavioral symptoms, verbal behavioral symptoms, rejection of care, and other behavioral symptoms not directed toward others. Additionally, feedback from 13 CNFs indicates that staff have a stronger understanding of the causes of resident stress reactions and feel better prepared to respond effectively. The project is currently focused on supporting CNFs in continuing to deliver *Dementia Live* to staff and resident families, as well as increasing staff participation in the REVEAL Aging courses. Please note that data collection remains ongoing, and results are preliminary and not yet finalized.

Project Title: Abuse, Neglect, and Exploitation Training

Unique Identifier: KY-0624-KCHF-1180 / 2024-04-KY-0611A

Project Duration: 08/09/2024 to 08/08/2025

Total Amount of CMP Funds Approved for this Project: $53,363.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $0.00

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Kentucky

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KY Active CMP Funded Projects in CY 2025: 23

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The project aims to provide an in-depth overview of 42 CFR 483.12 – Freedom from abuse, neglect, and exploitation to up to 600 certified nursing facility (CNF) care staff and state surveyors. The training will be held on September 23 and 24, 2024, with up to 300 attendees per day.

b) Upon completion of the training, participants will be able to describe physical abuse, describe verbal abuse, describe sexual abuse, describe involuntary seclusion, describe neglect, describe the signs and symptoms that could indicate abuse has occurred, and understand the time frames for reporting abuse. Project objectives include attendance of 250-300 CNF care staff and state surveyors for each one-day training, with a target of a minimum of 500 attendees. A participation satisfaction rate of 85% or higher on the post-training participant survey. Knowledge gain is indicated via a post-training test. Implement knowledge with a targeted decrease of 10% in abuse, neglect, and exploitation citations over the six months following the training.

c) Staff training on 42 CFR 483.1 benefits CNF residents by ensuring a safer and more supportive environment. Well-trained staff are better equipped to recognize signs of abuse, neglect, or exploitation, respond appropriately, and report incidents promptly. This proactive approach helps prevent harm, enhances the quality of care for residents, and ensures that their rights and dignity are upheld.

d) Staff training on 42 CFR 483.1 benefits the CNF by fostering a culture of respect and accountability and promoting trust and safety within the facility.

e) The target audience beyond CNF residents is CNF staff and state surveyors.

Funded Entity(ies):

Kentucky Cabinet for Health and Family Services, Office of Inspector General (OIG) Division of Health Care

Results of the Project:

The *Abuse, Neglect, and Exploitation Training* project was held in Louisville, Kentucky, on September 23–24, 2024. Total attendance across both days was 238 participants, which fell slightly below the projected target, reflecting a deficit of approximately 2.6% to 5.04%. This shortfall may be attributable to delays in receiving final funding approval, which compressed the timeframe available for marketing and participant registration. Evaluation survey results demonstrated an average participant satisfaction rate of 98.58%, exceeding the target satisfaction rate of 85%. Post-assessment results showed a 94.98% pass rate,

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Kentucky

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indicating a high level of knowledge acquisition among participants. Participants were encouraged to disseminate the training materials and knowledge within their respective facilities, with a targeted goal of a 10% reduction in abuse, neglect, and exploitation citations within six months following the training. Analysis of citation data for CNFs that participated in the training showed a 46.15% decrease in abuse, neglect, and exploitation citations in the post-training period. In comparison, CNFs that did not participate in the training experienced only a 7% decrease in citations during the same timeframe.

Project Title: Bluegrass Activities Director Leadership Academy

Unique Identifier: KY-0624-KCHF-1181 / 2024-04-KY-0612

Project Duration: 04/07/2025 to 04/06/2028

Total Amount of CMP Funds Approved for this Project: $246,600.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $82,200.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) This three-year project will teach up to 750 Activities Directors and care staff about professionalism, documentation, and ethics, working with residents with special needs, and adapting ideas to certain demographics within their facilities. It will enable activity directors to excel by emphasizing the diverse nature of long-term care residents and by providing a variety of ideas: creative, spiritual, physical, social, educational, and sensory.

b) Staff will learn to identify the role of the Activity Director, demonstrate knowledge of a variety of programming options, show awareness of the role of various therapies in activity programming, discuss the management of resident and community volunteers, including recruitment, training, and recognition, structure planning for optimal use of an environment, and establish and facilitate group and individual participation. The project's objectives are: 1. Participant Satisfaction: Measured through post-training surveys, aiming for an average satisfaction rate of 85% or higher. 2. Knowledge Gain: Assess via pre- and post-training tests, with a target of at least a 40% improvement in scores. 3. Certification Rate: The percentage of attendees who complete the certification, with a goal of 85% certification compete rate. 4. Implementation of Skills: Tracked through follow-up surveys, six months post training, targeting at least 75% of facilities reporting

Kentucky

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successful implementation of new activities. 5. Attendance Goals: A goal of 250+ certified nursing facility (CNF) professionals attend each year (750 total).

c) CNF residents will benefit from the development of caring and passionate professionals that are able to create, implement, and evaluate resident centered activities that are part of the individualized care plan.

d) The CNF will benefit from the project by ensuring that their activity director has the expertise to design and implement engaging, meaningful programs that improve residents' physical, emotional, and cognitive well-being. This training also ensures compliance with industry standards, supporting overall care excellence and satisfaction.

e) The target audience beyond the residents is the facility's Life Enrichment Director/Activity Director and staff.

Funded Entity(ies):

Kentucky Cabinet for Health and Family Services, Office of Inspector General (OIG) Division of Health Care

Results of the Project:

Interim Results: To date, 134 eligible staff have registered for one or more trainings, with 49 certifications completed. Outreach and communication with facilities regarding registrations have been challenging due to several factors, including staff turnover and hesitation to enroll staff because of the potential need to substitute different personnel at a later time. To address these barriers, in-person visits to certified nursing facilities (CNFs) will be conducted beginning in 2026 to provide direct support and assistance with staff registration.

Project Title: ALZPro: Workforce Training and Support for Sustainable, Person-Centered Dementia Care

Unique Identifier: KY-0624-AZS-1182 / 2024-04-KY-0613

Project Duration: 05/26/2025 to 05/25/2027

Total Amount of CMP Funds Approved for this Project: $152,638.12

Total Amount of CMP Funds Expended During CY 2025 for this Project: $35,885.13

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Kentucky

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Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The project will provide online *ALZPro* training and certifications for up to 15 direct care staff per certified nursing facility (CNF), *Project ECHO* sessions, and education and support programs for family members and caregivers.

b) The goal of this 2-year project is to create a network for training, connection, engagement, education, and support for professional care providers of individuals living with dementia and resident families to positive impact person-centered care delivery, interactions, and outcomes for residents at 23 certified nursing facilities (CNFs). Project objectives include 80% redemption rate of the care provider training; 85% satisfaction with professional training program; 80% pass rate for the *essentiALZ* certification; 20% increase in professional provider knowledge; 20% increase in professional provider confidence; 85% satisfaction with the family caregiver education.

c) Residents will benefit from the delivery of person-centered dementia care practices that have been shown to have significant effects on decreasing behavioral symptoms and psychotropic medication used in residents with dementia. Person-centered care practices also lead to positive effects for residents regarding quality of life, decreased agitation, improved sleep patterns, and maintenance of self-esteem.

d) The CNF will benefit from a reduction in stress, burnout, and job dissatisfaction, which may also lead to reduced staff turnover. Person-centered practices and culture-change principles can lead to both better quality of life for residents with dementia and better working conditions for staff. Better trained and support staff will transfer to better care for individuals living with dementia.

e. The target audience beyond CNF residents is the staff and resident families and caregivers, which will receive the training and educational programming.

Funded Entity(ies):

Alzheimer's Association

Results of the Project:

Interim Results: To date, 152 *essentiALZ* online trainings have been redeemed, with 94 certificates completed, reflecting a 95% passing rate. The first *Project ECHO* series was successfully completed in November 2025, and the second *Project ECHO* series is currently underway. In addition, 15 family programs have been circulated to date. Engagement challenges have been encountered with four certified

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nursing facilities (CNFs) due to staff turnover, which has limited the ability to establish or maintain regular contact. Seasonal factors, including the holiday period, may also be contributing to these delays.

Project Title: Improving Quality of Care Through Culture Change

Unique Identifier: KY-0924-BAG-1202 / 2024-04-KY-0903

Project Duration: 02/11/2025 to 02/10/2026

Total Amount of CMP Funds Approved for this Project: $99,971.97

Total Amount of CMP Funds Expended During CY 2025 for this Project: $68,000.11

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of this one-year project is to enhance the quality of care in 20 certified nursing facilities (CNFs) through targeted training and guidance in culture change. Participating CNFs will receive instruction on creating organizational change, forming inclusive Change Teams, prioritizing key concerns, and developing effective action plans that address resident and staff issues through root cause analysis. Change teams will be supported throughout the culture change process, with a focus on improving both employee satisfaction and resident satisfaction, particularly regarding staff competency and perceived quality of care.

b) The project goal is to identify gaps between the current and desired goals and values of residents and staff by establishing baseline measures for resident and staff satisfaction and competency. Change Teams will learn to identify high-priority concerns, develop actionable solutions, and communicate progress effectively to all stakeholders. Expected outcomes at year-end include a 10% improvement of nursing staff satisfaction scores, 20% improvement of nurse competency assessment scores (or achieve 80% overall competency), 10% improvement of resident satisfaction scores, and improvement in total nurse staff turnover, at each participating CNF.

c) CNF residents will benefit from increased staff stability and competency, which will enhance their overall care experience and confidence in the facility's ability to meet their needs.

d) CNFs will benefit from an improved organizational culture and work environment, creating a more positive setting for both staff and residents. Training in best practices will also support job satisfaction, increase employee retention, and strengthen continuity of care.

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Kentucky

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e) The primary target audience beyond residents is CNF staff. Facility leaders and Change Teams will receive training on implementing effective change, forming inclusive teams, prioritizing concerns, developing actionable plans, and addressing employee issues through root cause analysis.

Funded Entity(ies):

BenRay Advisory Group, Inc

Results of the Project:

Interim Results: Nursing Satisfaction: Third quarter scores remained steady at 3.93 out of five (79% favorability). Lowest scoring areas were Job Satisfaction and Team Building and Communication, with concerns about pay fairness and recognition. Facilities will review results in the fourth quarter after implementing improvement plans. Nurse Competency: Eight of 20 facilities have completed competency testing, with an average score of 89%, exceeding the 80% goal. Delays are primarily due to staff turnover; ongoing support and tracking continue. Nurse Staff Turnover: Average turnover decreased from 55.10% (prior year) to 45.39% in the third quarter, representing a 9.71% overall improvement (CMS Nursing Home Compare). Resident Satisfaction: Scores remained stable at 4.10 out of five (5) (82% favorability), ranging from 3.6 to 4.7. Lowest areas were adequate staff time and prompt help from care team. Facilities are reviewing results with residents to guide quarter four improvements.

Project Title: Building Expertise: State-Sponsored Wound Care Certification for Certified Nursing Facilities

Unique Identifier: KY-1124-KHFS-1234 / 2024-04-KY-1105

Project Duration: 06/10/2025 to 06/09/2028

Total Amount of CMP Funds Approved for this Project: $242,100.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $80,700.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of this three-year state-sponsored training project is to improve the quality of care for residents across the state's 269 certified nursing facilities (CNFs) by providing each CNF with four

Kentucky

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licenses for the Wound Care Education Institute's (WCEI) online Skin and Wound Care Certification course each project year.

b) Access to WCEI's online *Skin and Wound Care Certification* course will be provided to four staff members per CNF, per year, for three years for a potential of up to 3,228 certified Wound Care Specialists by project end. Project objectives are: 1. An 85% certificate completion rate. 2. A 10% improvement in reported pressure ulcer/pressure injury rates in participating CNFs by project end.

c) CNF residents will benefit from staff certified in the assessment, management, and treatment of wounds.

d) CNFs will benefit from having staff certified in the assessment, management, and treatment of residents' wounds.

e) CNF staff are the target audience.

Funded Entity(ies):

Kentucky Cabinet for Health and Family Services

Results of the Project:

Interim Results: To date, 111 eligible participants have completed the online wound care certification. Data on pressure ulcers and pressure injuries are currently being collected. Outreach and communication with facilities regarding registrations have been challenging due to staff turnover. To address this, communications with certified nursing facilities (CNFs) have been increased, including regular updates in the Office of Inspector General (OIG) monthly long-term care (LTC) newsletter and association newsletters. Beginning in 2026, in-person visits to CNFs will provide direct support and assistance with staff registration.

Project Title: Sustaining Care: State-Sponsored Recruitment and Retention Training for Certified Nursing Facilities

Unique Identifier: KY-1124-KHFS-1235 / 2024-04-KY-1104

Project Duration: 06/10/2025 to 06/09/2028

Total Amount of CMP Funds Approved for this Project: $242,100.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $80,700.00

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Kentucky

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Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of this three-year, state-sponsored project is to enhance workforce stability in Kentucky's certified nursing facilities (CNFs) by providing administrators and Human Resources professionals with online training focused on effective recruitment and retention strategies for skilled staff.

b) Each CNF will have one staff member per year access to Drive's Mastering Recruitment and Retention online seminar series for three years, for a potential total of 807 participants. Webinars, available live and on demand via a learning management system (LMS), offer a learning community for sharing best practices and connecting with subject matter experts. Participants can earn one NAB (National Association of Long-Term Care Administrator Board)-approved continuing education credit (CNE) per session, up to ten credits, with lifetime access to recordings. Success coaches provide weekly follow-up to ensure timely completion.

c) Residents benefit from a more stable workforce, which improves continuity and quality of care, strengthens caregiver relationships, and enhances overall resident satisfaction and well-being.

d) CNFs benefit from improved ability to attract and retain skilled staff, reducing turnover and associated costs. A stable, well-trained team ensures consistent high-quality care, stronger staff–resident relationships, a positive work environment, and overall improved facility performance.

e) The target audience beyond residents includes CNF administrators and HR professionals who receive specialized training in recruitment and retention.

Funded Entity(ies):

Kentucky Cabinet for Health and Family Services

Results of the Project:

Interim Results: To date, 40 certified nursing facility (CNF) staff have obtained continuing education units (CEUs). Data on nursing staff turnover is currently being collected. Communications with CNFs have been increased, including regular updates in the Office of Inspector General (OIG) monthly long-term care (LTC) newsletter and association newsletters. Beginning in 2026, in-person visits to CNFs will provide direct support and assistance with staff registration.

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KY CMP Funds Expended for Emergency Uses in CY 2025: $0.00

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Project Title: Harmony in Motion: Yoga for Wellness

Unique Identifier: KY-1224-KAHF-1238 / 2024-04-KY-1020

Project Duration: 11/10/2025 to 11/09/2028

Total Amount of CMP Funds Approved for this Project: $1,500,000.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $500,000.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) This three-year project aims to enhance the quality of life for residents in 100 Kentucky certified nursing facilities (CNFs) by providing dedicated yoga, Tai Chi, and meditation activities to support physical health, mental and emotional wellbeing, and social engagement.

b) Project objectives are to improve physical health and mobility, reduce stress and anxiety, enhance social engagement and community building, support staff development to lead sessions, and to sustain long-term engagement. Expected outcomes are: At least 70% of participating residents will show measurable improvement in flexibility, strength, and balance. A 50% reduction in reported stress and anxiety levels among residents who participate in the yoga sessions. A 30% increase in social interaction and participation in group activities among residents within the first year. One hundred percent (100%) of Activity Directors will attend initial training sessions and at least 80% will report increased confidence in directing sessions. One hundred (100) CNFs participating in the first year will show staff satisfaction rates of 85% or higher.

c) Residents will benefit from improved flexibility, strength, balance, fall prevention, chronic pain management, reduced stress and anxiety, improved mood and cognitive function, stronger social support, and increased engagement.

d) CNFs will benefit from fewer falls, enhanced resident–staff interactions, and Activity Directors trained to lead effective yoga, Tai Chi, and meditation sessions.

e) The target audience beyond residents includes Activity Directors and staff trained to lead these wellness sessions.

Funded Entity(ies):

Kentucky Association for Healthcare Facilities

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Kentucky

KY CMP Funds Expended for Administrative Uses in CY 2025: $66,536.22
KY CMP Funds Expended for Emergency Uses in CY 2025: $0.00
KY Active CMP Funded Projects in CY 2025: 23

Results of the Project:

Interim results are not yet available.

Project Title: SNFClinic

Unique Identifier: KY-1224-LTCC-1245 / 2024-04-KY-1204

Project Duration: 04/28/2025 to 04/27/2028

Total Amount of CMP Funds Approved for this Project: $239,040.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $47,144.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of the three-year project is to provide activities (e.g., clinical training, in-service training, and resident care resources) that improve the quality of care provided by the participating certified nursing facilities (CNF).

b) Project objectives are: 1. On average, a 30% improvement across all participating CNFs in the quality measures (QMs) used by CMS (Centers for Medicare and Medicaid Services) to calculate the quality measure (QM) star rating published on the CMS Care Compare website. 2. Fifty percent (50%) of the participating CNFs' QM star ratings will improve.

c) The project will directly benefit residents at participating CNFs by providing computer-related technology related to resident care, which academic studies have shown moves health deficiencies in nursing homes in a positive, downward direction.

d) The project will benefit the participating CNFs by providing them with over 400 clinical and in-service training modules addressing every conceivable subject related to quality of care, providing an efficient way of assigning, completing, and tracking staff training.

e) The target audience beyond the resident are the CNFs' staff.

Funded Entity(ies):

Long-Term Care Consultants, LLC

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Kentucky

KY CMP Funds Expended for Administrative Uses in CY 2025: $66,536.22

KY CMP Funds Expended for Emergency Uses in CY 2025: $0.00

KY Active CMP Funded Projects in CY 2025: 23

Results of the Project:

As of June 30, 2025, all 16 participating certified nursing facilities (CNFs) (100%) showed improvement in at least one Minimum Data Set (MDS) QM category, with an average improvement across 27% of measured categories. Four facilities (25%) increased their QM star rating, one facility (6%) decreased, and 11 facilities (69%) remained unchanged. Overall, the average QM star rating across facilities rose from 2.0 to 2.1 stars. Reporting on the first goal has been limited due to a CMS (Centers for Medicare and Medicaid Services) communications and data freeze in August 2025, compounded by the federal government shutdown from October 1, 2025, to November 12, 2025. As of this report, the most recent MDS QM data published by CMS is current through June 30, 2025, with the next update scheduled for January 28, 2026.

Project Title: Partners in Healing: Strengthening Wound Care Services for Kentucky

Unique Identifier: KY-0224-SIG-1295

Project Duration: 12/02/2025 to 12/01/2027

Total Amount of CMP Funds Approved for this Project: $385,000.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $0.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) This two-year project aims to train four Wound Care Specialists (WCS) per facility across 39 certified nursing facilities (CNFs), enhancing resident well-being while equipping staff with the knowledge and skills needed for advanced wound care.

b) Project objectives include training a total of 154 staff (four per facility) through the Wound Care Education Institute's online wound care certification program, and reducing hospital visits related to wound infections by 15%.

c) Residents will benefit from improved wound care, leading to reduced pain, faster healing, lower infection risk, enhanced comfort, increased independence, and overall better quality of life.

d) Participating CNFs will gain a specialized care ecosystem capable of addressing wound-related needs, reducing hospital visits and associated costs. The program also creates a career advancement pathway, allowing staff to enhance skills, increase pay through wound care specialization, improve job satisfaction, and reduce turnover.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Kentucky

KY CMP Funds Expended for Administrative Uses in CY 2025: $66,536.22
KY CMP Funds Expended for Emergency Uses in CY 2025: $0.00
KY Active CMP Funded Projects in CY 2025: 23

e) The target audience beyond residents includes direct care staff receiving the training.

Funded Entity(ies):

Signature Healthcare

Results of the Project:

Interim results are not yet available.

Project Title: 2025 MDS/RAI Training

Unique Identifier: KY-0325-OIG-1308

Project Duration: 09/01/2025 to 08/31/2026

Total Amount of CMP Funds Approved for this Project: $92,136.22

Total Amount of CMP Funds Expended During CY 2025 for this Project: $0.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of these trainings is to ensure that the Office of Inspector General (OIG) long-term care (LTC) surveyors are fully prepared to perform their roles in the LTC survey process and to support Minimum Data Set (MDS) Coordinators in accurately coding resident assessments and transmitting Minimum Data Set information in accordance with regulatory requirements.

b) The project objectives are as follows: 1. A total of 250–300 certified nursing facility (CNF) care staff and state surveyors will attend each one-day training session, with a minimum combined attendance of 500 participants across both trainings. 2. Achieve a participant satisfaction rate of at least 85%, as measured by post-training evaluations. 3. Achieve a 10% reduction in monthly MDS-related technical assistance calls within six months following completion of the trainings.

c) Residents will benefit from improved accuracy in MDS coding, which supports the development of comprehensive, resident-centered care plans and enhances overall quality of care.

d) Facilities will benefit from improved accuracy and compliance in MDS data coding and submission, helping to reduce excessive charges and mitigate the risk of fraud, waste, and abuse of Medicare funds.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Kentucky

KY CMP Funds Expended for Administrative Uses in CY 2025: $66,536.22
KY CMP Funds Expended for Emergency Uses in CY 2025: $0.00
KY Active CMP Funded Projects in CY 2025: 23

e) The target audiences beyond the residents are MDS Coordinators and OIG LTC surveyors.

Funded Entity(ies):

Office of the Inspector General (OIG) Division of Health Care

Results of the Project:

Interim Results: The "RAI Manual Overview for Beginners" training was held on September 15, 2025. The "MDS Coordinator Update Training - Beginner and Advanced" was held on September 22, 2025. There was a total of 112 technical assistance (TA) calls during March - September 2025. There has been a total of 24 TA calls for the 3-month period following the trainings (October - December 2025).

Project Title: Improving Person-Centered Care Through Reminiscence Social Engagement

Unique Identifier: KY-0525-LBI-1330

Project Duration: 10/15/2025 to 10/14/2026

Total Amount of CMP Funds Approved for this Project: $119,236.30

Total Amount of CMP Funds Expended During CY 2025 for this Project: $89,811.29

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of this one-year project is to improve quality of care in 24 certified nursing facilities (CNFs) by providing tools that enhance person-centered care, strengthen memory care communities, and improve residents' quality of life through a deeper understanding of each individual.

b) The project's goals are to collaborate with 24 CNFs (up to 30 residents per CNF), complete the LifeBio process and deliver Life Story Books, and care tools (Snapshots and Action Plans) for up to 720 residents, and to foster connections between staff, family, and volunteers through engaging with residents' life stories. Expected outcomes are: 24 CNF staff will complete training and pre-interview surveys by end of the second quarter. Interviews and Life Story Books and care tools will be created and distributed to a minimum of 30 residents per CNF. A minimum of 80% of participating residents

Kentucky

KY CMP Funds Expended for Administrative Uses in CY 2025: $66,536.22
KY CMP Funds Expended for Emergency Uses in CY 2025: $0.00
KY Active CMP Funded Projects in CY 2025: 23

report enjoying the LifeBio project. A minimum of 80% of staff agree that knowing life stories aids in quality care.

c) Residents will benefit from Life Story Books, Snapshots, and Action Plans that foster stronger personal connections with staff, improve communication, and humanize each resident. The program also provides reminiscence therapy that engages cognitive functions in purposeful and meaningful ways.

d) CNFs, especially new staff, will benefit from easy access to resident life stories, supporting stronger relationships, understanding shared interests, and enhancing staff–resident connections.

e) The target audience beyond residents includes direct care staff who use the life story tools in daily care.

Funded Entity(ies):

LifeBio Inc.

Results of the Project:

Interim results are not yet available.

Project Title: Enhancing Resident Engagement with the Obie Mobile Projector

Unique Identifier: KY-0525-SCV-1333

Project Duration: 11/01/2025 to 10/31/2026

Total Amount of CMP Funds Approved for this Project: $5,000.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $0.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) This one-year project proposes to enhance residents' quality of life, particularly those experiencing memory impairment, Alzheimer's, and dementia, by fostering meaningful interactions, reducing feelings of isolation, and providing cognitive stimulation and therapeutic benefits with touch-based games and activities with the use of the Obie mobile projector.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Kentucky

KY CMP Funds Expended for Administrative Uses in CY 2025: $66,536.22
KY CMP Funds Expended for Emergency Uses in CY 2025: $0.00
KY Active CMP Funded Projects in CY 2025: 23

b) Project objectives are to integrate the Obie mobile projector into the activity calendar, with at least 10 regularly scheduled sessions a month; Increase personalized resident participation in cognitive and social activities; enhance group engagement and social connection; promote intergenerational relationships by organizing events that bring families and volunteers together with residents for gameplay at least once per quarter; improve residents' overall emotional well-being; minimize boredom and behavioral challenges for residents isolated due to illness precautions.

c) Residents will benefit from interactive activities that enhance their quality of life, promote socialization, and support cognitive and emotional wellbeing.

d) The certified nursing facility will benefit from improved connections with residents, the ability to provide engagement, and therapy-based exercises, tailored to residents.

e) The target audience beyond the residents include facility staff that will be trained on the projector, and residents' families that can benefit from engaging with their loved ones.

Funded Entity(ies):

Sayre Christian Village

Results of the Project:

Interim results are not yet available.

Project Title: Leadership in Nursing: State-Sponsored Nurse Mentorship Training

Unique Identifier: KY-0525-OIG-1337

Project Duration: 10/01/2025 to 09/30/2028

Total Amount of CMP Funds Approved for this Project: $242,100.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $0.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The three-year state-sponsored training project is aimed at enhancing workforce stability in certified nursing facilities (CNFs) by providing the statewide *Nurse Mentorship Training* project.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Kentucky

KY CMP Funds Expended for Administrative Uses in CY 2025: $66,536.22
KY CMP Funds Expended for Emergency Uses in CY 2025: $0.00
KY Active CMP Funded Projects in CY 2025: 23

b) The goal of the project is to assist CNFs in the creation of a support system by providing mentors for new nursing staff to enhance staff confidence, improve clinical skills, provide emotional support, create faster onboarding, improve retention, and job satisfaction, assist with workplace cultural integration, and improve patient outcomes. Training will be provided for up to 538 staff (two per CNF) per year, with a total of up to 1,614 staff trained in nursing mentorship by project end. Expected outcomes are: Eighty-five (85%) of participants will complete all webinar sessions. Fifty percent (50%) of participating CNFs will implement a nurse mentor program in the months following training series completion. Three percent (3%) improvement in reported nursing staff turnover rates in participating CNFs over the course of the project, following training series completion and implementation of nurse mentor program.

c) Residents will benefit from reduced staff turnover, which directly impacts the quality-of-care residents receive, leading to better health outcomes.

d) The facility will form a staff support system that fosters a positive work environment, leading to increased job satisfaction, which reduces turnover rates.

e) The target audience is the direct care staff.

Funded Entity(ies):

Office of the Inspector General (OIG) Division of Health Care

Results of the Project:

Interim results are not yet available.

Project Title: Implementation of Bingocize in Signature HealthCare

Unique Identifier: KY-0525-EXI-1343

Project Duration: 10/01/2025 to 09/30/2028

Total Amount of CMP Funds Approved for this Project: $454,684.39

Total Amount of CMP Funds Expended During CY 2025 for this Project: $187,331.98

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Kentucky

KY CMP Funds Expended for Administrative Uses in CY 2025: $66,536.22
KY CMP Funds Expended for Emergency Uses in CY 2025: $0.00
KY Active CMP Funded Projects in CY 2025: 23

a) The purpose of the project is to implement *Bingocize*® (a combination of physical exercise and the game of bingo) in 38 certified nursing facilities (CNFs) managed by Signature Healthcare to improve the quality of life for residents over a three-year term.

b) The project will expand on previous efforts by expanding the *Bingocize*® program and staff training to 38 CNFs, training a minimum of 72 staff (two per CNF) to lead *Bingocize*® with residents, and improving the quality of life of CNF residents. The project aims to achieve 75% of residents demonstrating improved functional status and social engagement after participating in *Bingocize*®.

c) The program will benefit residents by improving functional performance, leading to maintenance in activities of daily living, reducing fall risk, and improving social engagement by allowing residents to communicate with other residents, staff, family, and volunteers.

d) The CNFs will benefit from improved interactions between staff and residents, and reduced fall risks for residents participating and improving function performance.

e) The CNF staff trained to lead *Bingocize* sessions are the target audience beyond the residents.

Funded Entity(ies):

Exercise Innovations, LLC

Results of the Project:

Interim results are not yet available.

Project Title: Skin Integrity Education Initiative

Unique Identifier: KY-0625-QSM-1351

Project Duration: 10/15/2025 to 10/14/2028

Total Amount of CMP Funds Approved for this Project: $44,043.76

Total Amount of CMP Funds Expended During CY 2025 for this Project: $8,440.92

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Kentucky

KY CMP Funds Expended for Administrative Uses in CY 2025: $66,536.22
KY CMP Funds Expended for Emergency Uses in CY 2025: $0.00
KY Active CMP Funded Projects in CY 2025: 23

a) The purpose of the three-year project is to establish a sustainable nurse education program that will enhance staff proficiency in wound care in four certified nursing facilities (CNFs) with a comprehensive training curriculum, monthly workshops, and hands-on skill building sessions.

b) The project seeks to establish a sustainable, nurse education program that will enhance staff proficiency in wound care over the course of 36 months with the goal of a measurable improvement in wound healing outcomes, a reduction in wound-related complications, and an increase in staff confidence and competence. Project objectives include Objective 1: Etiology Impact: Reduce the incidence of Stage 3 and Stage 4 pressure injuries, improve healing rates, and decrease recurrence of wounds. Objective 2: Nurse Participation and Completion Rates: Achieve 85–90% completion of training modules by nursing staff within the first 12 months of program launch. Objective 2b: Nurse Participation and Completion Rates: By the end of the first year, 90% of nursing staff are expected to complete basic wound care training. By the end of the third year, nursing staff will demonstrate advanced wound care competency, supported by education, evaluation, and practical application. Objective 3: Wound Care Related Citations: Achieve a 50% reduction in wound care-related citations by the end of the third year.

c) This wound care education program will directly benefit residents by improving healing, reducing risks of complications and assist with providing personalized, compassionate care. With better trained staff, residents will experience more comfort, faster healing, and a higher overall quality of life.

d) The CNF will benefit from having direct care staff certified in wound management leading to improved wound healing outcomes, reduction in pressure injuries and other chronic wounds, enhanced infection control, fewer hospital readmissions, enhanced comfort and pain management, increased resident satisfaction, and reductions in avoidable complications.

e) The target audience beyond the resident is the direct care staff receiving the training and wound management certification.

Funded Entity(ies):

Quality Surgical Management

Results of the Project:

Interim results are not yet available.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Kentucky

KY CMP Funds Expended for Administrative Uses in CY 2025: $66,536.22

KY CMP Funds Expended for Emergency Uses in CY 2025: $0.00

KY Active CMP Funded Projects in CY 2025: 23

Project Title: "Dementia Beyond Drugs" State-Sponsored Dementia Care Training

Unique Identifier: KY-0625-OIG-1366

Project Duration: 12/15/2025 to 12/14/2026

Total Amount of CMP Funds Approved for this Project: $80,700.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $0.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of this one-year state-sponsored project is to provide The Eden Alternative's "*Dementia Beyond Drugs*: *Changing the Culture of Care*" training to up to 400 certified nursing facilities (CNFs) care staff across the state. The "*Dementia Beyond Drugs*" training will be offered in two ways: an in-depth, two-day in-person training and an online 7-week training focused on demonstrating the experiential model of care that facilitates growth, meaningful engagement, and improved well-being for residents living with dementia.

b) Up to 400 CNF staff will learn how to decrease reliance on psychotropic, while complying with F-tags F605 and F757; reframe "problem behaviors" as unmet needs; identify the limitations of the current approach to care for those living with dementia; envision an "experiential model" for viewing dementia and recognize the importance of enhancing wellbeing for all; and apply the model to everyday situations and reduce challenging interactions through creative solutions that empower individuals to live full and positive lives. Participants completing the training can earn a total of 13.25 continuing education credits. Expected outcomes are: Up to 400 CNF direct care staff attend the training provided. Eighty-five percent (85%) of attendees complete training and receive continuing education credits. Five percent (5%) shift toward person-directed perceptions of, and approaches to, dementia care as an alternative to medication. To be assessed by pre- and immediate post-surveys at each training event and a sustainability check to assess on-the-ground use and application of knowledge in daily practice four months after each training ends.

c) Residents living with Alzheimer's disease and related dementias will benefit from a shift in care staff toward person-directed perceptions of, and approaches to, dementia care as an alternative to medication.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Kentucky

KY CMP Funds Expended for Administrative Uses in CY 2025: $66,536.22
KY CMP Funds Expended for Emergency Uses in CY 2025: $0.00
KY Active CMP Funded Projects in CY 2025: 23

d) The CNF will benefit from having care staff trained in a model of care that facilitates growth, meaningful engagement and improved well-being for residents living with dementia and a decreased reliance on psychotropic medications.

e) The target audience beyond the residents is the facility staff receiving the training and certification.

Funded Entity(ies):

Office of the Inspector General (OIG) Division of Health Care

Results of the Project:

Interim results are not yet available.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Mississippi

MS CMP Funds Expended for Administrative Uses in CY 2025: $0.00

MS CMP Funds Expended for Emergency Uses in CY 2025: $0.00

MS Active CMP Funded Projects in CY 2025: 1

Project Title: Improving Dementia Capability with CARES Dementia 5-Step Method

Unique Identifier: MS-0325-NHM-1323

Project Duration: 09/01/2025 to 08/31/2028

Total Amount of CMP Funds Approved for this Project: $194,922.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $0.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) *CARES*® offers an evidence-based 5-step method for dementia care that facilities can roll out consistently with nationally recognized online training and certification programs. In addition to meeting state requirements, our goal is to reduce dementia-related resident behavior by having staff incorporate the *CARES® Dementia 5-Step Method* into all resident interactions.

b) The goal is to help participating nursing homes improve care delivered to residents, especially those living with Alzheimer's disease and related dementias. To do this, they will help participating nursing homes implement a dementia training program for their staff using the CARES® dementia online training and certification programs. By the end of month 12, each nursing facility will train and certify a minimum of 5% of direct-care staff in each of three programs: *CARES® Dementia 5-Step Method* (5%), *CARES® Dementia Safety Topics* (5%), and *CARES® Dementia-Related Behavior* (5%).

c) This project directly benefits residents by improving their person-centered care and quality of life in the following ways: 1. Improving person-centered care by teaching staff the evidence-based, non-pharmacological method called the *CARES® Dementia 5-Step Method* (C-Connect with the Person, A-Assess Behavior, R-Respond Appropriately, E-Evaluate What Works, and S-Share with Others). 2. Improving staff engagement with residents focusing on connecting with the resident in a deep and meaningful way. 3. Encouraging positive culture change based on person-centered values and practices, including choice, dignity, respect, self-determination, and purposeful living.

d) Evidence has shown increased Minimum Data Set (MDS) data scores in overall rating ($p < .001$), increased health inspection rating ($p < .001$), increased Quality Measure rating ($p < .001$), increased Long Stay Quality Measure rating ($p < .001$), decreased number of facility reported incidents ($p < .001$), decreased number of substantiated complaints ($p < .001$), decreased number of fines ($p < .05$), decreased total number of penalties ($p < .05$), decreased total amount of fines ($p < .05$).

e) Not applicable

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

State Civil Money Penalty Reinvestment Projects Funded in Calendar Year (CY) 2025
Atlanta Long-Term Care Location

Mississippi

MS CMP Funds Expended for Administrative Uses in CY 2025: $0.00
MS CMP Funds Expended for Emergency Uses in CY 2025: $0.00
MS Active CMP Funded Projects in CY 2025: 1

Funded Entity(ies):

Nexion Health Management Inc

Results of the Project:

Interim results are not yet available.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

North Carolina

NC CMP Funds Expended for Administrative Uses in CY 2025: $161,083.00

NC CMP Funds Expended for Emergency Uses in CY 2025: $3,166.00

NC Active CMP Funded Projects in CY 2025: 7

Project Title: LifeBridge Behavioral Program

Unique Identifier: NC-1021-TBA-863 / 2021-04-NC-0309

Project Duration: 03/01/2022 to 02/28/2025

Total Amount of CMP Funds Approved for this Project: $396,000.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $19,365.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The project aims to implement a facility-specific, individualized resident program that provides staff training and support, focusing on behavioral problem-solving, prevention, and response.

b) Over three years in 36 North Carolina nursing homes (NHs), a five percent (5%) reduction in the combined score for Minimum Data Set (MDS) item N0410A and a 20% reduction in the aggregate score for MDS E0200A, E0200B, and E0200C.

c) The program aims to increase resident safety by decreasing demonstrated challenging behaviors.

d) Nursing homes will benefit from fewer citations related to behavioral challenges and learning new, non-pharmacological approaches to addressing these challenges.

e) Nursing home staff

Funded Entity(ies):

Tobin and Associates, Inc.

Results of the Project:

A goal of the *LifeBridge Behavioral Program* is to focus on the development, training, and support of a facility specific individualized resident program that is 24 hours a day and seven days a week with concentration on behavior problem solving, prevention and response, which is directed to decrease challenging behaviors, and increase resident quality of life. The project aims to provide services for residents in 12 facilities annually for a total of 36 facilities in a three-year period. However, this goal was not met. The project provided the program to six facilities in year one, 16 facilities in year two, and 18 facilities in year three. A total of 24 facilities participated in this project over the three-year project period. PERFORMANCE STANDARD 1: This goal was met. Aggregate 54.38%. PERFORMANCE STANDARD 2:

North Carolina

NC CMP Funds Expended for Administrative Uses in CY 2025: $161,083.00

NC CMP Funds Expended for Emergency Uses in CY 2025: $3,166.00

NC Active CMP Funded Projects in CY 2025: 7

Goal was met. Physical Behavior Aggregate 78.82%, Verbal Behavior Aggregate 80.00%, Other Behaviors Aggregate 63.96%.

Project Title: Bingocize: An Evidence-Based Health Promotion Program to Improve the Quality of Life of North Carolina Certified Nursing Home Facility Residents

Unique Identifier: NC-0322-WCU-917 / 2022-04-NC-0228

Project Duration: 02/01/2023 to 01/31/2026

Total Amount of CMP Funds Approved for this Project: $1,165,955.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $245,985.63

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) Over three years, 180 certified nursing facility (CNF) staff members from 45 CNFs will demonstrate the skills and knowledge necessary to lead the *Bingocize* program.

b) Seven faculty members and 600 students from three North Carolina universities will partner with certified nursing facility (CNF) staff to demonstrate their skills and knowledge in leading the *Bingocize* program.

c) Over three years, activities of daily living (ADLs), falls, and social engagement will be evaluated for 2,025 CNF residents from 45 CNFs participating in the *Bingocize* program.

d) Nursing homes will benefit from a decrease in resident falls, an increase in balance and mobility, and a reduction in loneliness, isolation, and depression.

e) Not applicable

Funded Entity(ies):

Western Carolina University

Results of the Project:

A lack of social engagement and physical activity may contribute to a continued decline unfunctional mobility, activities of daily living (ADLs), and increase fall risk in certified nursing facility (CNF) residents.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

North Carolina

NC CMP Funds Expended for Administrative Uses in CY 2025: $161,083.00

NC CMP Funds Expended for Emergency Uses in CY 2025: $3,166.00

NC Active CMP Funded Projects in CY 2025: 7

The implementation of the *Bingocize North Carolina* project in 45 CNFs to improve mobility, social interaction, and overall quality of life for approximately 2,025 CNF residents over a three-year period. PERFORMANCE STANDARD 1: At the conclusion of the project on January 31, 2026, 188 staff had completed online training with a passing score of >80%. The project had been implemented in 49 facilities total with more than 6,000 residents participating in the *Bingocize* program over the three-year project period. PERFORMANCE STANDARD 2: At the project's conclusion, 30 new facility staff and faculty members as well as 58 students from three North Carolina universities completed training to lead the *Bingocize* program. PERFORMANCE STANDARD 3: At the conclusion of the project, more than 3,000 *Bingocize* sessions were held in the 45 participating facilities. At the time of this report, the project leaders were still awaiting Minimum Data Set (MDS) data. Final results are pending.

Project Title: Building Culture Leaders

Unique Identifier: NC-0224-FCNC-1119 / 2024-04-NC-0208

Project Duration: 08/01/2024 to 07/31/2027

Total Amount of CMP Funds Approved for this Project: $379,147.12

Total Amount of CMP Funds Expended During CY 2025 for this Project: $11,822.84

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The project has been designed to provide training focusing on leadership and culture-building skills, key areas important to long-term care leaders.

b) The training, coaching, and onsite support will increase resident satisfaction by 15%, enabling long-term care leaders to make positive facility culture changes. At least 75% of participants will report increased skills in leadership, culture change concepts, and communication.

c) The project will provide leadership and culture-building training for these leaders to help them grow into servant leaders and culture change champions who operate their facilities as person-centered homes. They will learn to prioritize caring for others in all their decisions and processes, creating environments where everyone can thrive.

d) Nursing homes will benefit from leadership approaches that target all staff and are sustainable beyond the project term.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

North Carolina

NC CMP Funds Expended for Administrative Uses in CY 2025: $161,083.00
NC CMP Funds Expended for Emergency Uses in CY 2025: $3,166.00
NC Active CMP Funded Projects in CY 2025: 7

e) Not applicable

Funded Entity(ies):

FutureCare of North Carolina

Results of the Project:

The goal of the project is to provide training that focuses on leadership and culture building skills, key areas important to long-term care leaders. The project includes two onsite visits at each participating facility to conduct leadership workshops for other staff. In all, the project anticipates providing education for approximately 1,000 staff working in 40 certified skill nursing facilities across the state. PERFORMANCE STANDARD 1: The first year scores showed increases in 1) leadership team knows me as a person (4%), 2) staff care about me as a person (10%), 3) staff provide interesting/engaging activities (4%), 4) satisfaction with variety of foods offered (22%), 5) communication regarding medical care (5%), 6) provision of medical care when needed (8%), 7) safety and security (9%), 8) cleanliness of facility (1%), 9) recommending facility to others (4%). PERFORMANCE STANDARD 2: First year scores showed increases in staff self-confidence in 1) person-centered care (36%), 2) leadership theory and application (38%), 3) culture-building (51%), 4) team building (35%), 5) resident and family engagement (26%), 6) voice of resident and family (31%), 7) employee engagement (39%).

Project Title: Virtual Dementia Tour® and Inclusive Virtual Dementia Tour

Unique Identifier: NC-0824-SWD-1196 / 2024-04-NC-0823

Project Duration: 10/01/2024 to 09/30/2026

Total Amount of CMP Funds Approved for this Project: $688,088.01

Total Amount of CMP Funds Expended During CY 2025 for this Project: $173,093.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The *Virtual Dementia Tour (VDT)* is a comprehensive training program that uses patented sensory tools and instructions to sensitize staff to dementia, resulting in better care. The purpose of this project is to train participants how to care for a person with dementia in a caring, patient, empathic person-centered care role through the *Inclusive Virtual Dementia Tour*.

North Carolina

NC CMP Funds Expended for Administrative Uses in CY 2025: $161,083.00
NC CMP Funds Expended for Emergency Uses in CY 2025: $3,166.00
NC Active CMP Funded Projects in CY 2025: 7

b) Each participating nursing home will achieve a collective 90% or higher score indicating that the trainings changed the way they will care for residents with dementia by utilizing person-centered care principles. This metric will be analyzed through data collection of pre- and post-*VDT* training surveys. Participating nursing homes will implement the Dementia-Aware Competency Evaluation (DACE) after being trained through a webinar and an assessment of competency. DACE results for each nursing home will show a minimum of 20% improvement of person-centered care for residents with dementia in one of the five DACE care domains and staff behavior categories.

c) An empathic caregiver becomes an active advocate for every resident they serve as they begin to feel more responsibility for the care and treatment of their residents. When residents have staff members who are also their advocates, the dynamics of healthcare changes to a social model of care.

d) Staff members who have little empathy for dementia are more likely to abuse a resident either verbally or physically. Resident outbursts are more likely as well. This project sheds light on education from the experiential perspective which has been shown to be most effective for changing staff behavior over time.

e) Training is available to nursing home staff, volunteers, community partners, and family members.

Funded Entity(ies):

Second Wind Dreams, Inc.

Results of the Project:

The *Virtual Dementia Tour (VDT)* is a comprehensive training program that uses patented sensory tools and instructions to sensitize staff to dementia, resulting in better care. This evidence-based training program has been studied, replicated, and peer-reviewed by universities, long-term care entities, and practitioners across cultures, time, and socio-economic strata. The purpose of this project is to train participants how to care for a person with dementia in a caring, patient, empathic person-centered care role through the Inclusive *Virtual Dementia Tour*. PERFORMANCE STANDARD 1: This metric will be analyzed through data collection of pre- and post-*VDT* training surveys. Year one survey results have indicated scores of 93.91%, 90.74%, and 94.03% in quarters one, two, and three, respectively. PERFORMANCE STANDARD 2: DACE results for each nursing home show a minimum of 20% improvement of person-centered care for residents with dementia in one of the five DACE ADL (Activities of Daily Living) DACE results for ADL care domains increased by 17-20% in the first quarter, 0-10% in the second quarter, and

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

North Carolina

NC CMP Funds Expended for Administrative Uses in CY 2025: $161,083.00
NC CMP Funds Expended for Emergency Uses in CY 2025: $3,166.00
NC Active CMP Funded Projects in CY 2025: 7

14-20% in the third quarter. DACE results for staff behavior categories increased by 11-30% in the first quarter, 0-24% in quarter two, and 13-21% in the third quarter.

Project Title: Golden Years – Strength and Mindfulness Training Program

Unique Identifier: NC-0824-GLD-1199 / 2024-04-NC-0826

Project Duration: 10/01/2024 to 09/30/2027

Total Amount of CMP Funds Approved for this Project: $897,780.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $250,744.22

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of this project is to reduce anxiety, isolation, and depressive symptoms while improving communication, autonomy, and stimulating positive interactions.

b) At least 10 residents per facility participating in the program will report increased satisfaction and perceptions of quality of life. The project anticipates satisfaction will increase by 20% because of the program. As a result of the project, there was at least 10% decrease in the number and severity of falls in up to 10 participants participating in the program per facility.

c) The participating residents will benefit as their perceptions of quality of life will be improved by reducing anxiety, social isolation, and depressive symptoms through enhanced communication, autonomy, and stimulating positive interactions. Second, exercise interventions increase core strength and mobility which may reduce the risk for falls.

d) Resident satisfaction with activities at the facility and perceptions of quality of life for participating residents will be improved by reducing anxiety, social isolation, and depressive symptoms while improving communication, autonomy, and stimulating positive interactions. The exercise interventions increase core strength and mobility which may reduce the risk for falls. Nursing homes can anticipate improved scores in falls prevention, depression, and anxiety.

e) Target audiences include staff and resident family members.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

North Carolina

NC CMP Funds Expended for Administrative Uses in CY 2025: $161,083.00

NC CMP Funds Expended for Emergency Uses in CY 2025: $3,166.00

NC Active CMP Funded Projects in CY 2025: 7

Funded Entity(ies):

Golden

Results of the Project:

The purpose of the *Golden Years* project is to reduce anxiety, isolation, and depressive symptoms while improving communication, autonomy, and stimulating positive interactions. Also, exercise interventions increase core strength which may reduce the risk for falls. The project seeks to improve the quality of life for residents in 61 certified nursing homes in North Carolina over a three-year project period. PERFORMANCE STANDARD 1: This goal was not met. Average percent increase in overall resident satisfaction between baseline and mid-year scores was 10.46%. PERFORMANCE STANDARD 2: This goal was met. Average decrease in the number of falls between baseline and mid-year was 14.87%. Average decrease in the severity of falls (falls with injury) between baseline and mid-year was 60%.

Project Title: Improving Person Centered Care Though Reminiscence Social Engagement

Unique Identifier: NC-1124-LBI-1236 / 2024-04-NC-1125

Project Duration: 12/01/2024 to 11/30/2025

Total Amount of CMP Funds Approved for this Project: $39,068.92

Total Amount of CMP Funds Expended During CY 2025 for this Project: $11,974.03

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) Increasing mental stimulation can help, and reminiscence therapy utilizes cognitive functions in a useful, effective, and purposeful way for seniors in nursing homes. The primary goal of the LifeBio project remains to help people be known as individuals and to bring meaning to their lives through the power of story.

b) Depression and anxiety scores will decrease by at least 5% for the participating residents, improving mood and reducing anxiety. Eighty percent (80%) of staff members will agree that knowing the resident's life history will improve staff, resident, and family relationships. Using LifeBio will show a 10% improvement in staff agreeing that knowing a person's life story can improve person centered care.

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North Carolina

NC CMP Funds Expended for Administrative Uses in CY 2025: $161,083.00
NC CMP Funds Expended for Emergency Uses in CY 2025: $3,166.00
NC Active CMP Funded Projects in CY 2025: 7

c) LifeBio found a statistically significant increase in happiness and subjective wellbeing. It is also an engaging activity from the perspective of life enrichment. Personalized activity ideas can be generated by reviewing each resident's LifeBio information. LifeBio captures life stories and is also a program for wellbeing which fosters engagement, reduces loneliness (and social isolation}, and increases feelings of worth and meaning.

d) Nursing home staff will be able to engage and build rapport with residents because of the stories provided by the LifeBio books. This will provide more person-centered care to residents.

e) Not applicable.

Funded Entity(ies):

LifeBio, Inc

Results of the Project:

The primary goal of the LifeBio project remains to help people be known as individuals and to bring meaning to their lives. Program components include life story work, involving residents, family, and community, fostering peer-to-peer and intergenerational friendships to help reduce isolation and loneliness. All ages and cognitive abilities benefit from the program, as it helps to develop social connections and improve senior's lives. This project will create Life Story Books, Snapshots, and Action Plans for each participating resident. In advance, LifeBio provides specific types of training to help communities get started successfully. LifeBio will implement this project in eight certified nursing homes over a 12-month project period. PERFORMANCE STANDARD 1: The project encourages an improvement in the Net Promoter Score (NPS) by the residents of at least two points. Results will be gathered using the NPS survey after residents receive their books. PERFORMANCE STANDARD 2: Results will be gathered using the NPS survey at the start of the program and at the end of the project. At the time of reporting, baseline data has been obtained but endline data is pending. Final results are pending.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

North Carolina

NC CMP Funds Expended for Administrative Uses in CY 2025: $161,083.00

NC CMP Funds Expended for Emergency Uses in CY 2025: $3,166.00

NC Active CMP Funded Projects in CY 2025: 7

Project Title: Best Practices Dissemination and Quality Improvement Support for Skilled Nursing Facilities (SNFs) via a North Carolina Culture of Safety Center

Unique Identifier: NC-1224-QSO-1241

Project Duration: 03/01/2025 to 02/28/2025

Total Amount of CMP Funds Approved for this Project: $60,000.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $25,171.15

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of this project is to improve care for nursing home (NH) residents through quality improvement education, identification of best practices, and implementation of essential quality improvement activities.

b) 1) Participating facilities will have a relative improvement rate (RIR) of 25% in relative knowledge as shown in pre and post test results. 2) Targeted skilled nursing facilities (SNFs) will increase their implementation of best practices, policies, and procedures and have 100% of these SNFs complete at least one performance improvement project (PIP). 3) A 15% increase in relative improvement rate (RIR) in quality assurance and performance improvement (QAPI) topic(s) knowledge will be shown for all trained staff, as indicated by pre- and post-test knowledge surveys, completion certificates, and satisfaction surveys. 4) One hundred percent (100%) of SNFs will show improvement in at least one quality measure related to culture of safety (CSC) activities. 5) Ten percent (10%) decrease in fines and citations as indicated by deficiencies and citations in PIP-related areas. 6) Ten percent (10%) RIR in staff and resident satisfaction shown by Qsource administrated questions (staff) and at least one relevant Consumer Assessment of Healthcare Providers and Systems (CAHPS) or other systematically collected measure (residents).

c) The project will benefit SNF residents by improving clinical outcomes, increasing staff engagement and satisfaction, and improving the overall quality of care for residents.

d) This project aims to assist facilities with improving outcomes in their individual areas of performance deficiencies by providing individual technical assistance and performance improvement plans, collaborative engagement, and education throughout the project period.

e) Not applicable

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

North Carolina

NC CMP Funds Expended for Administrative Uses in CY 2025: $161,083.00
NC CMP Funds Expended for Emergency Uses in CY 2025: $3,166.00
NC Active CMP Funded Projects in CY 2025: 7

Funded Entity(ies):

Qsource

Results of the Project:

The primary goal of the Qsource *Best Practices Dissemination and Quality Improvement Support for Skilled Nursing Facilities (SNFs) via a North Carolina Culture of Safety Center* project is to improve clinical outcomes, increase staff engagement and satisfaction, and improve the overall quality of care for residents. The Qsource Culture of Safety Center project will implement this project in 12 skilled nursing homes (SNFs) over a 12-month project period. PERFORMANCE STANDARD 1: Results are inconclusive at this time as only two of nine facilities have completed all four modules. PERFORMANCE STANDARD 2: Goal met. All nine facilities participating in the project have completed at least one PIP. PERFORMANCE STANDARD 3: GOAL met with an average overall improvement rate of 43%. PERFORMANCE STANDARD 4: Interim results are not available. No data will be collected for this performance standard until the conclusion of the project year. PERFORMANCE STANDARD 5: Interim results are not available at this time; data collection is pending. PERFORMANCE STANDARD 6: Goal partially met. Only four of the nine participating facilities had a 10% or greater RIR in staff and resident satisfaction between baseline and mid-year scores. The average score for all participating facilities was 6%.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

State Civil Money Penalty Reinvestment Projects Funded in Calendar Year (CY) 2025
Atlanta Long-Term Care Location

South Carolina

SC CMP Funds Expended for Administrative Uses in CY 2025: Not provided

SC CMP Funds Expended for Emergency Uses in CY 2025: Not provided

SC Active CMP Funded Projects in CY 2025: Not provided

As of the Project Tracking Spreadsheet submission deadline, the state did not submit an updated project tracking sheet and financial summary to CMS for calendar year 2025.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

State Civil Money Penalty Reinvestment Projects Funded in Calendar Year (CY) 2025
Atlanta Long-Term Care Location

Tennessee

TN CMP Funds Expended for Administrative Uses in CY 2025: $200,652.22
TN CMP Funds Expended for Emergency Uses in CY 2025: $0.00
TN Active CMP Funded Projects in CY 2025: 0

The state had no CMP-funded projects in calendar year 2025.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

State Civil Money Penalty Reinvestment Projects Funded in Calendar Year (CY) 2025
Chicago Long-Term Care Location

Illinois

IL CMP Funds Expended for Administrative Uses in CY 2025: Not provided

IL CMP Funds Expended for Emergency Uses in CY 2025: Not provided

IL Active CMP Funded Projects in CY 2025: Not provided

As of the Project Tracking Spreadsheet submission deadline, the state did not submit an updated project tracking sheet and financial summary to CMS for calendar year 2025.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Indiana

IN CMP Funds Expended for Administrative Uses in CY 2025: $67,659.15

IN CMP Funds Expended for Emergency Uses in CY 2025: $0.00

IN Active CMP Funded Projects in CY 2025: 11

Project Title: Virtual Education

Unique Identifier: IN-1221-UIN-884

Project Duration: 08/01/2022 to 07/31/2025

Total Amount of CMP Funds Approved for this Project: $393,364.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $76,487.46

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The *Virtual Education* project will increase the number of long-term care professionals with training certificates in abuse and neglect prevention, emergency and disaster management, and pressure ulcer prevention.

b) Participants will improve their knowledge, skills, and abilities in preventing abuse and neglect, emergencies, disaster preparedness, and managing and preventing pressure ulcers.

c) The training ensures that facilities have the resources and tools to provide high-quality healthcare.

d) The goal is to benefit residents through preventing abuse and neglect, preventing pressure ulcers, and emergency and disaster preparedness and management.

e) The target audience is nursing home professionals.

Funded Entity(ies):

Uindy Center for Aging and Community

Results of the Project:

For the abuse and neglect training, 75% or greater of the respondents rated all the characteristics of the session as excellent. Participants did show positive knowledge gain on 13 questions of the pre- and post-test, with the improvement ranging from 0.91% to 56.52%. The pressure ulcer training had 93%-96% strongly agreeing or agreeing with the positive statements about whether their expectations were met or exceeded, the content was applicable to their work, and that the knowledge gained would benefit the residents in their facilities. Five questions showed no change from pre- to post-test. Improvement was noted in two of ten questions, with the percent improvement ranging from 42.86% to 46.15%. One question showed a decline of -33%. While this percentage appears large, the small sample size means it only

Indiana

IN CMP Funds Expended for Administrative Uses in CY 2025: $67,659.15

IN CMP Funds Expended for Emergency Uses in CY 2025: $0.00

IN Active CMP Funded Projects in CY 2025: 11

represents one additional person answering the question incorrectly on the post-test. For the emergency and disaster management course, 61.54% or more of respondents rated all aspects of the course as excellent. Looking at individual feedback, the length of sessions received the lowest excellent rating at 61.54%, where the relevance of information was rated excellent by the highest percentage of respondents at 84.62%. On the six questions where scores on the pre-test were lower, all questions showed positive improvement (1.89% to 73.08% changes in proportion of correct answers). During the project, the Abuse and Neglect Prevention and Pressure Injury Prevention and Management courses were each offered ten times, while the Emergency and Disaster Management course was offered five times. Registration was initially limited to 50 participants per course offering. However, after several iterations of the courses, it was found that the number of people who attended the synchronous sessions of the courses was far less than the number that registered. Subsequently, registration limits were lifted and allowed more than 50 people to register for each course. It was also found that courses were generally less well attended in the fall than in the winter or spring, perhaps due to participants seeking continuing education unit (CEU) credits at the beginning of the new year. Lessons Learned and Steps to Improve Future Projects: 1. Provide Indiana Department of Health (IDOH) with a schedule of events and associated announcements for the long-term care (LTC) newsletter at the beginning of the project. 2. Consistently add new subscribers to the (Center for Aging and Community) CAC newsletter to increase reach. 3. For free virtual events, register two to three times as many participants as desired to fill the classes. 4. Hold classes in the spring, winter, and summer and avoid holding classes in the fall. 5. For licensed nurses, limit session time to 1.5 hours or less. 6. Offer the advanced nurse practitioner (ANP) class as two half-day sessions. 7. Offer an additional session focused specifically on advanced scenario-based learning. 8. Evaluate the time commitment and the strategic communication about the survey. Design six-month survey, if needed.

Project Title: Indiana's Wound Care Excellence Program for Skilled Nursing Facilities

Unique Identifier: IN-1221-VWPM-885

Project Duration: 08/01/2022 to 07/31/2025

Total Amount of CMP Funds Approved for this Project: $198,216.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $38,542.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Indiana

IN CMP Funds Expended for Administrative Uses in CY 2025: $67,659.15
IN CMP Funds Expended for Emergency Uses in CY 2025: $0.00
IN Active CMP Funded Projects in CY 2025: 11

a) The *Indiana Wound Care Excellence Program for Skilled Nursing Facilities* project was created to help increase the wound care knowledge of nurses working at certified facilities in Indiana.

b) This program will provide wound care certification for 280 skilled facility nurses.

c) Having wound care-certified nursing in facilities will improve the quality of care for nursing home residents.

d) The program will provide improved quality of care related to wound care for nursing home residents.

e) The target audience is nurses in nursing homes.

Funded Entity(ies):

Vohra Wound Physician Management, LLC (Vohra Wound Physicians)

Results of the Project:

During the last quarter of the program, a total of 25 out of the allowed 280 participants complete the course. This amounts to a total of 214 completions since the start of the program. Overall, although the program fell short with number of completions, the program was successful and the applicant is thankful to have partnered with the state to fulfill the mission of raising the level of wound care education and competence for nurses in Indiana. The program did not experience any significant barriers or unexpected occurrences throughout the final quarter of the project. Overall, the applicant is very satisfied with the outcome of the Civil Money Penalty (CMP) project and is proud to have awarded all 214 wound care certificates and 30 Certified Nurse Educator (CNE) credits to nurses across the state. Furthermore, the applicant has received positive feedback from nurses and their respective facilities regarding their wound care certification program. Many of the participants expressed how they enjoyed the course and gained a valuable and deeper insight into wound care management.

Project Title: Activity Enhancement

Unique Identifier: IN-0124-CCRC-1114

Project Duration: 12/27/2024 to 12/26/2027

Total Amount of CMP Funds Approved for this Project: $16,185.46

Total Amount of CMP Funds Expended During CY 2025 for this Project: $5,487.97

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

State Civil Money Penalty Reinvestment Projects Funded in Calendar Year (CY) 2025
Chicago Long-Term Care Location

Indiana

IN CMP Funds Expended for Administrative Uses in CY 2025: $67,659.15
IN CMP Funds Expended for Emergency Uses in CY 2025: $0.00
IN Active CMP Funded Projects in CY 2025: 11

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The *Activity Enhancement* project will enhance the nursing home's activity programming by providing music therapy sessions and two garden boxes with supplies.

b) Goals for enhancing the gardening activity include increasing participation by 25%, allowing more residents to assist during this process. For the annual gardening activity, the goal is that 50% of residents will participate through gardening and/or discussions. Many residents in this nursing home have backgrounds in farming or gardening. By increasing the number of music groups each month, the goal is to double the number of residents participating in group music therapy. With the increase in individual music sessions, the goal is a 40% increase in individual sessions. There will be a total of 26 groups and 26 individual music therapy sessions per year. The goal for both group and individual music therapy sessions is that 66% of residents attending will actively engage during the sessions by singing and using musical instruments.

c) These enhanced activities will provide more purpose in the lives of these nursing home residents.

d) The program will improve the quality of life for the nursing home residents.

e) The target audience is the residents at Christian Care Retirement Community.

Funded Entity(ies):

Christian Care Retirement Community

Results of the Project:

The facility continues to enjoy and participate in music therapy on a weekly basis. Residents are encouraged to join in and remain engaged throughout each session. The raised garden beds were completed and delivered during the first week of June. They have been placed in two separate areas, one on the healthcare patio and one on the assisted living patio, so that all residents can enjoy them. The plan is to plant flowers and a variety of seeds to create a colorful and interactive gardening experience. Impact on residents: Music therapy has promoted relaxation, reminiscence, and active participation, particularly for residents with dementia or cognitive decline. The arrival of the garden beds has sparked conversations and excitement among gardening enthusiasts. Impact on staff: Staff have observed improved resident mood and engagement following music sessions. Garden beds are expected to provide a calming, low-barrier activity that can be incorporated into daily routines. Impact on families: Families have expressed appreciation for the benefits of music therapy and look forward to enjoying the garden areas during visits.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Indiana

IN CMP Funds Expended for Administrative Uses in CY 2025: $67,659.15

IN CMP Funds Expended for Emergency Uses in CY 2025: $0.00

IN Active CMP Funded Projects in CY 2025: 11

These additions have strengthened family satisfaction and trust through visible investment in meaningful resident activities.

Project Title: ALZPro: Workforce Training and Support for Sustainable, Person-Centered Dementia Care

Unique Identifier: IN-0124-AZS-1115

Project Duration: 08/01/2024 to 07/31/2026

Total Amount of CMP Funds Approved for this Project: $279,090.18

Total Amount of CMP Funds Expended During CY 2025 for this Project: $139,545.09

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The *ALZPro: Workforce Training and Support for Sustainable Person-Centered Dementia Care* project will establish a network of connections, engagement, education, and support for caregivers of individuals living with dementia in 50 skilled nursing facilities.

b) Quantifiable objectives: 90% redemption rate of the care provider training; 85% satisfaction with the professional training program; 80% pass rate for the *essentiALZ* certification; 20% increase in professional provider knowledge; 20% increase in professional provider confidence; 85% satisfaction with the family caregiver education.

c) This project will establish a network for training, connection, engagement, education, and support for professional care providers of individuals living with dementia and their resident families, aiming to positively impact person-centered care delivery, interactions, and outcomes for residents.

d) Nursing homes will have up to 20 staff members trained and certified, and an *ECHO (Extension for Community Healthcare Outcomes)* video learning platform for three to five staff members of each nursing home in the project.

e) Training (online and in-person) is also available and provided to families and community members

Funded Entity(ies):

Alzheimer's Association

Indiana

IN CMP Funds Expended for Administrative Uses in CY 2025: $67,659.15

IN CMP Funds Expended for Emergency Uses in CY 2025: $0.00

IN Active CMP Funded Projects in CY 2025: 11

Results of the Project:

Twenty *essentiALZ* training and certification opportunities are available to each participating skilled nursing facility (SNF). Twenty-four of the fifty participating skilled nursing facilities are utilizing the *essentiALZ* training and certification. Total year-to-date (YTD) *essentiALZ* redemptions: 88. Total year to date *essentiALZ* satisfaction: 91%. *Project ECHO* is a six-week online series for leadership staff from each participating skilled nursing facility to attend. The applicant is currently hosting a *Project ECHO* series with 11 Indiana communities participating and the next *ECHO* series is scheduled to begin in January 2026. Two facilities registered for the *Project ECHO* series. Eleven facilities are attending the *Project ECHO* series. Eight facilities from previous *Project ECHO* series. The program information was distributed to each participating skilled nursing facility this quarter. Nine program opportunities were distributed with 100% of respondents stated they “strongly agreed” or “agreed” to the statement “I was satisfied with this program”. During this quarter, the applicant was so pleased with the responses with the *ECHO* registration and interest in *ECHO* case studies. The project is also pleased with the increase in facilities that have started redeeming *essentiALZ*. The Alzheimer's Association continues to struggle with staff turnover in the communities they are working with and has scheduled upcoming one on ones to continue encouraging community participation.

Project Title: Memory Interventions Using the Life Highlights Program

Unique Identifier: IN-0224-TRW-1118

Project Duration: 11/01/2024 to 10/31/2027

Total Amount of CMP Funds Approved for this Project: $13,154.88

Total Amount of CMP Funds Expended During CY 2025 for this Project: $5,649.36

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The applicant will implement the *Memory Interventions Using the Life Highlights Program* by partnering with Pathom, Inc., administrators of the Life Highlights Program. The project provides residents with highly personalized reminiscence interactions. The program puts resident information into each private room through a visual aid.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Indiana

IN CMP Funds Expended for Administrative Uses in CY 2025: $67,659.15
IN CMP Funds Expended for Emergency Uses in CY 2025: $0.00
IN Active CMP Funded Projects in CY 2025: 11

b) Goals are 80% of the nursing home's residents will be enrolled in the program, 80% of staff will be trained in the program, 90% of trained employees will pass the post-test, and 80% will agree or highly agree that the Life Highlights Program can help caregivers know residents at a deeper level.

c) The information is used by any staff, from certified nursing assistants (CNAs) to janitorial staff, to engage residents in personal interactions, be it in the form of comforting chats, everyday interactions to combat loneliness, or to redirect in times of increased anxiety or confusion, resulting in an improved quality of life through more meaningful interactions with others.

d) The target audience is the residents of The Restoracy of Whitestown.

e) Not applicable

Funded Entity(ies):

The Restoracy of Whitestown

Results of the Project:

Nine new residents joined The Restoracy of Whitestown during the quarters. It remains evident from conversations with families and their subsequent comments; they remember happy memories of their loved one while reminiscing. Even though this is not the goal of this project, the positive emotions this helps bring are rewarding. Thirty-six additional staff members were trained during this quarter's activities. Pathom Chief Executive Officer (CEO) visited in person to see if the facility needed any help in training. The video training supplied earlier continues to be helpful. It describes how to read and understand the Life Highlights visual aid, as well as demonstrates how it might be best used with residents. It continues to be a very efficient means of training. Post test surveys demonstrated 100% pass rates for all trainees. There are no current challenges for this project. Training is working well. Staff are engaged and utilize the tool. The facility will continue to gather additional resident's targeting intake, during their first care plan within 72 hours, or during their scheduled quarterly care plans afterwards. The online tool has also proven useful for gathering resident's Life Highlights for families who are difficult to meet with in person. Two power users, the Admissions Director and Social Services Director, remain trained with the Social Services Director acting as the primary contact. As the Social Services Director is new, Pathom has provided additional resources to help enter residents' information.

Indiana

IN CMP Funds Expended for Administrative Uses in CY 2025: $67,659.15

IN CMP Funds Expended for Emergency Uses in CY 2025: $0.00

IN Active CMP Funded Projects in CY 2025: 11

Project Title: The Java Project: Addressing Loneliness and Social Isolation

Unique Identifier: IN-0224-ASC-1125

Project Duration: 12/03/2024 to 12/02/2027

Total Amount of CMP Funds Approved for this Project: $270,000.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $90,000.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The goal of the *Java Project* is to improve quality of life of residents in nursing facilities by decreasing loneliness and social isolation through the implementation of three evidence based standardized peer support activity programs.

b) The project objectives are to implement weekly peer support and mentoring groups using *Java* materials and methods, to reduce loneliness and social isolation, and increase happiness among participants. To track changes in social well-being, long-term care homes will use a single point assessment of social well-being called the Java Scale. The Java Scale is an observational tool that measures social well-being in a way that allows for inclusion of all residents, including residents living with advanced dementia. The Java Scale aims to assess if there are any observable improvements in participants before and while the *Java Project* is underway. In this scale, social participation, emotional connection, and happiness are taken as positive indicators of social well-being. The Java Scale is a form of a Visual Analogue Scale. Visual Analogue Scales (VAS) are a measurement instrument that measures a characteristic that ranges across a continuum of values and cannot easily be directly measured, such as loneliness. Participating residents are observed before and during a session. There are only three questions to answer, one for each concept, thus reducing the burden on staff. Single item questions have been shown to be reliable.

c) The programs are weekly resident peer support and mentoring programs facilitated by staff. These programs have been shown to significantly reduce loneliness, a 30% decrease in depression scores, and a 60% increase in activity participation among residents. The three programs included in the *Java Project* are: the *Java Music Club*, a resident peer support program, *Java Memory Care*, peer support for residents living with dementia, and *Java Mentorship* which engages residents to support fellow residents who do not normally go to programs.

Indiana

IN CMP Funds Expended for Administrative Uses in CY 2025: $67,659.15
IN CMP Funds Expended for Emergency Uses in CY 2025: $0.00
IN Active CMP Funded Projects in CY 2025: 11

d) All three programs are implemented by existing staff using live webinars, short training videos, and the step-by-step guides provided.

e) Nursing home resident, staff, volunteers, and families.

Funded Entity(ies):

American Senior Communities

Results of the Project:

Communities have expressed that residents continue to enjoy the *Java* sessions, and some reported having great participation. Both staff and residents are learning more about how the program works and getting more comfortable during the discussion. As a staff stated: "It seems to be a little easier for them now." There are 18 American Senior Communities (ASC) communities participating in the program with 167 residents benefiting from the project. Some communities have also tailored this program to the dynamic of their community, e.g., incorporating more music to the sessions, in other cases having more conversation and topic discussions. Some communities have been adding *Java* to other regular activities they have, which has been a great success. A particular aspect of this program that stands out is that people can talk about emotions and feelings, something that takes time and it is difficult to achieve in other activities. Staff reported that residents have opened up more as the project has progressed. Staff has also reported "It [*Java Music*] brought the residents closer on the days we did it." Other staff expressed "I had a resident that stated it really brightened her whole week, and it is something that she really looks forward to." Participants look forward to singing their favorite songs too. In some cases, they are using "small shakers" to play them during the music. Some communities expressed that they are still having challenges getting more participants, and some that come to the sessions don't want to participate. One staff reported that residents don't always understand what the "talking stick" is about, so to avoid further confusion they stopped using it. In another community, they needed to change the time of the day the *Java* program was offered as they were not getting enough participants. The *Java* staff continue to be in direct contact with those communities that expressed concerns, discussing solutions to their challenges, and providing resources to meet their particular needs. It has been great to see that these challenges have been addressed and most of them are not a concern anymore.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Indiana

IN CMP Funds Expended for Administrative Uses in CY 2025: $67,659.15

IN CMP Funds Expended for Emergency Uses in CY 2025: $0.00

IN Active CMP Funded Projects in CY 2025: 11

Project Title: Indiana Long-Term Care Leadership Conference

Unique Identifier: IN-0924-IDOH-1211

Project Duration: 01/01/2025 to 12/31/2025

Total Amount of CMP Funds Approved for this Project: $152,571.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $152,475.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The Indiana Department of Health will present the *Health Care Leadership Conference* once during the 2025 calendar year, providing an opportunity for long-term care leaders to improve the care of their residents through education and training.

b) At the conference, long-term care health care leaders will hear current evidence-based practices on quality of life and quality of care concerns and will receive materials that can be used to educate staff, residents, and/or families. c) Participants will be able to implement best practices from conference information.

d) Attending the conference will improve both the quality of care and quality of life for residents by providing current quality of life and quality of care concerns best practices.

e) The target audience is all long-term health care facility leadership and staff throughout Indiana.

Funded Entity(ies):

Indiana Department of Health

Results of the Project:

Total registrants: 369 with 144 in-Person and 225 virtual attendances. The State Agency (SA) received 106 survey responses with an overall rating of at least 80% or greater rating of the conference Excellent or Very Good. ~8.4/10 placed the conference in likelihood to recommend to others, and ~90% are Extremely or Very Likely to attend next year. These metrics signal strong program-market fit, effective hybrid execution, and a loyal attendee base. Sessions were consistently rated as Extremely or Very Engaging. Attendees repeatedly cited practical takeaways, leadership relevance, and real-world applicability as key value drivers. Hybrid participation allowed broader access, with virtual attendees accounting for a significant portion of total engagement. Networking opportunities were rated as valuable for career development. A

Indiana

IN CMP Funds Expended for Administrative Uses in CY 2025: $67,659.15
IN CMP Funds Expended for Emergency Uses in CY 2025: $0.00
IN Active CMP Funded Projects in CY 2025: 11

core group of highly engaged attendees drove peer-to-peer interaction and community energy. Several takeaways were noted as ways to improve future conferences: 1. Attendees want clearer differentiation of continuing education unit (CEU) types during registration. Confusion remains around CEU eligibility, especially for virtual attendees. 2. Registration table setup felt disorganized. Pre-printed badge bins created delays and confusion. 3. The day-of setup differed from the prior walkthrough, creating confusion for the MC and speakers. 4. The event should be launched earlier with more consistent promotion. 5. Repeated feedback about cold temperatures in the main meeting room. 6. Strong demand for session handouts, slides, and materials after the event. Significant plans have been made to address all of these concerns in future projects. The 2025 Indiana Department of Health (IDOH) Long-Term Care Leadership Conference was a clear success, delivering high satisfaction, strong engagement, and meaningful professional value. With targeted improvements in registration clarity, operational flow, and promotional strategy, the 2026 conference is well-positioned to grow attendance, deepen impact, and further solidify its role as a must-attend event for long-term care leaders across Indiana.

Project Title: Improving Person Centered Care Though Reminiscence Social Engagement

Unique Identifier: IN-1224-LBI-1246

Project Duration: 09/01/2025 to 08/31/2026

Total Amount of CMP Funds Approved for this Project: $356,737.88

Total Amount of CMP Funds Expended During CY 2025 for this Project: $0.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) LifeBio's *Improving Person Centered Care Through Reminiscence Social Engagement* project aims to enhance person-centered care in nursing homes by engaging residents in sharing their life stories. This project will create a personalized life story book for residents at 75 skilled nursing facilities (SNFs), with up to 30 residents participating at each nursing home. These biographies will spark connection with other residents and with staff. Residents will experience a better quality of life with person-centered care at the forefront.

b) The project aims to complete the LifeBio process and deliver Life Story books, Snapshots and Action Plans for up to 2,250 residents within the project timeline. At least 80% of the nursing home resident

Indiana

IN CMP Funds Expended for Administrative Uses in CY 2025: $67,659.15
IN CMP Funds Expended for Emergency Uses in CY 2025: $0.00
IN Active CMP Funded Projects in CY 2025: 11

participants will enjoy the project and reap its benefits. At least 80% or more of nursing home staff will agree that knowing a resident's life story is crucial for quality care and the Net Promoter Score (NPS) of the community will increase from baseline.

c) Reminiscence therapy is particularly effective with nursing home residents because it reminds them of experiences, people, places, and events that they may enjoy sharing as a natural part of healthy aging. It gives participants something meaningful to talk about. Sometimes it helps people see things that happened in the past in a new way. In many cases, residents are reminded about how unique they are; there is no one else like them. They have a chance to give back to others as they can share lessons learned, beliefs, and advice too. No one's life is perfect, and people share their accomplishments and challenges too. Many residents have not had the opportunity to create a lasting legacy; this is their chance to give a priceless gift to the next generation. LifeBio is particularly important for people reaching the end of their lives or facing life-limiting conditions.

d) Staff members enjoyed looking at Life Story Books with residents. LifeBio captures life stories and is also a program for wellbeing which fosters engagement, reduces loneliness, and increases feelings of worth and meaning.

e) Youth and adult volunteers will be encouraged to engage in intergenerational activities.

Funded Entity(ies):

LifeBio Inc.

Results of the Project:

Interim results are not yet available.

Project Title: Dementia Live: A Foundational Experiential Education Tool Leading to Competent and Empathetic Care Partners for People Living with Dementia in Indiana

Unique Identifier: IN-0225-AGE-1292

Project Duration: 03/01/2025 to 02/28/2026

Total Amount of CMP Funds Approved for this Project: $34,881.03

Total Amount of CMP Funds Expended During CY 2025 for this Project: $11,627.01

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Indiana

IN CMP Funds Expended for Administrative Uses in CY 2025: $67,659.15
IN CMP Funds Expended for Emergency Uses in CY 2025: $0.00
IN Active CMP Funded Projects in CY 2025: 11

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The *Dementia Live* project will create a network of connections, engagement, education, and support for care providers of individuals living with dementia in seven certified nursing facilities (CNFs), to positively impact person-centered care delivery and outcomes for residents.

b) The designated *Dementia Live* coach training participants will be prepared to conduct the in-house *Dementia Live* simulation experience for employees, evidenced by a minimum score of 80% of the training competency assessment. Staff taking the REVEAL Aging courses will achieve an average competency score of 75%. Resident outcomes include a 10% reduction in reported resident stress reactions in: Minimum Data Set (MDS) E0200A - Physical behavioral symptoms, MDS E0200B - Verbal behavioral symptoms, MDS 0200C - Other behavioral symptoms not directed toward others, and MDS E800 - Rejection of care.

c) This project aims to improve the quality of care for long-stay nursing home residents who are living with dementia. This will be achieved with *Dementia Live*, an experiential education program that simulates cognitive and sensory impairments, giving participants a real-life, in-their-shoes experience of what it feels like to live with dementia.

d) *Dementia Live* develops competent and empathetic care partners to improve their care.

e) Staff members

Funded Entity(ies):

AGE-u-cate Training Institute

Results of the Project:

Virtual project kick-off meetings were held with each participating certified nursing facility (CNF). They were given three dates: September 17, September 24, or October 1, 2025. For participants who were unable to attend, they received a recording of the meeting. It was fortunate that six of the seven participants are Behavioral Health Integration (BHI) communities. They are all very engaged and on top of implementation because many were already familiar with *Dementia Live*. There is one non-BHI community, and they are a bit behind but connected with the administrator who identified the staff member to take the online coach training. The staff member started the training in December 2025, and the project staff is collaborating with them to ensure completion. Four individuals completed the *Dementia Live* Coach training this quarter, representing three out of the seven participating Indiana CNFs. BHI communities already had trained

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Indiana

IN CMP Funds Expended for Administrative Uses in CY 2025: $67,659.15
IN CMP Funds Expended for Emergency Uses in CY 2025: $0.00
IN Active CMP Funded Projects in CY 2025: 11

coaches, so the total number of Indiana coaches is 11, representing six of the seven participating CNFs. Several of the BHI coaches indicated they are refreshing their coach training. All four scored 80% or above. AGE-u-cate considers it a huge success that every participating CNF is engaged. Activities to continue to implement the project will include: 1. Inviting coaches and project leaders to attend implementation support virtual meetings scheduled for the second Wednesday every other month, beginning February 11. Anyone from the Indiana Department of Health (IDOH) is welcome to join in. 2. Distribute the "Foundations for Dementia Care" REVEAL Aging course. 3. Begin collecting *Dementia Live (DL)* training sign in sheets. 4.Begin collecting outcomes to residents. 5. Follow up with individuals to finish coach training. 6. Provide individual support, as requested.

Project Title: Reminiscing Through the Life Highlights Program

Unique Identifier: IN-0625-PAI-1364

Project Duration: 11/15/2025 to 11/14/2028

Total Amount of CMP Funds Approved for this Project: $120,000.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $0.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The *Life Highlights Program* provides nursing home residents of an additional eight skilled nursing facilities with highly personalized reminiscence interactions. The program puts resident information into each private room through a visual aid.

b) Goals are that 80% of the nursing home residents will be enrolled in the program, 90% of staff will be trained in the program, 90% of trained employees will pass the post test, and 80% will agree or highly agree that the *Life Highlights Program* can help caregivers know residents at a deeper level.

c) The information is used by any staff, from certified nursing assistants (CNAs) to janitorial staff, to engage residents in personal interactions, be it in the form of comforting chats, everyday interactions to combat loneliness, or to redirect in times of increased anxiety or confusion.

d) The program will provide an improved quality of life through more meaningful interactions with others.

e) Target audience is the residents of eight nursing homes.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Indiana

IN CMP Funds Expended for Administrative Uses in CY 2025: $67,659.15
IN CMP Funds Expended for Emergency Uses in CY 2025: $0.00
IN Active CMP Funded Projects in CY 2025: 11

Funded Entity(ies):

Pathom, Inc.

Results of the Project:

Interim results are not yet available.

Project Title: Improving Dementia Capability with CARES Dementia 5-Step Method

Unique Identifier: IN-0625-HCI-1365

Project Duration: 09/01/2025 to 08/31/2028

Total Amount of CMP Funds Approved for this Project: $2,354,058.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $0.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The *Improving Dementia Capability with CARES Dementia 5-Step Method* project will provide evidence-based dementia training to staff at 157 certified nursing facilities (CNFs). The *CARES* program meets state training requirements, qualifies professional staff for continuing education, and teaches direct-care workers the easy-to-learn and easy-to-remember *CARES Dementia 5-Step Method.*

b) A realistic, actionable project goals is to work with each nursing home to train and certify a minimum of 15% of direct care staff in each *CARES*® program by the end of the three-year project timeline.

c) *CARES® Dementia 5-Step Method* is evidence-based, proven to increase observable person-centered care practices, reduce resident anxiety, and reduce the use of antipsychotic medications.

d) The project aims to provide the highest quality caregiver training for Alzheimer's, dementia, and other brain disorders to empower and equip nursing home staff members to respond effectively to dementia-related behavior, which can lead to behavioral incidents between residents and staff members. According to the Alzheimer's Association, training all levels of staff maximizes person-centered care outcomes.

e) Staff in the nursing homes

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

State Civil Money Penalty Reinvestment Projects Funded in Calendar Year (CY) 2025
Chicago Long-Term Care Location

Indiana

IN CMP Funds Expended for Administrative Uses in CY 2025: $67,659.15
IN CMP Funds Expended for Emergency Uses in CY 2025: $0.00
IN Active CMP Funded Projects in CY 2025: 11

Funded Entity(ies):

HealthCare Interactive, Inc.

Results of the Project:

Interim results are not yet available.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Michigan

MI CMP Funds Expended for Administrative Uses in CY 2025: $237,529.66

MI CMP Funds Expended for Emergency Uses in CY 2025: $0.00

MI Active CMP Funded Projects in CY 2025: 8

Project Title: Comprehensive Best Practices for Person and Relationship-Centered Dementia Care

Unique Identifier: MI-0722-MCM-1000

Project Duration: 10/01/2022 to 09/30/2025

Total Amount of CMP Funds Approved for this Project: $746,570.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $215,122.87

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The project aims to provide a platform to help hardwire person-centered and relationship-centered dementia care practices, empowering individuals living with dementia and those who support them.

b) The project will engage nursing home teams as active participants in self-directed, online learning focused on the fundamentals of person-centered/ person-directed dementia care. The education will be provided through eVOLVE Online Learning from The Eden Alternative, featuring a six-course series, *Living Well with Dementia with Artificial Intelligence (AI) Power*. Access to the online courses will be limited to four nursing home employees on the organizational teams and participating surveyors and ombudsmen, totaling up to 58 individuals per year and 174 individuals over the three-year period. It will also engage nursing home teams in a participatory, online learning collaborative process that involves lecture, discussion, coaching, accountability, and participant application of best practices learned over nine months. The project aims to have all participating nursing homes complete all the training components provided. The Stress Blueprint will also engage nursing home teams in participating in virtual learning experiences focused on stress management, emotional intelligence, communication, and self-leadership, aiming to enhance the quality of care provided to dementia patients and increase staff retention and resilience. Finally, the Michigan Society for Post-Acute and Long-Term Care Medicine project will present an annual summary of its work and collaborate with medical directors to enhance communication among health professional team members focused on providing person-centered and relationship-driven dementia care.

c) This project benefits and enriches the lives of nursing home residents by applying the Eden Alternative Domains of Well-Being, building an empowered culture of dementia care for residents and staff, creating safety nets for staff well-being that protect resident well-being, and engaging residents in project experiences.

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Michigan

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MI CMP Funds Expended for Emergency Uses in CY 2025: $0.00
MI Active CMP Funded Projects in CY 2025: 8

d) The nursing home will benefit by providing staff with the skills to provide person-directed and relationship-centered care for residents living with dementia. They will learn how the voice and choice of individuals living with dementia are at the center of all discussions around support and quality of life.

e) Nursing home clinical staff, Medical Directors, ombudsman, and state surveyors.

Funded Entity(ies):

Michigan County Medical Care Facilities Council

Results of the Project:

Final project results: The project supported a multifaceted initiative that partnered with The Eden Alternative, The Stress Blueprint, Michigan Medical Directors Association (MIMDA), and Dr. Cheryl Huckins to improve dementia care from multiple perspectives. The project integrated education, enhanced techniques to address unmet needs and behavioral expressions, expanded physician support to reduce unnecessary medications, and promoted emotional intelligence and stress management among caregivers. This initiative successfully achieved its goal of creating an experiential platform that reinforces person- and relationship-centered dementia care practices. Through mentorship, high engagement, and hands-on learning, facility teams now demonstrate improved ability to foster a caring culture that is flexible, innovative, and resilient, empowering both residents living with dementia and the caregivers who support them. The Eden Alternative engaged nursing home teams in both in-person and online learning centered on the fundamentals of person-directed dementia care. The in-person Certified Eden Associate Training (CEAT) consisted of three 8-hour sessions exploring the Ten Principles of the Eden Alternative, Domains of Well-Being, and the three plagues of aging—loneliness, helplessness, and boredom. This training helped reframe the culture of care and societal perceptions of aging, building stronger, more compassionate care environments. Additionally, the Certified Eden Educator Training (CEET) provided a “train-the-trainer” model, enabling up to ten selected staff members per facility to become certified educators. These individuals are now equipped to deliver ongoing internal training in Eden Alternative principles, ensuring long-term sustainability and extending the impact of this grant far into the future. A total of 170 individual nursing home staff, nine state surveyors, and five ombudsmen participated in the 9-month online learning collaborative. Pre-to-post testing was used to assess learning and implementation into practice. Dr. Cheryl Huckins, MD, retired facility medical director and current President of Michigan (MI) PALTmed, participated in training in Years 1 and 2, and received her Eden Associate Training (CEAT) in Year 3. Her role was to synthesize knowledge and share information about grant activities, best practices, and desired outcomes

Michigan

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with fellow nursing home physicians. A live presentation was provided at the Fall 2023 Michigan PALTMed Conference in Grand Rapids to approximately 75 attendees. Additionally, as the Chapter President, Dr. Huckins provided routine updates to MI PALTmed physician members, including specific person-centered strategies and desired outcomes for dementia care in nursing homes. The Stress Blueprint: Under the direction of Dr. Wendy Garvin Mayo, The Stress Blueprint focused on enhancing staff well-being and resilience through emotional quotient or intelligence (EQ) development and practical stress management strategies. Monthly virtual education sessions guided participants in identifying barriers to self-leadership and applying the SHAPE Framework (Story, Hone, Assess, Plan, Execute) to manage stress effectively. All 35 facilities had access to live interactive sessions. Sessions were recorded, and links were made available for staff who were unable to participate live. A two-question pre- and post- event questionnaire was used to report 1) if the session were beneficial in their personal and professional life and 2) if they gained one to two takeaways they could apply to their personal and/or professional life. Participants also created personalized stress management plans to support emotional balance and improve the quality of care for residents with dementia. Directors of Staff Development and Assistant Directors of Nursing received specialized training and access to presentation materials, Michigan County Medical Care Facilities Council (MCMCFC) including a recorded session and PowerPoint, to replicate the program for ongoing staff education. Post-program evaluations demonstrated overwhelmingly positive results: 100% of participants reported the sessions were beneficial to their personal and/or professional development; 100% identified one or more key takeaways applicable to their daily work; 100% would recommend the training to another healthcare organization, The Stress Blueprint. These results underscore the program's measurable success in enhancing professional competence, emotional intelligence, and organizational culture to improve care to residents with dementia across participating facilities.

Project Title: The Java Project: Addressing Loneliness and Social Isolation

Unique Identifier: MI-0824-PGI-1200

Project Duration: 10/01/2024 to 09/30/2027

Total Amount of CMP Funds Approved for this Project: $150,000.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $50,000.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

Michigan

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a) The purpose of this project is to improve the overall quality of life of nursing home residents by addressing social isolation and loneliness by engaging nursing home residents through peer support and mentoring.

b) The *Java* program will consist of the *Java Music Club*, *Java Memory*, and *Java Mentorship*. Live training webinars, recorded training, and follow-up support will be provided throughout the year. Each nursing facility has a goal to decrease its behaviors affecting others to below the national quality measure average of 18% and decrease its anxiety and hypnotic use to less than 7%, which would be below the national average. The project will be implemented in ten skilled nursing facilities (SNFs) over a period of three years. The project objectives are to implement weekly peer support and mentoring groups using the *Java* materials and methods in all ten homes, to reduce loneliness and social isolation and increase happiness among participants. At least 50% of residents participating will be observed and assessed before and then again during a *Java Music* group once using the Java Scale in Year 1. The target goal is an average minimum 10% reduction in observed rates of social isolation and loneliness and an average minimum 10% improvement in observed rates of happiness among the participants. At least 50% of resident participants will be observed and assessed before and then again during a *Java Memory* group once using the Java Scale in Year 2. The target goal is an average minimum 10% reduction in observed rates of social isolation and loneliness and an average minimum 10% improvement in observed rates of happiness among the participants. At least 50% of residents being visited by mentors will be observed and assessed before and then again during a visit using the Java Scale for the *Java Mentorship* program in Year 3. The target goal is an average minimum 10% reduction in observed rates of social isolation and loneliness and an average minimum 10% improvement in observed rates of happiness among those visited.

c) Nursing facility residents will benefit from the *Java* programs by developing stronger social and emotional bonds with each other. Through sharing grief, sorrow, and happiness in the *Java* groups, empathetic connections are built, and these social relationships carry over to other activities and nursing home life. Residents will directly benefit from new, close relationships and from having a meaningful purpose in helping their peers.

d) The nursing home will benefit from increasing opportunities for positive engagement and interaction between staff and residents, as well as among residents.

e) Nursing home activities staff

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Michigan

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Funded Entity(ies):

The Peplinski Group Inc

Results of the Project:

First year interim project results: Overall, the *Java Music Club* program had a strong start across the ten participating Peplinski communities. Most sites reported positive engagement and growing participation, though a few have faced challenges related to staffing changes and facilitator transitions. To support consistency and share best practices, a facilitators meeting was scheduled to address challenges, celebrate successes and share tips and ideas among facilitators. During the first year of the project, the sessions fostered deeper emotional connections among residents. Facilitators observed participants opening up about personal topics such as grief, loss, and life experiences, leading to more compassion, and understanding within the group. Several communities highlighted the depth and quality of conversations, as residents felt increasingly comfortable expressing themselves. Others found success by choosing uplifting and joyful themes, which have helped set a positive tone and increased participation. Music continued to be one of the most appreciated elements of the program. Many residents expressed excitement for upcoming sessions, often asking when the next group will take place, and there were frequent reports of smiling, singing, and shared enjoyment during meetings. Communities also found creative ways to enhance engagement, including taking groups outdoors for a change of scenery and encouraging peer-led invitations. Evaluation tools such as the Observation Form and the Java Scale were completed successfully in nine of the ten participating communities. The remaining site was delayed due to staffing changes; however, the new activity director received the *Java Music* training and is now back on track implementing the program regularly. Number of communities that implemented the *Java Music Club* program in Year 1: 10. Total number of sessions offered in Year 1: 274. Total number of residents participating in the *Java Project* in Year 1: 528. Challenges Encountered Year 1: While the *Java Music Club* program continued to bring positive outcomes, several challenges were identified across participating communities. These challenges related primarily to engagement consistency, group dynamics, logistical issues, and emotional responses during sessions. Several communities reported fluctuating attendance and varying levels of engagement. While many residents enjoyed the sessions, others showed limited interest or inconsistent participation. In some communities, attendance was lower than expected or included mostly returning participants, while others experienced overcrowding and late arrivals, which caused disruptions and led staff to restrict entry once sessions began. Facilitators observed that some residents struggled to engage due to cognitive challenges or confusion with group routines. A few facilitators also noted that some of the music selections were unfamiliar or not well received by participants. Some communities encountered space or location challenges, e.g., groups held outdoors, while pleasant

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for some, introduced distractions, background noise, and difficulty hearing participants. Others faced limited indoor space, restricting the number of attendees and occasionally resulting in residents being turned away. Additionally, one facility experienced an interruption in programming when their Activity Director left; the program resumed after the new staff member received the *Java Music* training. Challenges Have Been Addressed: Because the program encourages reflection and emotional expression, it is natural for strong feelings to surface. Some residents became tearful or emotional during sessions, often triggered by music or memories associated with certain songs. Facilitators addressed this by reassuring participants that such feelings are valid, allowing them to express their emotions to the group, and gently guiding the conversation forward. Furthermore, *Java* program staff have been in direct contact with those communities that expressed concerns, discussing solutions to their challenges and providing resources when needed. They have also been invited to the monthly *Java* Facilitators Support Meetings to address challenges, share ideas, and provide case scenarios of what to do in particular situations. The Peplinski Group is following closely when there are new staff and promptly connecting them with *Java* staff to attend a training session and get on track as soon as possible. Evaluation Results: The following is a summary of *Java's* Year 1 results by facility for antianxiety/hypnotic and behavioral measures, reflecting quarterly trends. Site #1: Antianxiety or hypnotic drug administration (Q2-Q4): 34.9%, 38.30%, 30.40%. Behaviors (Q2-Q4): 26.90%, 19.30%, 12.10%. Site # 2: Antianxiety or hypnotic drug administration (Q2-Q4): 16.70%, 12.20%, 16.90%. Behaviors (Q2-Q4): 27.30%, 37%, 46%. Site #3: Antianxiety or hypnotic drug administration (Q2-Q4): 25.80%, 21.90%, 24.30%. Behaviors (Q2-Q4): 61.50%, 46.20%, 35.10%. Site# 4: Antianxiety or Hypnotic drug administration (Q2-Q4): 24.30%, 22.90%, 20%. Behaviors (Q2-Q4): 29.90%, 36.10%, 41.10%. Site # 5: Antianxiety or hypnotic drug administration (Q2-Q4): 24.30%, 11.60%, 12.30%. Behaviors (Q2-Q4): 19.80%, 14.90%, 14.90%. Site # 6: Antianxiety or hypnotic drug administration (Q2-Q4): 23.40%, 28.90%, 22.20%. Behaviors (Q2-Q4): 4.20%, 4%, 5.90%. Site # 7: Antianxiety or hypnotic drug administration (Q2-Q4): 26.30%, 31.60%, 28.80%. Behaviors (Q2-Q4): 18.30%, 18.30%, 11%. Site # 8: Antianxiety or hypnotic drug administration (Q2-Q4): 22%, 20.50%, 19.60%. Behaviors (Q2-Q4): 30.50%, 41%, 41%. Site # 9: Antianxiety or hypnotic drug administration (Q2-Q4): 25.50%, 16.90%, 19.60%. Behaviors (Q2-Q4): 16.70%, 14.10%, 18.60%. Site # 10: Antianxiety or hypnotic drug administration (Q2-Q4): 6.60%, 10.70%, 4.80%. Behaviors (Q2-Q4): 24.70%, 34.20%, 27.20%. In addition to these results, the following includes results for the project's objectives. The Observation Form is an instrument that measures program's adherence, which means assessing if the *Java Music Club* program is being implemented as intended. The following is a summary of the observers' remarks when they conducted this form during a *Java Music* session in the different Peplinski communities. Across all ten Peplinski communities, most components of the *Java Music* program were successfully implemented. Participants responded positively, showing varying levels of engagement, some were highly involved, while others preferred to observe. Facilitators were praised for their inclusive and encouraging approach, ensuring that all residents felt welcomed and

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supported regardless of their cognitive abilities. Music selection played a key role in participation; familiar songs prompted more singing and enthusiasm, while less-known pieces sometimes led to lower engagement. In one community, staff found that assigning consistent roles to certain residents helped maintain structure and comfort. Overall, the Observation Form reflected that residents expressed enjoyment in singing, selecting songs, reading quotes, and taking part in group interactions, with many describing the *Java Music Club* as a warm, interactive, and uplifting program. The following is a summary of the Java Scale conducted in the Peplinski communities, measuring the level of social well-being among residents participating in the *Java Music* sessions: Social Isolation - Observed Average Decrease: 37.15 %. Loneliness - Observed Average Decrease: 34.17 %. Happiness - Observed Average Increase: 25.98 %. The majority of the communities have reported a positive impact of this program in residents' sense of well-being. The Java Scale reflected a significant decrease of social isolation and loneliness, and a remarkable impact on residents' overall happiness, making the *Java Music* program a safe space for people to share and support one another.
Overall Summary: The *Java Music Club* program has grown into a well-loved and consistent feature across all the ten participating Peplinski communities. Facilitators showed creativity and resilience in addressing these issues, demonstrating flexibility, empathy, and ongoing commitment to providing meaningful peer support experiences for their residents. As the project enters the second year of the grant, the program is firmly rooted within our communities and continues to foster meaningful social and emotional connections among residents. Through ongoing guidance and training from the *Java* team—and with thoughtful adjustments to meet the unique needs of each community, the program has become an integral part of our regular recreation schedule. The Peplinski Group is now looking forward to implementing the second *Java* program, to help address loneliness among residents living with more advanced dementia.

Project Title: Quality-of-Care Staff Training

Unique Identifier: MI-0924-MMH-1205

Project Duration: 10/01/2024 to 09/30/2027

Total Amount of CMP Funds Approved for this Project: $14,952.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $0.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

Michigan

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a) The purpose of this project is to partner with Pathway Health Service to implement the *INTERACT Quality Improvement Program* to permanently sustain reductions in all-cause readmission rates, increase resident happiness, reduce resident depression, reduce resident infection risk, increase facility occupancy, and earn preferred post-acute healthcare provider status from medical centers related to avoidable resident-to-hospital transfers.

b) The project will include a two-hour Leadership Training, a Certified Champion Training, and Frontline Staff Training. The project's quantifiable objectives include: reduce avoidable hospital transfers by 20% from baseline over the initial 90 days post program implementation, quarterly maintenance of that objective for duration of grant performance period and sustain the objective by integrating INTERACT™ Program into Michigan Masonic Home's Quality Assurance and Performance Improvement (QAPI) evaluative system; increase resident happiness and quality of life and reduce rate of depression from baseline pre-program implementation, and monitor and evaluate quarterly thereafter; reduce overall resident infection rates by 10% as a result of fewer hospital transfers; and develop two or more strategic partnerships by end of grant performance period with local medical centers based on value-based performance to become a preferred post-acute healthcare provider as result of reduced reliance on hospital transfers.

c) The implementation of the *INTERACT Program* aims to reduce unnecessary hospitalizations of nursing home residents. Reducing unnecessary hospitalizations reduces the physical and psychological stress of nursing home residents, as well as their exposure to pathogens within hospital settings.

d) The nursing home will benefit from utilizing an evidence-based program to guide nursing staff in assessing and communicating changes in condition during nursing home-to-hospital transfers.

e) Nursing home clinical staff and local medical centers.

Funded Entity(ies):

Michigan Masonic Home

Results of the Project:

Interim project results: Michigan Masonic Home has completed all goals and objectives on schedule. The program is projected to be executed over a period of three years. The first year consisted of gathering and sharing with key staff baseline data regarding resident to hospital transfers, happiness and depression scores, infection rates, average daily occupancy data, and key staff attending INTERACT® Leadership

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Training. Data was compiled October through December 2024 by Dr. Monica Goodrich and shared with key clinical staff at the January 20, 2025, Quality Assurance and Performance Improvement (QAPI) program meeting. Pathway Health provided Michigan Masonic Home with Leadership Training on June 3, 2025. The Leadership The virtual training course was conducted with sixteen of the skilled nursing facilities (SNFs) executive and leadership team in attendance. The CMS Care Compare Five-Star Ratings of Nursing Homes; January 2026 edition was used as baseline data for comparison. The claims-based long-stay measures identified the number of hospitalizations per 1,000 long-stay resident days had an observed score of 2.34. The facility earned 60 points in this area out of 150. The state average is 1.74. The long-stay measures also identified that the number of emergency department (ED) visits per 1000 long-stay resident days was 1.47 with a state average of 1.54, earning the facility 75 points. For claims-based short-stay measures, re-hospitalization was 18.2% with a state average of 24.2%, giving the facility 135 points out of 150. ED visits for short stay were 15.9% with a state average of 11.5%.

Project Title: Michigan County Medical Care Facilities Council (MCMCFC) Quality of Life Improvement Initiative

Unique Identifier: MI-0924-MCMCFC-1206

Project Duration: 10/01/2024 to 09/30/2027

Total Amount of CMP Funds Approved for this Project: $388,132.80

Total Amount of CMP Funds Expended During CY 2025 for this Project: $164,905.34

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of this project is to improve the quality of life for residents through the *End-of-Life Doula and Person-Directed Care* programs. It will also offer Gerontology Credentialing to social workers.

b) The project is designed as a three-year program with 11 to 12 skilled nursing facilities participating each year. Participating facilities will choose a program (*End-of-Life Doula* and *Person-Directed Care*) based on the improvements they wish to focus on during the project's implementation. Over the entire three-year program, all 35 county-owned nursing facilities will have access to both programs. The targeted goal of the project is for each nursing facility to exceed current person-centered care regulations. The project objectives include: gain 12 newly credentialed gerontological Bachelor of Social Work (BSW) social workers Social Worker in Gerontology (SW-G) employed at

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county-owned nursing homes in Year 1 of the project, with 80% or more of social workers who apply will obtain SW-G credentials; creation and implementation of an *End-of-Life Doula Program* over 12 months, with 70% of homes who participated in the creation and implementation of the End-of-Life Doula Program will have a fully implemented program within 12 months; and facilities will advance in person-directed care practices, as measured by a percentage change in Artifacts of Culture Change not implemented to partially implemented, and from partially implemented to fully implemented, using pre and post program data. The SW-G (Geriatric Social Worker Certification) from National Association of Social Workers is an advanced competency that research suggests can translate into measurable improvement in resident experience. CMS does not require SW-G. In the *End-of-life Doula Program* facilities who select this option will receive education and successfully design and implement a doula program. Residents, employees, and families will complete pre-and post-surveys. CMS does not require the *End-of-life Doula Program*. Person-directed care participants will use the Pioneer Network's "*The Artifacts of Culture Change Tool*" to measure progress. This tool is based on observable reality, i.e., what is happening, what the residents experience and what staff do. Facilities will conduct this assessment pre- and post- intervention. This is not a required tool and exceeds person-centered care measurement standards.

c) The project will benefit nursing home residents by addressing the need for education and improvement related to the full implementation of person-directed care, and by enhancing end-of-life care and practices through a doula program.

d) The nursing home will benefit by enhancing the quality of resident life and care and addressing the needs of residents through staff credentialed in gerontology.

e) Nursing home staff and social workers.

Funded Entity(ies):

Michigan County Medical Care Facilities Council

Results of the Project:

Interim project results: *End-of-life Doula Program:* Three skilled nursing facilities participated in the *End-of-life Doula Program* during Year 1 of the project. The Centers for Medicare and Medicaid Services (CMS) do not require *End-of-Life Doula* programs. A kick-off meeting was held on November 11, 2024, 100% of homes have baseline metrics. Each of the three doula home teams completed both pre- and post- surveys which were required for residents, staff, and families. Not all homes obtained family responses or were able to obtain a large number of surveys returned. All made improvements in several areas and were also able

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to identify areas for growth for the upcoming year. Virtual action planning meetings were held. Participating homes submitted action plans and progress reports to this consultant monthly throughout the last quarter and grant year. The consultant reviewed and made recommendations, encouraged the team, and made herself available whenever needed. At the end of the grant year, all three homes have established an *End-of-Life Doula Care* program which reports and works with the Quality Assessment and Assurance team and the Quality Assurance and Performance Improvement team and plans to continue plans, programming, process improvement, and growth in 2026. A training by Nick Keilhorn, MD supporting end-of-life care was held and consisted of live participation and included doula team members from all three homes. Dr. Kielhorn presented techniques, medications, and non-pharmacological approaches to palliative care. Further, he shared new evidence-based innovations and support for end-of-life palliative care. The attendees appreciated him and his recorded webinars are being taught to nursing care teams in the three doula grant homes. Additionally, five virtual training courses for two hours each were presented by Consultant, Sandra Place. This training was about active dying, and the holistic approach to this stage of end-of-life supports and care, how to recognize the beginning of active dying, the cultural, spiritual, and emotional needs of this time and entitled "Ars Moriandi, *The Art of Dying*." Onsite and virtual visits for one hour up to 13 hours at the facility months were also conducted. Participating homes submitted team meeting and performance improvement plan (PIP) notes to consultants for each virtual or on-site consultation which were included in their action plan notes monthly. Together they updated the action plan and consultants made recommendations. Virtual action planning meetings were held monthly with individual homes. Participating homes submitted action plans and progress reports to the consultant each month. The consultant reviewed and made recommendations. For the final wrap-up meeting these same three homes attended with their doula teams present on September 15, 2025. They each reported out on their timeline of work, their successes and areas needing growth, their focus, and plans of action for next year, and the data review and comparison from the residents, staff, and family surveys regarding end-of-life care in their homes. All teams submitted their action plans and PIP team updates, and each reflected how that group was going to move forward over the coming months. This measure ended the grant year at 100% of the homes establishing a doula program and initial processes. They have integrated the doula program with their QAPI team and processes and will continue to grow their processes and programing for end of life and doula care giving. Person-Directed Care Program: Three skilled nursing facilities participated in the Person-Directed Care Program during Year 1 of the project. One hundred percent (100%) of the homes moved at least two areas from not practice to partially implemented or from partially implemented to fully implemented. A kick-off meeting took place on 11/12/2024 with seven homes in attendance. The three participating homes completed the initial Artifacts of Culture Change Assessments and identified the two areas in which they plan to improve. This activity was completed, and 100% attended. A Person-Directed Care Facilities Group was also established. Participating homes held their first meetings and submitted

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MI Active CMP Funded Projects in CY 2025: 8

team rosters and initial action plans. All homes completed the Artifacts Survey and returned it. The Maples chose to work toward improving #117, discussing culture change during recruitment interview and #118, new hire orientation emphasizes each team member's role in supporting culture change and resident-directed living. The Maples moved six areas, not just two, up one level. They made progress in the two areas chosen but not enough to move them up to the next level. Overall, the changes are positive, and they have an action plan in place to move to the next level. Evaluation Results: The Maples exceeded the goals of the grant. Percent in Nov. 2024, Percent in Aug. 2025, Percent Change: Fully Implemented: 31, 33.5, +2.5. Partially Implemented: 49, 49, 0.0. Not A Practice: 20, 17, -3.0*. * This is a positive sign indicating they have partially implemented 3% more of the practices. Marquette chose to work to improving #22 – medications are delivered according to each resident's daily rhythms and #63 – closets have moveable rods set to different heights per resident preference.
Evaluation Results: Percent in Nov. 2024, Percent in Sep. 2025, Percent Change: Fully Implemented: 32, 36, 4. Partially Implemented: 31, 44, 13. Not A Practice: 35, 21, -14*. * This reflects movement to more partially implemented practices. Martha T. Berry chose to incorporate the person-directed work into two existing Performance Improvement Projects – falls and culture change. They were extraordinarily successful this year. They far exceeded the goal of moving to the next level in two areas. Evaluation Results: This home exceeded expectations of the grant showing improvement in more than two areas on the Artifacts of Culture as seen below. Percent in Apr. 2024, Percent in Aug. 2025, Percent Change: Fully Implemented: 24.63, 61.19, 36.56. Partially Implemented: 41.04, 20.15, -20.89*. Not A Practice: 32.84, 18.66, -14.18**. * This reflects movement to being fully implemented practices. ** This reflects moving from not a practice to partially or fully implemented practices. In addition, MCMCFC delivered five virtual training courses for two hours and were held with all participating homes attending. Each presented an action plan incorporating what they learned. At the request of the participating homes and the entire membership, four *Person-Directed Leadership for Middle Managers* full-day interactive workshops were also provided, 130 people attended these sessions representing fourteen member facilities. At the request of the participating homes and the entire membership, two *Person-Directed Functional Quality Assurance Performance Improvement (QAPI)* full-day interactive workshops were also provided. Fifty-three people attended these sessions representing fifteen-member facilities. Formal evaluations of the webinars were not conducted. The evaluations for the Leadership Workshops were excellent with all participants being able to state how they would apply the information to their workplace. There was no evaluation for the first QAPI workshop. For the second QAPI workshop, the evaluations reflected the objectives were met and participants stated practices they plan to use at their job. The best reflection of the effectiveness of the workshops is that the membership requested these be repeated in Year 2 of the grant. Onsite or virtual visits for one hour up to 18 hours at the facility were also conducted, and quarterly meetings were conducted every other month to keep the focus on the project. Participating homes submitted team meeting and PIP notes to consultants

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Michigan

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MI CMP Funds Expended for Emergency Uses in CY 2025: $0.00
MI Active CMP Funded Projects in CY 2025: 8

for each virtual or on-site consultation. Together they updated the action and consultants made recommendations. At the last meeting on August 27, 2025, each participating home completed a self-assessment of their progress during the year and presented this to the cohort. 100% of the homes participated in the progress meeting and submitted action reports. Social Worker in Gerontology Credentialing (BSW, SW-G): SW-G (Geriatric Social Worker Certification) from National Association of Social Workers is an advanced competency that research suggests can translate into measurable improvement in the resident experience. CMS does not require SW-G. In Year 1 of the project, Lebenbom and Rothman Consulting (LRC) held one kickoff webinar to introduce the SW-G certification to Michigan County Medical Care Facilities Council (MCMCFC) members. On March 17, 2025, LRC conducted a ZOOM meeting grant update with the membership and again discussed this opportunity. Three social workers completed the SW-G certification, with a 100% successfully added. Program Outcomes: Three facilities selected the *Doula Program*. Three facilities selected Person-Directed Care. Three SW-G certifications were completed, resulting in three social workers being credentialed. The original anticipated number of participating facilities was 11-12 per year, with facilities selecting either the *End-of-Life Doula Program or Person-Directed Care*, and some also completing SW-G Certification. Across the three-year project, all facilities have access to both programs and make selections based on areas of focus during implementation. As a result, the exact number of facilities cannot be determined in advance, and final numbers are not available until the end of each year. Year 2 is in progress, and the above measures continue to apply.

Project Title: Nursing Facility Wound Care Program

Unique Identifier: MI-1024-HCAM-1222

Project Duration: 10/01/2024 to 09/30/2025

Total Amount of CMP Funds Approved for this Project: $678,190.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $568,414.93

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of this project is to improve the quality of care for residents in long-term care facilities by establishing a network of staff across Michigan who have advanced skills in skin integrity and wound management.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Michigan

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MI Active CMP Funded Projects in CY 2025: 8

b) The project will provide quality care for residents at risk of skin breakdowns by teaching staff how to effectively identify and communicate changes in skin integrity, address skin breakdowns, and develop a facility culture that maintains skin integrity and prevent pressure injuries. The Health Care Association of Michigan (HCAM) will collaborate with Wound, Ostomy and Continence Nurse Society (WOCNS). The collaboration between HCAM and WOCNS will include three training programs: WOCN Wound Treatment Associate (WTA) program for licensed practical nurses (LPN) and registered nurses (RN); WOCN Certified Nursing Assistant (CNA) Education program for CNAs; and Administrative Team Training: Building a Wound Program, for leaders. At the completion of the WTA program, nurses will be eligible to take the national certification exam to be a Certified Wound Treatment Associate (WTA-C). Facilities that engage staff in these training programs will be well positioned to improve the quality of care for residents in their care. Additionally, a coalition of subject matter experts and stakeholders will be convened to assist and oversee development and implementation of the project, and to identify best practices that arise from project implementation to inform sustainability activities. The project will be implemented across 156 nursing facilities over a one-year period.

c) The project will benefit nursing home residents by improving quality of life by decreasing pain, social isolation, and depression.

d) The project will benefit nursing homes by developing staff knowledge and skills that inform and advance a culture of skin integrity and pressure ulcer prevention, resulting in improved quality of care for residents.

e) Nursing home staff including registered nurses, licensed practical nurses, certified nursing assistants, and nursing facility leadership.

Funded Entity(ies):

Health Care Association of Michigan

Results of the Project:

Final project results: The purpose of this project was to improve the quality of care for residents residing in long-term care facilities by establishing a network of staff across Michigan with advanced skills in skin integrity and wound management. The project aimed to provide quality care for persons at risk of skin breakdowns by teaching staff how to effectively identify and communicate changes in skin integrity, how to address skin breakdowns, and develop a culture of maintaining skin integrity and pressure injury prevention and thereby improving resident quality of life. The target audience for this project was direct care staff and

Michigan

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nursing facility leadership. Certified nursing assistants (CNAs), registered nurses (RNs), and licensed practical nurses (LPNs) are the first line care staff for residents in the nursing home setting and are in the best position to recognize issues with skin integrity. Nursing facility leadership are in the position to develop a culture of pressure injury prevention and implement processes of continuous performance improvement.
Skin Integrity Training (CNA): CNAs received education and training designed to increase knowledge and skills in the basics of identification and prevention of pressure injuries in the nursing facility setting. CNAs learned to accurately communicate to nursing staff team members about the occurrence or potential occurrence of pressure injuries for residents at risk of developing pressure injuries.
Wound Treatment Associate Program (RNs/LPNs): Licensed nurses, including LPNs and RNs received education and training designed to expand knowledge and skills related to pressure injury prevention and treatment of existing pressure related injuries. This education consisted of didactic learning and hand on skill practice and competency evaluation.
Administrative Team Training: *Building a Wound Program*: Nursing facility leadership received education on how to adopt and develop a sustained culture of pressure injury prevention by utilization of learned approaches, allocating resources and workforce, and utilization of data and information to inform decision-making and implement these processes in quality improvement.
Of the 156 facilities that provided Letter of Interest (LOI) to participate, 53 facilities enrolled staff to participate in the three training programs. During the implementation of the project, nursing facilities were individually contacted to designate a contact person to receive communications on available program training sessions. Enrollment and interest from the 156 nursing facilities to participate in the training program were low throughout the grant period. Communication strategies were identified through the coalition, which included obtaining contact information for nurse educators, wound nurses, and regional directors of operations. Additional efforts were made to disperse marketing materials, such as flyers with registration information for each facility contact person. At the end of the grant period, enrollment remained lower than anticipated, resulting in less data collection to determine an accurate impact of the project.
Outcomes: Skin Integrity Training: The Skin Integrity Training for CNAs had 15 training cohorts during the grant period. During this period, 53 CNAs participated in the training to develop competency in general skin care, understanding of pressure injury (PI) risk factors, and applying preventative measures. This activity was measured by pre- and post-test knowledge assessments and demonstration of skills competency in PI prevention measures. During this period, 100% the 53 CNA's that participated in the training passed the post course knowledge and demonstration assessment confirming knowledge gained from the training.
Wound Treatment Associate Outcomes: The WTA program is a 12-week online training with a virtual skills competency demonstration aimed at increasing the knowledge level and competency of nurses in best practices of wound care assessment, prevention and treatment. During the grant period, February 1st, 2025, to January 31, 2026, there are 115 RN and LPN participants that have completed the WOCN Wound

Michigan

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Treatment Associate™ program (from 48 enrolled facilities) of the 229 that started the course, with an overall completion rate of 50.2%. Participants were required to pass a skills competency demonstration along with a post-test examination. The 115 RN and LPN participants passed the final examination and skills competency demonstration. The content, examination, and skills competency of the WTA program were not identified to be a barrier to participants completing the program, but rather the self-paced training portion was not completed timely. Participants were allotted additional time and support if needed to complete the program. This measurement uses the CMS-2567 Survey Deficiency report to track changes in the F-Tag 686 citation frequency within the state. A comparison of facility citations for those participating in the project versus those not participating are measured to determine if improvements are occurring as a result of training methods utilized in the project. In fiscal year (FY) 2025, of the 118 facilities that were cited, 20 of those facilities participated in the Wound Management training program versus 98 facilities that did not participate. With a small sample size, the data has been further analyzed to discern citation rates per 100 beds to provide a broader context of the program impact. For FY 2025, facilities that participated in the training program received an average of 1.15 citations per 100 beds, versus 1.28 citations per 100 beds for facilities that did not participate in the training program, a 10.16% reduction in citation density.
An analysis of F-Tag 686 citation (Treatment/Services to Prevent/Heal Pressure Ulcers) frequency was measured by fiscal year. Overall, Michigan has seen a decrease in the number of F686 citations for fiscal year 2025. From FY 2024 to FY 2025, there has been a decrease of F686 citations by 32.7%. This data is preliminary as incremental adjustments are made to the Centers for Medicare and Medicaid Services deficiency database after the conclusion of each fiscal year. In FY 2024, the citation frequency in Michigan for F686 was the fifth most frequently cited deficiency with 35.6% of nursing home providers being cited, compared to FY 2025 where F686 was the seventh most frequently cited deficiency with 27.8% of providers being cited. FY 2025 has seen a decrease 7.8% of providers being cited with F686.
Administrative Team Training Outcomes: The Administrative Team Training: *Building a Wound Program* had 17 training cohorts during the grant period. Thirty-eighth (380 administrative staff (from 21 enrolled facilities) participated in the training to educate administrative staff on leadership styles, facility culture change in wound management, and components of sustaining a wound prevention program. This program outcome is measured by monitoring PI prevalence in the enrolled facilities for each quarter of the grant program. While the program participation for the Administrative Team Training was lower than anticipated, the pressure injury prevalence data from the participating facilities suggests a measurable positive correlation in contrast with the non-participating facilities. Nursing homes that participated in the training (n=21) maintained an average of 5.4% long-stay pressure ulcer rate, compared to the state average rate of 5.9% for quarter one of 2025 for non-participating facilities (n=404). In quarter two of 2025, participating facility average long-stay pressure ulcer rates and non-participating facility rates measured at 5.7%. In quarter three of 2025, participating facility long-stay pressure ulcer rates measured at 5.1% versus 5.6% of

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Michigan

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MI Active CMP Funded Projects in CY 2025: 8

non-participating facilities. The programs outcome analysis for quarter four of 2025 remains in the collection phase to ensure the final year end data is accurate and reflective of program activities.
Conclusion: In conclusion, the *Wound Management Program* initiative aimed to improve the quality of care in Michigan nursing homes by educating front-line staff and administrative leaders on clinical strategies to mitigate wound development, accelerate healing, and develop a wound management culture. The outcomes of the grant program, considering the low enrollment and participation rates, suggest positive measurable indices when compared to facilities that did not participate in the program. The intent of the project was to train an array of direct care and nursing leadership staff to increase the clinical competence of wound care management that can be measured year after year. Data collection of the indices in this report will continue after the conclusion of the grant to measure continued impact of the program's intended goal.

Project Title: Michigan County Medical Care Facilities Council (MCMCFC) Quality of Care Improvement Initiative

Unique Identifier: MI-1024-MCMCFC-1223

Project Duration: 10/01/2025 to 09/30/2028

Total Amount of CMP Funds Approved for this Project: $525,000.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $30,628.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of this project is to improve nursing home residents' quality of care by enhancing the skills and competencies of nurses across all 35 county-owned nursing homes through education and competency testing for nurses who meet the criteria to apply for and take the Gerontological Nursing Board Certification Examination. Training will target up to 70 nurses each year (two per facility), for a total of 210 RNs and LPNs over the course of all three years.

b) The project aims to better prepare nurses to care for complex geriatric residents, improve quality of care, and prepare facility nurses to accept more complex admissions. Through improved knowledge and application, the project seeks to reduce unnecessary hospital readmissions and prepare qualified nurses to successfully obtain gerontological nurse certification. Nurses will participate in the Nursing Enrichment Blueprint Program to prepare for and to successfully pass the Gerontological

Michigan

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MI Active CMP Funded Projects in CY 2025: 8

Nursing Board Certification Examination, with the expectation that 75% of registered nurse attendees will pass the exam on their first attempt. Nurses will increase understanding of gerontological nursing principles and practices through participation in monthly Stress Blueprint virtual intensive sessions and the American Nurses Association (ANA) online modules and multimedia activities. Pre- and post-tests will be administered to evaluate knowledge gain in key areas that include assessment and diagnosis, planning, implementation, and evaluation, and professional foundation, with the expectation that 70% or more of attendees will earn at least 80% on the post-assessment, and 70% registered nurses (RNs) will complete all self-paced online ANA Gerontological Nurse activities and submit their certificate of completion. In addition, nurses will enhance clinical competencies in advanced gerontological nursing skills through participation in the annual in-person didactic skills competency lab. Access to a self-paced virtual vascular education program for 30 days with pre- and post-assessments. Two-day in-person instructional presentation and hands-on clinical skills lab and competency training led by subject matter experts. After the annual didactic skills competency lab, nurses will demonstrate enhanced proficiency in advanced gerontological nursing vascular access skills, enabling them to perform with confidence and competence.

c) The project will benefit nursing home residents by increasing access to and choice in nursing home care for hospital patients with complex vascular needs. Residents can expect higher levels of care and improved outcomes, including reductions in unnecessary transfers to an emergency room, the potential for reductions in unnecessary rehospitalizations, and overall improved care and outcomes delivered by nurses who understand the needs of a geriatric resident.

d) The project will benefit the nursing home by providing staff with increased knowledge and skills to deliver high-quality care.

e) Nursing home staff, including registered nurses and licensed practical nurses, and hospital patients transitioning from acute care to a nursing home setting.

Funded Entity(ies):

Michigan County Medical Care Facilities Council

Results of the Project:

The project has been implemented for less than six months. Interim results are not yet available.

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Michigan

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MI CMP Funds Expended for Emergency Uses in CY 2025: $0.00

MI Active CMP Funded Projects in CY 2025: 8

Project Title: Enriching the Lives of Residents

Unique Identifier: MI-0725-MRH-1375

Project Duration: 10/01/2025 to 09/30/2028

Total Amount of CMP Funds Approved for this Project: $14,322.30

Total Amount of CMP Funds Expended During CY 2025 for this Project: $745.68

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of this project is to provide a wide range of activities that will target different approaches to improving social interaction and isolation.

b) The project aims to improve the quality of life of residents through activities including musical acts, arts and crafts, and community classes. These activities are designed to include all residents and get resident feedback. Over the course of the three-year project, residents will have the opportunity to provide this person-centered feedback and increase the impact of the project on themselves. Additionally, Marlette Regional Hospital will be completing cognitive assessments and Patient Health Questionnaire (PHQ)-9 depression screenings, as well as tracking resident activity participation to identify behavioral health improvements. The project's goals are to improve the behavioral health of Marlette Regional Hospital's skilled nursing facility residents and to increase social engagement. The project's quantifiable objectives include over the course of three years, PHQ-9 scores will improve by 2%; over 12 months, individual residents will see an improvement of one in their cognitive assessments; and increase the average number of residents participating by two over the 3-year project.

c) The project will benefit the nursing home residents by fostering social interaction, increasing resident engagement, minimizing isolation, and improving cognitive functions, including memories, behaviors, and attitudes.

d) The project will benefit the nursing home by addressing behavioral health needs and improving overall quality of life for residents.

e) Resident families

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Michigan

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MI CMP Funds Expended for Emergency Uses in CY 2025: $0.00
MI Active CMP Funded Projects in CY 2025: 8

Funded Entity(ies):

Marlette Regional Hospital

Results of the Project:

The project has been implemented for less than six months. Interim results are not yet available.

Project Title: Cultivating Joy: Inclusive Therapeutic Gardens

Unique Identifier: MI-0725-CRNC-1376

Project Duration: 10/01/2025 to 09/30/2026

Total Amount of CMP Funds Approved for this Project: $4,996.40

Total Amount of CMP Funds Expended During CY 2025 for this Project: $0.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of this project is to address critical gaps in resident quality of life, specifically high rates of social isolation, limited engagement in meaningful activities, and behavioral challenges among dementia residents.

b) The project aims to improve resident well-being by establishing a resident-driven therapeutic gardening program. The program will utilize wheelchair-accessible raised flower beds in existing outdoor spaces. Weekly gardening sessions shaped by resident interviews, will promote social interaction, reduce loneliness, and embody person-directed values. Culturally relevant plants and sensory plants will further support engagement for residents with dementia. The project's goals include: reduce loneliness with group sessions to foster social interaction, targeting a 15% increase in social engagement; enhance engagement with resident-chosen plants and accessible beds to promote a 25% increase in activity participation; support dementia care by utilizing sensory-rich gardening to reduce agitation by 15%, offering nonpharmacological relief; and promote cultural inclusion with culturally inclusive plants, ensuring that all residents regardless of background feel valued.

c) The project will benefit the nursing home residents by reducing loneliness, enhancing engagement, supporting dementia care, and ensuring inclusion.

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Michigan

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MI Active CMP Funded Projects in CY 2025: 8

d) The project will benefit the nursing home by adding a therapeutic gardening program that provides staff with a non-pharmacological tool to improve resident quality of life.

e) Not applicable

Funded Entity(ies):

Clearstream Rehabilitation and Nursing Center

Results of the Project:

The project has been implemented for less than six months. Interim results are not yet available.

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Minnesota

MN CMP Funds Expended for Administrative Uses in CY 2025: $99,643.56

MN CMP Funds Expended for Emergency Uses in CY 2025: $0.00

MN Active CMP Funded Projects in CY 2025: 22

Project Title: Rendever/RendeverFit

Unique Identifier: MN-0822-MHM-1012

Project Duration: 01/01/2023 to 06/30/2025

Total Amount of CMP Funds Approved for this Project: $179,500.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $0.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of the RendeverFit project is to reduce social isolation and improve the physical well-being of nursing home residents. The project will provide regular Rendever programming in each participating facility.

b) The project aims to provide training and equipment for ten skilled nursing facilities, enabling these facilities to implement the Rendever/RendeverFit virtual reality (VR) technology program in each respective facility through approximately 12 -15 monthly sessions for a minimum of 12 -15 residents.

c) The project enables residents to increase their sense of physical and mental well-being.

d) The project mitigates the effects of social isolation and enhances physical wellness among participants.

e) Not applicable

Funded Entity(ies):

Monarch Healthcare Management

Results of the Project:

FINAL RESULTS: Original measurable goals/objectives/deliverables of the project. Goal: Train 10 participating facilities. Outcome: Trained 10 skilled nursing facilities. Goal: Provide 10 facilities with the equipment needed to conduct the Rendever program. Result: All 10 facilities received the equipment needed to conduct the program (reality headsets and chargers, cycles, hand controllers, Rendever tablet and charger, and training manual). Goal: Offer 12 to 15 monthly sessions in participating facilities. Result: One third (1/3) of the participating facilities were able to offer the minimum stated goal # of monthly sessions. Goal: Twelve (12) to 15 residents would participate per monthly session offered. Result: Only two

Minnesota

MN CMP Funds Expended for Administrative Uses in CY 2025: $99,643.56
MN CMP Funds Expended for Emergency Uses in CY 2025: $0.00
MN Active CMP Funded Projects in CY 2025: 22

facilities met this resident participation goal. Key Achievements and measurable project benefits: For those who participated in this program, the outcomes were desirable and successful (in spite of the inability of the project to achieve the projected outcome of numbers of sessions and participants). Participants enjoyed the program and rated the program with a 41.31% overall increase in well-being on a Likert scale measure, demonstrating a positive impact to participating residents. Challenges encountered during the project: Several key challenging factors made achieving the desired outcomes difficult (if not impossible in some cases). These factors were out of control of the facility and included: 1) staff changes or shortages, 2) multiple facilities experienced COVID-19 outbreaks and two facilities had Norovirus outbreaks during multiple periods of this project, and 3) one occasion of equipment malfunction. Staff changes and shortages are often an inevitable part of facility operations. It goes without saying that staff stability is a key factor in the success of any project and especially in a program where uninitiated participants require guidance at first. COVID-19 and other facility outbreaks, aside from maintaining vigilant infection control practices, do happen and were very prevalent during the first year of this project (which was still occurring during the COVID-19 pandemic). The equipment malfunction was dealt with, with repairs. The facilities have ownership of the equipment and may continue to use it in their future activities programming.

Project Title: Improving Dementia Capability with CARES Dementia 5-Step Method

Unique Identifier: MN-1224-SFM-1240

Project Duration: 04/10/2025 to 04/09/2028

Total Amount of CMP Funds Approved for this Project: $14,962.35

Total Amount of CMP Funds Expended During CY 2025 for this Project: $0.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of this project is to improve resident care, especially for those living with Alzheimer's disease and related dementias, by incorporating evidence-based dementia care training into staff interactions with residents. The project will make this nationally recognized dementia training program, *CARES®,* available to each participating facility.

b) The project aims to implement the *CARES®* online training and certification programs to train and certify 10 direct-care staff in each of three programs within 12 months: *CARES® Dementia 5-Step Method, CARES® Dementia Safety Topics*, and *CARES® Dementia-Related Behavior.*

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Minnesota

MN CMP Funds Expended for Administrative Uses in CY 2025: $99,643.56
MN CMP Funds Expended for Emergency Uses in CY 2025: $0.00
MN Active CMP Funded Projects in CY 2025: 22

c) This project directly benefits residents by improving their quality of care and life by training staff to engage with residents based on person-centered values and practices.

d) The project will benefit the nursing home by the ability to improve person-centered care for residents and a reduction in behavioral issues and other poor resident outcomes.

e) Nursing home staff

Funded Entity(ies):

Shakopee Friendship Manor

Results of the Project:

INTERIM RESULTS: Credentials and instructions to access the training were created and shared with the facility. HealthCare interactive (HCI) continues to work with the facility to provide technical program assistance. *CARES Dementia 5-Step* Method: three staff have begun training, two staff completed training, and two staff are now certified. *CARES Dementia Safety Topics*: one staff member has begun training, and one is now certified. *CARES Dementia-Related Behavior*: one staff member has begun training, and two staff are now certified.

Project Title: Improving Dementia Capability with CARES Dementia 5-Step Method

Unique Identifier: MN-0125-PCC-1271

Project Duration: 09/24/2025 to 09/23/2028

Total Amount of CMP Funds Approved for this Project: $14,962.35

Total Amount of CMP Funds Expended During CY 2025 for this Project: $0.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of this project is to improve resident cares, especially for those living with Alzheimer's Disease and Related Dementias, by incorporating evidence-based dementia care training into staff interactions with residents. The project will make this nationally recognized Dementia training program, *CARES®,* available to each participating facility.

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Minnesota

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MN CMP Funds Expended for Emergency Uses in CY 2025: $0.00
MN Active CMP Funded Projects in CY 2025: 22

b) The project aims to implement the *CARES® Dementia Online Training and Certification* programs to train and certify 10 direct-care staff in each of three programs: *CARES® Dementia 5-Step Method, CARES® Dementia Safety Topics*, and *CARES® Dementia-Related Behavior* – within 12 months.

c) This project directly benefits residents by improving their quality of care and life by training staff to engage with residents based on person-centered values and practices.

d)The project will benefit the nursing home by the ability to improve person-centered care for residents and a reduction in behavioral issues and other poor resident outcomes.

e) Nursing home staff

Funded Entity(ies):

Parkview Care Center

Results of the Project:

INTERIM RESULTS: Credentials and instructions to access the training were created and shared with the facility. HealthCare interactive (HCI) works with the facility to provide technical program assistance. *CARES Dementia 5-Step Method*: No staff have begun training. *CARES Dementia Safety Topics*: No staff have begun training. *CARES Dementia-Related Behavior*: No staff have begun training.

Project Title: Improving Dementia Capability with CARES Dementia 5-Step Method

Unique Identifier: MN-0125-GMM-1272

Project Duration: 07/30/2025 to 07/29/2028

Total Amount of CMP Funds Approved for this Project: $14,962.35

Total Amount of CMP Funds Expended During CY 2025 for this Project: $0.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of this project is to improve resident care, especially for those living with Alzheimer's disease and related dementias, by incorporating evidence-based dementia care training into staff interactions with residents. The project will make this nationally recognized dementia training program, *CARES®*, available to each participating facility.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Minnesota

MN CMP Funds Expended for Administrative Uses in CY 2025: $99,643.56
MN CMP Funds Expended for Emergency Uses in CY 2025: $0.00
MN Active CMP Funded Projects in CY 2025: 22

b) The project aims to implement the *CARES*® online training and certification programs to train and certify 10 direct-care staff within 12 months in each of three programs: *CARES® Dementia 5-Step Method, CARES® Dementia Safety Topics*, and *CARES® Dementia-Related Behavior.*

c) This project directly benefits residents by improving their quality of care and life by training staff to engage with residents based on person-centered values and practices.

d) The project will benefit the nursing home by the ability to improve person-centered care for residents and a reduction in behavioral issues and other poor resident outcomes.

e) Nursing home staff

Funded Entity(ies):

Gil-Mor Manor

Results of the Project:

INTERIM RESULTS: Credentials and instructions to access the training were created and shared with the facility. HealthCare interactive (HCI) works with the facility to provide technical program assistance. *CARES Dementia 5-Step Method*: No staff have begun training. *CARES Dementia Safety Topics*: No staff have begun the training. *CARES Dementia-Related Behavior*: No staff have begun the training.

Project Title: Improving Dementia Capability with CARES Dementia 5-Step Method

Unique Identifier: MN-0125-LHBP-1273

Project Duration: 07/24/2025 to 07/23/2028

Total Amount of CMP Funds Approved for this Project: $14,962.35

Total Amount of CMP Funds Expended During CY 2025 for this Project: $0.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of this project is to improve resident care, especially for those living with Alzheimer's disease and related dementias, by incorporating evidence-based dementia care training into staff interactions with residents. The project will make this nationally recognized dementia training program, *CARES®,* available to each participating facility.

Minnesota

MN CMP Funds Expended for Administrative Uses in CY 2025: $99,643.56
MN CMP Funds Expended for Emergency Uses in CY 2025: $0.00
MN Active CMP Funded Projects in CY 2025: 22

b) The project aims to implement the *CARES*® online training and certification programs to train and certify 10 direct-care staff within 12 months in each of three programs: *CARES® Dementia 5-Step Method, CARES® Dementia Safety Topics*, and *CARES® Dementia-Related Behavior*.

c) This project directly benefits residents by improving their quality of care and life by training staff to engage with residents based on person-centered values and practices.

d) The project will benefit the nursing home by the ability to improve person-centered care for residents and a reduction in behavioral issues and other poor resident outcomes.

e) Nursing home staff

Funded Entity(ies):

The Lutheran Home: Belle Plaine

Results of the Project:

INTERIM RESULTS: Credentials and instructions to access the training were created and shared with the facility. HealthCare interactive (HCI) continues to work with the facility to provide technical program assistance. *CARES Dementia 5-Step Method*: Seven staff completed training and seven staff are now certified. *CARES Dementia Safety Topics*: No staff have begun the training. *CARES Dementia-Related Behavior*: No staff have begun the training.

Project Title: Improving Dementia Capability with CARES Dementia 5-Step Method

Unique Identifier: MN-0125-BEHC-1274

Project Duration: 08/20/2025 to 08/19/2028

Total Amount of CMP Funds Approved for this Project: $14,987.45

Total Amount of CMP Funds Expended During CY 2025 for this Project: $0.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of this project is to improve resident care, especially for those living with Alzheimer's disease and related dementias, by incorporating evidence-based dementia care training into staff

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Minnesota

MN CMP Funds Expended for Administrative Uses in CY 2025: $99,643.56
MN CMP Funds Expended for Emergency Uses in CY 2025: $0.00
MN Active CMP Funded Projects in CY 2025: 22

interactions with residents. The project will make this nationally recognized Dementia training program, *CARES®,* available to each participating facility.

b) The project aims to implement the *CARES*® online training and certification programs to train and certify 10 direct-care staff in each of three programs within 12 months: *CARES® Dementia 5-Step Method, CARES® Dementia Safety Topics*, and *CARES® Dementia-Related Behavior*.

c) This project directly benefits residents by improving their quality of care and life by training staff to engage with residents based on person-centered values and practices.

d) The project will benefit the nursing home by the ability to improve person-centered care for residents and a reduction in behavioral issues and other poor resident outcomes.

e) Nursing home staff

Funded Entity(ies):

Bywood East Health Care

Results of the Project:

INTERIM RESULTS: Credentials and instructions to access the training were created and shared with the facility. HealthCare interactive (HCI) continues to work with the facility to provide technical program assistance. *CARES Dementia 5-Step Method*: Five staff completed training and five are now certified. *CARES Dementia Safety Topics Program*: No staff have begun training. *CARES Dementia-Related Behavior Program*: No staff have begun training.

Project Title: Improving Dementia Capability with CARES Dementia 5-Step Method

Unique Identifier: MN-0125-BLHC-1275

Project Duration: 07/24/2025 to 07/23/2025

Total Amount of CMP Funds Approved for this Project: $14,994.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $0.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

Minnesota

MN CMP Funds Expended for Administrative Uses in CY 2025: $99,643.56
MN CMP Funds Expended for Emergency Uses in CY 2025: $0.00
MN Active CMP Funded Projects in CY 2025: 22

a) The purpose of this project is to improve resident care, especially for those living with Alzheimer's disease and related dementias, by incorporating evidence-based dementia care training into staff interactions with residents. The project will make this nationally recognized Dementia training program, *CARES®,* available to each participating facility.

b) The project aims to implement the *CARES®* online training and certification programs to train and certify 10 direct-care staff in each of three programs within 12 months: *CARES® Dementia 5-Step Method, CARES® Dementia Safety Topics*, and *CARES® Dementia-Related Behavior.*

c) This project directly benefits residents by improving their quality of care and life by training staff to engage with residents based on person-centered values and practices.

d) The project will benefit the nursing home by the ability to improve person-centered care for residents and a reduction in behavioral issues and other poor resident outcomes.

e) Nursing home staff

Funded Entity(ies):

Buffalo Lake Healthcare Center

Results of the Project:

INTERIM RESULTS: Credentials and instructions to access the training were created and shared with the facility. HealthCare interactive (HCI) continues to work with the facility to provide technical program assistance. *CARES Dementia 5-Step Method*: 74 staff have begun training, 10 staff have completed training, and six staff are now certified. *CARES Dementia Safety Topics*: No staff have begun the training. *CARES Dementia-Related Behavior*: No staff have begun the training.

Project Title: Improving Dementia Capability with CARES Dementia 5-Step Method

Unique Identifier: MN-0225-MMSL-1282

Project Duration: 07/24/2025 to 07/23/2028

Total Amount of CMP Funds Approved for this Project: $14,994.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $0.00

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Minnesota

MN CMP Funds Expended for Administrative Uses in CY 2025: $99,643.56

MN CMP Funds Expended for Emergency Uses in CY 2025: $0.00

MN Active CMP Funded Projects in CY 2025: 22

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of this project is to improve resident care, especially for those living with Alzheimer's disease and related dementias, by incorporating evidence-based dementia care training into staff interactions with residents. The project will make this nationally recognized Dementia training program, *CARES®,* available to each participating facility.

b) The project aims to implement the *CARES®* online training and certification programs to train and certify 10 direct-care staff in each of three programs within 12 months: *CARES® Dementia 5-Step Method, CARES® Dementia Safety Topics*, and *CARES® Dementia-Related Behavior.*

c) This project directly benefits residents by improving their quality of care and life by training staff to engage with residents based on person-centered values and practices.

d) The project will benefit the nursing home by the ability to improve person-centered care for residents and a reduction in behavioral issues and other poor resident outcomes.

e) Nursing home staff

Funded Entity(ies):

Mother of Mercy Senior Living

Results of the Project:

INTERIM RESULTS: Credentials and instructions to access the training were created and shared with the facility. HealthCare interactive (HCI) continues to work with the facility to provide technical program assistance. *CARES Dementia 5-Step Method*: No staff have begun training. *CARES Dementia Safety Topics*: No staff have begun the training. *CARES Dementia-Related Behavior*: No staff have begun the training.

Project Title: Improving Dementia Capability with CARES Dementia 5-Step Method

Unique Identifier: MN-0225-BVC-1283

Project Duration: 07/24/2025 to 07/23/2028

Total Amount of CMP Funds Approved for this Project: $14,994.00

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

State Civil Money Penalty Reinvestment Projects Funded in Calendar Year (CY) 2025
Chicago Long-Term Care Location

Minnesota

MN CMP Funds Expended for Administrative Uses in CY 2025: $99,643.56
MN CMP Funds Expended for Emergency Uses in CY 2025: $0.00
MN Active CMP Funded Projects in CY 2025: 22

Total Amount of CMP Funds Expended During CY 2025 for this Project: $4,998.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of this project is to improve resident care, especially for those living with Alzheimer's disease and related dementias, by incorporating evidence-based dementia care training into staff interactions with residents. The project will make this nationally recognized Dementia training program, *CARES®,* available to each participating facility.

b) The project aims to implement the *CARES®* online training and certification programs to train and certify 10 direct-care staff in each of three programs within 12 months: *CARES® Dementia 5-Step Method, CARES® Dementia Safety Topics*, and *CARES® Dementia-Related Behavior*.

c) This project directly benefits residents by improving their quality of care and life by training staff to engage with residents based on person-centered values and practices.

d) The project will benefit the nursing home by the ability to improve person-centered care for residents and a reduction in behavioral issues and other poor resident outcomes.

e) Nursing home staff

Funded Entity(ies):

Bigfork Valley Communities

Results of the Project:

INTERIM RESULTS: Credentials and instructions to access the training were created and shared with the facility. HealthCare interactive (HCI) continues to work with the facility to provide technical program assistance. *CARES Dementia 5-Step Method:* one staff member has completed training. *CARES Dementia Safety Topics*: one staff has completed training, and one staff is now program certified. *CARES Dementia-Related Behavior Program*: one staff has completed training, and one staff is now program certified.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Minnesota

MN CMP Funds Expended for Administrative Uses in CY 2025: $99,643.56
MN CMP Funds Expended for Emergency Uses in CY 2025: $0.00
MN Active CMP Funded Projects in CY 2025: 22

Project Title: Improving Dementia Capability with CARES Dementia 5-Step Method

Unique Identifier: MN-0225-CHCC-1284

Project Duration: 07/24/2025 to 07/23/2028

Total Amount of CMP Funds Approved for this Project: $14,994.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $4,998.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of this project is to improve resident care, especially for those living with Alzheimer's disease and related dementias, by incorporating evidence-based dementia care training into staff interactions with residents. The project will make this nationally recognized Dementia training program, *CARES®,* available to each participating facility.

b) The project aims to implement the *CARES®* online training and certification programs to train and certify 10 direct-care staff in each of three programs within 12 months: *CARES® Dementia 5-Step Method, CARES® Dementia Safety Topics*, and *CARES® Dementia-Related Behavior*.

c) This project directly benefits residents by improving their quality of care and life by training staff to engage with residents based on person-centered values and practices.

d) The project will benefit the nursing home by the ability to improve person-centered care for residents and a reduction in behavioral issues and other poor resident outcomes.

e) Nursing home staff

Funded Entity(ies):

Cook Hospital and Care Center

Results of the Project:

INTERIM RESULTS: Credentials and instructions to access the training were created and shared with the facility. HealthCare interactive (HCI) continues to work with the facility to provide technical program assistance. *CARES Dementia 5-Step Method*: five staff have begun the training, six staff have completed the training, and four staff are now program-certified. *CARES Dementia Safety Topics Program*: No staff

Minnesota

MN CMP Funds Expended for Administrative Uses in CY 2025: $99,643.56
MN CMP Funds Expended for Emergency Uses in CY 2025: $0.00
MN Active CMP Funded Projects in CY 2025: 22

have begun the training. *CARES Dementia-Related Behavior Program*: one member of staff has begun the training, four staff have completed the training, and four staff are now certified.

Project Title: Improving Dementia Capability with CARES Dementia 5-Step Method

Unique Identifier: MN-0225-MHS-1285

Project Duration: 07/24/2025 to 07/23/2028

Total Amount of CMP Funds Approved for this Project: $14,994.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $4,998.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of this project is to improve resident care, especially for those living with Alzheimer's disease and related dementias, by incorporating evidence-based dementia care training into staff interactions with residents. The project will make this nationally recognized Dementia training program, *CARES®,* available to each participating facility.

b) The project aims to implement the *CARES®* online training and certification programs to train and certify 10 direct-care staff in each of three programs within 12 months: *CARES® Dementia 5-Step Method, CARES® Dementia Safety Topics*, and *CARES® Dementia-Related Behavior*.

c) This project directly benefits residents by improving their quality of care and life by training staff to engage with residents based on person-centered values and practices.

d) The project will benefit the nursing home by the ability to improve person-centered care for residents and a reduction in behavioral issues and other poor resident outcomes.

e) Nursing home staff

Funded Entity(ies):

Madison Healthcare Services

Results of the Project:

INTERIM RESULTS: Credentials and instructions to access the training were created and shared with the facility. HealthCare interactive (HCI) continues to work with the facility to provide technical program

Minnesota

MN CMP Funds Expended for Administrative Uses in CY 2025: $99,643.56
MN CMP Funds Expended for Emergency Uses in CY 2025: $0.00
MN Active CMP Funded Projects in CY 2025: 22

assistance. *CARES Dementia 5-Step Method*: 11 staff have begun the training, three staff have completed the training, and 14 staff are now program-certified (exceeding the annual goal). *CARES Dementia Safety Topics*: 12 staff have begun the training, nine staff have completed training, and nine staff are now program certified (exceeding the annual goal*). CARES Dementia-Related Behavior*: six staff have begun the training, nine staff have completed training, and nine staff are now program certified.

Project Title: Improving Dementia Capability with CARES Dementia 5-Step Method

Unique Identifier: MN-0225-NRCC-1286

Project Duration: 11/05/2025 to 11/04/2028

Total Amount of CMP Funds Approved for this Project: $14,994.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $0.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of this project is to improve resident care, especially for those living with Alzheimer's disease and related dementias, by incorporating evidence-based dementia care training into staff interactions with residents. The project will make this nationally recognized Dementia training program, *CARES®,* available to each participating facility.

b) The project aims to implement the *CARES®* online training and certification programs to train and certify 10 direct-care staff in each of three programs within 12 months: *CARES® Dementia 5-Step Method, CARES® Dementia Safety Topics*, and *CARES® Dementia-Related Behavior.*

c) This project directly benefits residents by improving their quality of care and life by training staff to engage with residents based on person-centered values and practices.

d) The project will benefit the nursing home by the ability to improve person-centered care for residents and a reduction in behavioral issues and other poor resident outcomes.

e) Nursing home staff

Funded Entity(ies):

New Richland Care Center

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Minnesota

MN CMP Funds Expended for Administrative Uses in CY 2025: $99,643.56
MN CMP Funds Expended for Emergency Uses in CY 2025: $0.00
MN Active CMP Funded Projects in CY 2025: 22

Results of the Project:

INTERIM RESULTS: Credentials and instructions to access the training were created and shared with the facility. HealthCare interactive (HCI) continues to work with the facility to provide technical program assistance. *CARES Dementia 5-Step* Method: three staff have completed the training, and three staff are now certified. *CARES Dementia Safety Topics*: No staff have begun the training. CARES Dementia-*Related Behavior:* No staff have begun the training.

Project Title: Improving Dementia Capability with CARES Dementia 5-Step Method

Unique Identifier: MN-0225-AAH-1287

Project Duration: 09/01/2025 to 08/30/2028

Total Amount of CMP Funds Approved for this Project: $14,994.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $4,998.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of this project is to improve resident care, especially for those living with Alzheimer's disease and related dementias, by incorporating evidence-based dementia care training into staff interactions with residents. The project will make this nationally recognized Dementia training program, *CARES®,* available to each participating facility.

b) The project aims to implement the *CARES®* online training and certification programs to train and certify 10 direct-care staff in each of three programs within 12 months: *CARES® Dementia 5-Step Method, CARES® Dementia Safety Topics*, and *CARES® Dementia-Related Behavior*.

c) This project directly benefits residents by improving their quality of care and life by training staff to engage with residents based on person-centered values and practices.

d) The project will benefit the nursing home by the ability to improve person-centered care for residents and a reduction in behavioral issues and other poor resident outcomes.

e) Nursing home staff

Minnesota

MN CMP Funds Expended for Administrative Uses in CY 2025: $99,643.56
MN CMP Funds Expended for Emergency Uses in CY 2025: $0.00
MN Active CMP Funded Projects in CY 2025: 22

Funded Entity(ies):

Appleton Area Health

Results of the Project:

INTERIM RESULTS: Credentials and instructions to access the training were created and shared with the facility. HealthCare interactive (HCI) continues to work with the facility to provide technical program assistance. *CARES Dementia 5-Step Method*: six staff have completed the training, and six staff are now certified. *CARES Dementia Safety Topics*: No staff have begun the training. *CARES Dementia-Related Behavior*: No staff have begun the training.

Project Title: Improving Dementia Capability with CARES Dementia 5-Step Method

Unique Identifier: MN-0225-HSM-1289

Project Duration: 09/24/2025 to 09/23/2028

Total Amount of CMP Funds Approved for this Project: $14,994.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $0.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of this project is to improve resident care, especially for those living with Alzheimer's disease and related dementias, by incorporating evidence-based dementia care training into staff interactions with residents. The project will make this nationally recognized Dementia training program, *CARES®,* available to each participating facility.

b) The project aims to implement the *CARES®* online training and certification programs to train and certify 10 direct-care staff in each of three programs within 12 months: *CARES® Dementia 5-Step Method, CARES® Dementia Safety Topics*, and *CARES® Dementia-Related Behavior.*

c) This project directly benefits residents by improving their quality of care and life by training staff to engage with residents based on person-centered values and practices.

d) The project will benefit the nursing home by the ability to improve person-centered care for residents and a reduction in behavioral issues and other poor resident outcomes.

e) Nursing home staff

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Minnesota

MN CMP Funds Expended for Administrative Uses in CY 2025: $99,643.56
MN CMP Funds Expended for Emergency Uses in CY 2025: $0.00
MN Active CMP Funded Projects in CY 2025: 22

Funded Entity(ies):

Hope Springs at Minnetonka

Results of the Project:

INTERIM RESULTS: Credentials and instructions to access the training were created and shared with the facility. HealthCare interactive (HCI) continues to work with the facility to provide technical program assistance. *CARES Dementia 5-Step Method*: No staff have begun training. *CARES Dementia Safety Topics*: No staff have begun the training. *CARES Dementia-Related Behavior*: No staff have begun the training.

Project Title: Improving Dementia Capability with CARES Dementia 5-Step Method

Unique Identifier: MN-0225-WSLC-1290

Project Duration: 08/21/2025 to 08/20/2028

Total Amount of CMP Funds Approved for this Project: $14,994.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $0.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of this project is to improve resident care, especially for those living with Alzheimer's disease and related dementias, by incorporating evidence-based dementia care training into staff interactions with residents. The project will make this nationally recognized Dementia training program, *CARES®,* available to each participating facility.

b) The project aims to implement the *CARES®* online training and certification programs to train and certify 10 direct-care staff in each of three programs within 12 months: *CARES® Dementia 5-Step Method, CARES® Dementia Safety Topics*, and *CARES® Dementia-Related Behavior*.

c) This project directly benefits residents by improving their quality of care and life by training staff to engage with residents based on person-centered values and practices.

d) The project will benefit the nursing home by the ability to improve person-centered care for residents and a reduction in behavioral issues and other poor resident outcomes.

e) Nursing home staff

Minnesota

MN CMP Funds Expended for Administrative Uses in CY 2025: $99,643.56

MN CMP Funds Expended for Emergency Uses in CY 2025: $0.00

MN Active CMP Funded Projects in CY 2025: 22

Funded Entity(ies):

Warroad Senior Living Center

Results of the Project:

INTERIM RESULTS: Credentials, and instructions to access the training were created and shared with the facility. HealthCare interactive (HCI) continues to work with the facility to provide technical program assistance. *CARES Dementia 5-Step Method*: 16 staff have completed the training, and 16 staff are now program-certified (exceeding the annual goal). *CARES Dementia Safety Topics*: No staff have begun the training. *CARES Dementia-Related Behavior*: No staff have begun the training.

Project Title: Improving Person-Centered Care through Engagement, Reminiscence Therapy, and Capturing Life Stories

Unique Identifier: MN-0224-SJCC-1298

Project Duration: 08/03/2025 to 08/02/2026

Total Amount of CMP Funds Approved for this Project: $4,951.27

Total Amount of CMP Funds Expended During CY 2025 for this Project: $0.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of this project is to strengthen person-centered care by capturing residents' life stories through structured reminiscence and engagement activities using the LifeBio program.

b) The project aims to train at least one staff member in LifeBio processes, complete up to 20 resident interviews, and produce up to 20 Life Story Books, Snapshots, and Action Plans.

c) Residents gain increased engagement, meaningful interactions, and a stronger sense of identity.

d) The project will benefit the nursing home by the enhanced person-centered care practices, supporting staff onboarding, and strengthening staff–resident relationships.

e) Direct care staff and in some cases, family members as well.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Minnesota

MN CMP Funds Expended for Administrative Uses in CY 2025: $99,643.56
MN CMP Funds Expended for Emergency Uses in CY 2025: $0.00
MN Active CMP Funded Projects in CY 2025: 22

Funded Entity(ies):

St. John's Circle of Care

Results of the Project:

INTERIM RESULTS: The project has begun implementation. The facility completed their "Getting Started" training and had an initial site visit. To date, nine residents have begun their interviews, and one resident has completed the interview and received their Life Story book and care tools. The community is actively participating in bi-weekly check-in calls with LifeBio and remains on track to complete the project as planned.

Project Title: Improving Person-Centered Care through Engagement, Reminiscence Therapy, and Capturing Life Stories

Unique Identifier: MN-0224-WWV-1300

Project Duration: 09/23/2025 to 09/22/2026

Total Amount of CMP Funds Approved for this Project: $4,951.27

Total Amount of CMP Funds Expended During CY 2025 for this Project: $0.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of the *Improving Person-Centered Care through Engagement, Reminiscence Therapy, and Capturing Life Stories* project is to strengthen person-centered care by capturing residents' life stories through structured reminiscence and engagement activities using the LifeBio program.

b) The project aims to train at least one staff member in LifeBio processes, complete up to 20 resident interviews, and produce up to 20 Life Story Books, Snapshots, and Action Plans.

c) Residents gain increased engagement, meaningful interactions, and a stronger sense of identity.

d) The project will benefit the nursing home by the enhanced person-centered care practices, supporting staff onboarding, and strengthening staff–resident relationships.

e) Direct care staff and in some cases, family members as well.

Minnesota

MN CMP Funds Expended for Administrative Uses in CY 2025: $99,643.56
MN CMP Funds Expended for Emergency Uses in CY 2025: $0.00
MN Active CMP Funded Projects in CY 2025: 22

Funded Entity(ies):

West Wind Village

Results of the Project:

INTERIM RESULTS: The project has begun implementation. The facility completed their "Getting Started" training and had an initial site visit. To date, four residents have begun their interviews, and three residents have completed the interview and received their Life Story book and care tools. The community is actively participating in bi-weekly check-in calls with LifeBio and remains on track to complete the project as planned.

Project Title: Improving Person-Centered Care through Engagement, Reminiscence Therapy, and Capturing Life Stories

Unique Identifier: MN-0224-OPC-1301

Project Duration: 09/22/2025 to 09/21/2026

Total Amount of CMP Funds Approved for this Project: $4,951.27

Total Amount of CMP Funds Expended During CY 2025 for this Project: $0.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of the Improving Person-Centered Care through Engagement, Reminiscence Therapy, and Capturing Life Stories project is to strengthen person-centered care by capturing residents' life stories through structured reminiscence and engagement activities using the LifeBio program.

b) The project aims to train at least one staff member in LifeBio processes, complete up to 20 resident interviews, and produce up to 20 Life Story Books, Snapshots, and Action Plans.

c) Residents gain increased engagement, meaningful interactions, and a stronger sense of identity.

d) The project will benefit the nursing home by the enhanced person-centered care practices, supporting staff onboarding, and strengthening staff–resident relationships.

e) Direct care staff and in some cases, family members as well.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Minnesota

MN CMP Funds Expended for Administrative Uses in CY 2025: $99,643.56

MN CMP Funds Expended for Emergency Uses in CY 2025: $0.00

MN Active CMP Funded Projects in CY 2025: 22

Funded Entity(ies):

Oakland Park Communities

Results of the Project:

The project has begun implementation. The facility completed their "Getting Started" training and had an initial site visit. The facility is having some difficulty starting interviews due to staff turnover but is working with LifeBio to create a plan to address these issues. The community is participating in bi-weekly check-in calls with LifeBio.

Project Title: Improving Person-Centered Care through Engagement, Reminiscence Therapy, and Capturing Life Stories

Unique Identifier: MN-0224-AHCS-1303

Project Duration: 09/23/2025 to 09/22/2026

Total Amount of CMP Funds Approved for this Project: $4,951.27

Total Amount of CMP Funds Expended During CY 2025 for this Project: $0.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of this project is to strengthen person-centered care by capturing residents' life stories through structured reminiscence and engagement activities using the LifeBio program.

b) The project aims to train at least one staff member in LifeBio processes, complete up to 20 resident interviews, and produce up to 20 Life Story Books, Snapshots, and Action Plans.

c) Residents gain increased engagement, meaningful interactions, and a stronger sense of identity.

d) The project will benefit the nursing home by enhanced person-centered care practices, supporting staff onboarding, and strengthening staff–resident relationships.

e) Direct care staff and in some cases, family members as well.

Funded Entity(ies):

Annandale Health and Community Services

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Minnesota

MN CMP Funds Expended for Administrative Uses in CY 2025: $99,643.56

MN CMP Funds Expended for Emergency Uses in CY 2025: $0.00

MN Active CMP Funded Projects in CY 2025: 22

Results of the Project:

INTERIM RESULTS: The project has begun implementation. The facility completed their "Getting Started" training and had an initial site visit. To date, three residents have begun their interviews, and two residents have completed their interviews and received their Life Story book and care tools. The community is actively participating in bi-weekly check-in calls with LifeBio and remains on track to complete the project as planned.

Project Title: Improving Dementia Capability with CARES Dementia 5-Step Method

Unique Identifier: MN-0225-CCC-1306

Project Duration: 07/24/2025 to 07/23/2028

Total Amount of CMP Funds Approved for this Project: $14,994.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $4,998.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of the *Improving Dementia Capability with CARES Dementia 5-Step Method* project is to improve resident care, especially for those living with Alzheimer's disease and related dementias, by incorporating evidence-based dementia care training into staff interactions with residents. The project will make this nationally recognized Dementia training program, *CARES®,* available to each participating facility.

b) The project aims to implement the *CARES®* dementia online training and certification programs to train and certify 10 direct-care staff in each of three programs within 12 months: *CARES® Dementia 5-Step Method, CARES® Dementia Safety Topics*, and *CARES® Dementia-Related Behavior.*

c) This project directly benefits residents by improving their quality of care and life by training staff to engage with residents based on person-centered values and practices.

d) The project will benefit the nursing home by the ability to improve person-centered care for residents and a reduction in behavioral issues and other poor resident outcomes.

e) Nursing home staff

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Minnesota

MN CMP Funds Expended for Administrative Uses in CY 2025: $99,643.56
MN CMP Funds Expended for Emergency Uses in CY 2025: $0.00
MN Active CMP Funded Projects in CY 2025: 22

Funded Entity(ies):

Clarkfield Care Center

Results of the Project:

INTERIM RESULTS: Credentials and instructions to access the training were created and shared with the facility. HealthCare interactive (HCI) continues to work with the facility to provide technical program assistance. *CARES Dementia 5-Step Method:* 16 staff have begun training, 48 staff have completed training, and 11 staff are now program-certified (exceeding the annual goal). *CARES Dementia Safety Topics*: 16 staff have begun the training, eight staff have completed the training, and eight staff are now program certified. *CARES Dementia-Related Behavior*: 30 staff have begun the training, 25 staff have completed the training, and 25 staff are now program-certified (exceeding the annual goal).

Project Title: Improving Person-Centered Care through Engagement, Reminiscence Therapy, and Capturing Life Stories

Unique Identifier: MN-0225-SHSC-1307

Project Duration: 09/09/2025 to 09/08/2026

Total Amount of CMP Funds Approved for this Project: $4,951.27

Total Amount of CMP Funds Expended During CY 2025 for this Project: $0.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of this project is to strengthen person-centered care by capturing residents' life stories through structured reminiscence and engagement activities using the LifeBio program.

b) The project aims to train at least one staff member in LifeBio processes, complete up to 20 resident interviews, and produce up to 20 Life Story Books, Snapshots, and Action Plans.

c) Residents gain increased engagement, meaningful interactions, and a stronger sense of identity.

d) The project will benefit the nursing home by enhanced person-centered care practices, supporting staff onboarding, and strengthening staff–resident relationships.

e) Direct care staff and in some cases, family members as well.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Minnesota

MN CMP Funds Expended for Administrative Uses in CY 2025: $99,643.56
MN CMP Funds Expended for Emergency Uses in CY 2025: $0.00
MN Active CMP Funded Projects in CY 2025: 22

Funded Entity(ies):

Sanford Health Sylvan Court

Results of the Project:

INTERIM RESULTS: The project has begun implementation. The facility completed their "Getting Started" training and had an initial site visit. LifeBio has been working with the facility information technology (IT) team to resolve some issues related to the facility's rigorous IT certification requirements. LifeBio feels this will be resolved soon, and they will be able to access and download the application. In the interim, the community started conducting handwritten interviews using LifeBio journals. The facility has submitted permission forms for LifeBio to contact family members of residents that have communication barriers. The community is actively participating in bi-weekly check-in calls with LifeBio.

Project Title: Improving Dementia Capability with CARES Dementia 5-Step Method

Unique Identifier: MN-0325-CCCC-1309

Project Duration: 07/29/2025 to 07/28/2028

Total Amount of CMP Funds Approved for this Project: $14,994.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $4,998.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of the Improving Dementia Capability with *CARES Dementia 5-Step Method* project is to improve resident care, especially for those living with Alzheimer's disease and related dementias, by incorporating evidence-based dementia care training into staff interactions with residents. The project will make this nationally recognized training program, *CARES®,* available to each participating facility.

b) The project aims to implement the *CARES®* dementia online training and certification programs to train and certify 10 direct-care staff in each of three programs within 12 months: *CARES® Dementia 5-Step Method, CARES® Dementia Safety Topics*, and *CARES® Dementia-Related Behavior.*

c) This project directly benefits residents by improving their quality of care and life by training staff to engage with residents based on person-centered values and practices.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Minnesota

MN CMP Funds Expended for Administrative Uses in CY 2025: $99,643.56
MN CMP Funds Expended for Emergency Uses in CY 2025: $0.00
MN Active CMP Funded Projects in CY 2025: 22

d) The project will benefit the nursing home by the ability to improve person-centered care for residents and a reduction in behavioral issues and other poor resident outcomes.

e) Nursing home staff

Funded Entity(ies):

Clara City Care Center

Results of the Project:

INTERIM RESULTS: Credentials and instructions to access the training were created and shared with the facility. HealthCare interactive (HCI) continues to work with the facility to provide technical program assistance. *CARES Dementia 5-Step Method*: two staff have begun the training, 11 staff have completed the training, and 11 staff are now program-certified (exceeding the annual goal). *CARES Dementia Safety Topics*: No staff have begun the training. *CARES Dementia-Related Behavior*: No staff have begun the training.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Ohio

OH CMP Funds Expended for Administrative Uses in CY 2025: $115,029.00

OH CMP Funds Expended for Emergency Uses in CY 2025: $0.00

OH Active CMP Funded Projects in CY 2025: 8

Project Title: Horticulture Therapy

Unique Identifier: OH-0325-ERS-1313

Project Duration: 10/31/2025 to 09/30/2028

Total Amount of CMP Funds Approved for this Project: $28,000.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $1,800.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The *Horticulture Therapy* project aims to provide nursing home residents with gardening therapy, which can assist with physical, emotional, and social issues. They will offer residents one to two horticulture therapy sessions per month for a total of 16 sessions per year. Approximately 288 residents are expected to participate in the program.

b) The project aims to reduce rates of social isolation and loneliness by 20% and increase resident engagement and satisfaction by 20%.

c) Residents may experience an increase in dexterity, self-confidence, feelings of accomplishment, and coordination. Residents may also learn new skills and/or regain abilities lost through disease or injury.

d) The facility may have a higher level of resident satisfaction due to resident being more socially engaged.

e) Not applicable

Funded Entity(ies):

Episcopal Retirement Home, Inc

Results of the Project:

The project was implemented for less than six months at the time of reporting; interim results are not yet available.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Ohio

OH CMP Funds Expended for Administrative Uses in CY 2025: $115,029.00

OH CMP Funds Expended for Emergency Uses in CY 2025: $0.00

OH Active CMP Funded Projects in CY 2025: 8

Project Title: The Java Project: Addressing Loneliness and Social Isolation

Unique Identifier: OH-0325-SJSL-1314

Project Duration: 10/02/2025 to 10/01/2028

Total Amount of CMP Funds Approved for this Project: $15,000.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $5,000.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The *Java Project* aims to improve quality of life of residents by decreasing loneliness and social isolation through the implementation of three evidence-based standardized peer support activity programs. The project will implement the *Java Music Club* in year one, the *Java Memory Care* program in year two, and the *Java Mentorship* program in year three. At least 50% of residents participating in *Java* programming will be assessed using the Java Scale each year.

b) The project aims to attain a 10% reduction in social isolation and loneliness and a 10% increase in happiness.

c) Residents may experience a reduction in loneliness and social isolation which should decrease the likelihood of depression, heart disease, cancer, falls, dementia, and early death.

d) The facility may have a higher level of resident satisfaction due to residents being more socially engaged.

e) Not applicable

Funded Entity(ies):

Saint Joseph Senior Living

Results of the Project:

The project was implemented for less than six months at the time of reporting; interim results are not yet available.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Ohio

OH CMP Funds Expended for Administrative Uses in CY 2025: $115,029.00

OH CMP Funds Expended for Emergency Uses in CY 2025: $0.00

OH Active CMP Funded Projects in CY 2025: 8

Project Title: Music and Memory

Unique Identifier: OH-0325-UCH-1316

Project Duration: 09/26/2025 to 09/25/2026

Total Amount of CMP Funds Approved for this Project: $15,963.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $15,963.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The *Music and Memory* project aims to personalize music as a means of communication and self-expression when verbal language abilities are diminished.

b) The project aims to achieve: 80% of facility residents will receive equipment for the *Music and Memory* program, six staff will be certified by the Music and Memory program, at least 50% of residents will participate in the program. Also, participating residents will experience an increase in engagement, decreased isolation, decreased agitation and anxiety.

c) Residents may experience a reduction in loneliness, social isolation, agitation, depression, fear, paranoia, and anxiety. Residents may have an increased self-expression and the ability to communicate.

d) The facility may have a higher level of resident satisfaction, increased connection with facility staff, and decrease in the use of antipsychotic medication.

e) Not applicable

Funded Entity(ies):

United Church Homes

Results of the Project:

The project was implemented for less than six months at the time of reporting; interim results are not yet available.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Ohio

OH CMP Funds Expended for Administrative Uses in CY 2025: $115,029.00

OH CMP Funds Expended for Emergency Uses in CY 2025: $0.00

OH Active CMP Funded Projects in CY 2025: 8

Project Title: Enhancing Residents Daily Life

Unique Identifier: OH-0325-LCCW-1317

Project Duration: 10/06/2025 to 10/05/2026

Total Amount of CMP Funds Approved for this Project: $5,000.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $0.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The *Enhancing Residents Daily Life* project will implement *Active for Life Fitness* by training staff to use the program. Additionally, the use of robotic pets will serve as a non-pharmaceutical approach to reducing resident anxiety and isolation.

b) The project aims to achieve the following goals: Two facility staff members will be certified as Active for Life Fitness instructors. The program will offer Tap Time and Seated Rhythm classes twice monthly with a minimum of 50% of the residents receiving and completing a program survey. Reduce social isolation and loneliness by 10%. Improve happiness by 10%. Increase resident participation in activities by 20%. Reduce anxiety and negative behaviors without the use of medication by 10%.

c) Participating nursing home residents will benefit by improved physical, cognitive, and behavioral health.

d) The project will benefit the facility by providing improved patient-centered care in the Activities Department.

e) Not applicable

Funded Entity(ies):

Life Care Center of Westlake

Results of the Project:

The project was implemented for less than six months at the time of reporting; interim results are not yet available.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

State Civil Money Penalty Reinvestment Projects Funded in Calendar Year (CY) 2025
Chicago Long-Term Care Location

Ohio

OH CMP Funds Expended for Administrative Uses in CY 2025: $115,029.00
OH CMP Funds Expended for Emergency Uses in CY 2025: $0.00
OH Active CMP Funded Projects in CY 2025: 8

Project Title: Montessori Based Dementia Programming

Unique Identifier: OH-0525-WVHL-1332

Project Duration: 10/02/2025 to 03/01/2026

Total Amount of CMP Funds Approved for this Project: $5,000.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $5,000.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The *Montessori Based Dementia Programming* project seeks to improve care in the memory units by creating a prepared environment filled with cues and memory support.

b) The project aims to achieve the following goals:

- four staff members will be trained and certified in *Montessori Based Dementia Programming*.
- increase resident engagement by 20%.
- reduce agitation and anxiety by 20%.

c) The Montessori approach enables residents with dementia to remain as independent as possible by supporting the use of their remaining capabilities; assist in improving other skills and abilities with practice; to engage in purposeful and meaningful activities; and to have a social role within their community. Residents should experience decreased anxiety, agitation, and destructive behaviors while increasing hope, optimism, social skills, and cognitive function.

d) The nursing home will benefit by increased positive interactions between residents and staff through a team of certified Montessori dementia care professionals.

e) Not applicable

Funded Entity(ies):

West View Manor, INC

Results of the Project:

The project was implemented for less than six months at the time of reporting; interim results are not yet available.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Ohio

OH CMP Funds Expended for Administrative Uses in CY 2025: $115,029.00

OH CMP Funds Expended for Emergency Uses in CY 2025: $0.00

OH Active CMP Funded Projects in CY 2025: 8

Project Title: Harbor Healthcare Community Wellness Initiative

Unique Identifier: OH-0525-HHI-1334

Project Duration: 12/02/2025 to 12/01/2026

Total Amount of CMP Funds Approved for this Project: $4,992.80

Total Amount of CMP Funds Expended During CY 2025 for this Project: $4,992.80

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The *Harbor Healthcare Community Wellness Initiative* will implement a program which highlights movement and other physical activities among residents. The project will train ten staff members to receive StrongerU Fitness certification. It will purchase fitness equipment and a one-year subscription to the StrongerU Series.

b) The project aims to achieve an increase in resident activity participation of at least 50% and decrease the resident falls by 10%.

c) The resident will benefit from the project by improving resident independence and overall quality of life by offering a variety of movement activities that will improve engagement in exercise classes and their overall physical wellness.

d) The nursing home benefits from the project by having facility staff educated on strategies to help residents reduce falls, improve balance, and understand non pharmaceutical solutions for improving wellness.

e) Not applicable

Funded Entity(ies):

Harbor Healthcare of Ironton

Results of the Project:

The project was implemented for less than six months at the time of reporting; interim results are not yet available.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Ohio

OH CMP Funds Expended for Administrative Uses in CY 2025: $115,029.00
OH CMP Funds Expended for Emergency Uses in CY 2025: $0.00
OH Active CMP Funded Projects in CY 2025: 8

Project Title: Creating a Sustainable Culture of Person-Directed Dementia Care

Unique Identifier: OH-0525-SEMH-1340

Project Duration: 10/31/2025 to 10/30/2028

Total Amount of CMP Funds Approved for this Project: $15,000.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $0.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The project will implement the *Eden Alternative* program.

b) The project aims to achieve the following goals: By the end of the first year, staff will complete "*Dementia Beyond Drugs*" training. By the end of year two, staff will complete the Certified Eden Associate Training program. At least 75% of participants will experience a positive shift toward person-directed perceptions of, and approaches to, care; ultimately leading to an increase in resident engagement and satisfaction with daily care. At least 75% of participants will show a positive shift toward increased daily application of person-directed approaches to care. At least 75% of participants will show an understanding of the Domains of Wellbeing and be able to decrease unmet resident needs. At least 75% of participants will exhibit a shift in perspective and better understanding of resident-directed care and culture change. At least 75% of participants will gain knowledge on how to recognize the unmet needs of residents living with dementia without the use of antipsychotics or other medications.

c) The residents will benefit from the program by a decrease in loneliness, helplessness, and boredom, which reduces depression and challenges to physical health.

d) The facility will benefit from the project by empowering employees to transform care and operational practices to improve resident well-being and quality of life.

e) Not applicable

Funded Entity(ies):

SEM Haven

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Ohio

OH CMP Funds Expended for Administrative Uses in CY 2025: $115,029.00

OH CMP Funds Expended for Emergency Uses in CY 2025: $0.00

OH Active CMP Funded Projects in CY 2025: 8

Results of the Project:

The project was implemented for less than six months at the time of reporting; interim results are not yet available.

Project Title: Hillside Haven

Unique Identifier: OH-0625-BSC-1356

Project Duration: 12/22/2025 to 12/21/2026

Total Amount of CMP Funds Approved for this Project: $4,991.58

Total Amount of CMP Funds Expended During CY 2025 for this Project: $0.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) To Hillside Haven project seeks to create a low stimulation sensory room that will offer visual, auditory, olfactory, and tactile therapies to promote resident relaxation, reduce stress, and enhance quality of life.

b) The project aims to reduce antipsychotic medications by 20%; reduce resident falls by 20%; reduce resident stress, agitation, and anxiety by 20%; and increase socialization by 20%.

c) Residents will benefit from the low stimulation sensory room by experiencing less stress, agitation, and anxiety as well as increased socialization. Residents benefit from the opportunity to engage in meaningful and purposeful activities. Relaxation therapy may also help alleviate anxiety, improve sleep patterns, and stimulate appetite without the use of medication.

d) The creation of low stimulation/sensory room will improve dementia care; reduce resident falls; reduce the use of antipsychotic medication; increase supervision of residents.

e) Not applicable

Funded Entity(ies):

Bayley Senior Care

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

State Civil Money Penalty Reinvestment Projects Funded in Calendar Year (CY) 2025
Chicago Long-Term Care Location

Ohio

OH CMP Funds Expended for Administrative Uses in CY 2025: $115,029.00
OH CMP Funds Expended for Emergency Uses in CY 2025: $0.00
OH Active CMP Funded Projects in CY 2025: 8

Results of the Project:

The project was implemented for less than six months at the time of reporting; interim results are not yet available.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Wisconsin

WI CMP Funds Expended for Administrative Uses in CY 2025: $509.08

WI CMP Funds Expended for Emergency Uses in CY 2025: $0.00

WI Active CMP Funded Projects in CY 2025: 3

Project Title: Live Therapeutic Harp

Unique Identifier: WI-0624-THF-1173

Project Duration: 08/09/2024 to 08/08/2025

Total Amount of CMP Funds Approved for this Project: $3,960.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $2,750.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The *Live Therapeutic Harp* project is a one-year continuation of WI-0722-THF-990, *Live Therapeutic Music*, implemented October 1, 2022, through September 30, 2023. In this project, residents of the skilled nursing facilities, who have late-stage dementia, will participate in weekly sessions featuring therapeutic music played on the harp and flute.

b) *Live Therapeutic Harp* goals are a reduction in anxiety and restlessness, and mood improvement by 70% in 1:1 music session. Evaluation will be conducted before and after each session, and the results will be compiled in quarterly reports. Staff surveys will also be conducted to achieve a response rate of 70% or higher, indicating "agree" or "strongly agree" regarding the benefits of the sessions.

c) Residents participating in sessions have late- and end-stage dementia. Individuals with this affliction have psycho-social limitations, and music provides a unique interactive connection. Live acoustic music communicates and provides reassurance.

d) The nursing home benefits by providing a therapeutic intervention for its residents living with various stages of dementia.

e) No additional target audience beyond residents and staff.

Funded Entity(ies):

Therapeutic Harp and Flute / Simon Weller, RN, CMP

Results of the Project:

Final Results: Total number of 1:1 therapeutic music sessions: 133. Target goal is reduction of anxiety, restlessness, and mood improvement in 70% of sessions. Assessed anxiety, restlessness, and mood:

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Wisconsin

WI CMP Funds Expended for Administrative Uses in CY 2025: $509.08
WI CMP Funds Expended for Emergency Uses in CY 2025: $0.00
WI Active CMP Funded Projects in CY 2025: 3

documented decrease in anxiety: 97% leaving 3% with no observable change; documented decrease in restlessness: 88% leaving 12% with no observable change. Mood: Practitioner unable to assess in some of the end stage dementia members – no assessment is 24%. Out of assessable group – 96% documented mood improvement leaving 4% with no observable change. Staff Surveys: 48 surveys, 480 total items. Survey questions assessing benefits of program: Strongly Agree or Agree: 456 items or 95%. Undecided: 16 items or 3%. Disagree: four items or 1%, Left Blank: four or 1%.

Project Title: Golden Age Manor Wound and Skin Integrity Specialty Program

Unique Identifier: WI-0724-GAM-1186

Project Duration: 09/04/2024 to 09/03/2027

Total Amount of CMP Funds Approved for this Project: $14,925.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $4,975.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) Golden Age Manor is a skilled nursing facility (SNF) located in a rural area with limited resources and access to specialized wound and skin integrity care. It can take months for outpatient wound, skin, and podiatry appointments. There is one critical access hospital in the area with an attached wound center. Having certified wound care and nail care staff in Golden Age Manor would accelerate healing processes and better manage each resident's wound and skin needs.

b) Project goals: (1) Improve healing time by 12 months for all acute wounds by 25% and chronic wounds by 25% with certified wound nurses on staff. (2) Within two years of implementing the project, all residents will have access to foot examinations, routine, and PRN (as needed) advanced nail trimmings.

c) All residents with wounds or any skin integrity concerns will benefit from having a certified wound, ostomy, continence, and foot care specialist on staff. Having staff in-house to manage these care areas would eliminate the need for transportation or having the residents leave the facility for treatment.

d) Golden Age Manor has many residents who have dementia and need care in these areas. Some residents have behaviors because they're in pain from their moisture incontinence issues or wound pain. By having in-house staff who are more educated, the facility can reduce behaviors that

Wisconsin

WI CMP Funds Expended for Administrative Uses in CY 2025: $509.08
WI CMP Funds Expended for Emergency Uses in CY 2025: $0.00
WI Active CMP Funded Projects in CY 2025: 3

compromise patient care and improve the quality of life for residents with wounds or compromised skin integrity. The nursing home aims to have staff educated in wounds and advanced skin treatment, reduce overall cost, further injuries, and increase patient satisfaction.

e) Not applicable

Funded Entity(ies):

Golden Age Manor

Results of the Project:

Interim Results: The purpose of the *Golden Age Manor Wound and Skin Integrity Specialty Program* is to provide registered nurses (RNs) with further education in wound care to help prevent and treat wounds in a rural skilled nursing facility. The project's goal is to improve healing time of acute wounds by 10% and chronic wounds by 25% by having educated staff overseen wound care. The education nurses receive will help pave the way for the facility's wound care program, which will educate all staff, reduce wound care costs, and improve overall health and well-being of residents. Annual results demonstrate that the wound control group versus the 6-month study group showed a reduction in pressure injuries by 33.1%, ulcer duration decreased by 78.6%, and total wound duration decreased by 60.7%. In addition, in the fourth quarter of 2025, two nurses worked to get their board certification through the Wound, Ostomy, and Continence Nursing Certification Board (WOCNCB). They both took the wound course, completed objectives for class, and sat through the board certification process. Wounds are at a low with having a standardized prevention program in place and early recognition. Certified nursing assistants (CNAs) are getting trained as 'Skin Champions' to help empower them and provide education on early recognition.

Project Title: Furry Friends Project

Unique Identifier: WI-1224-AIN-1249

Project Duration: 02/01/2025 to 01/31/2026

Total Amount of CMP Funds Approved for this Project: $186,094.13

Total Amount of CMP Funds Expended During CY 2025 for this Project: $184,228.39

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

Wisconsin

WI CMP Funds Expended for Administrative Uses in CY 2025: $509.08
WI CMP Funds Expended for Emergency Uses in CY 2025: $0.00
WI Active CMP Funded Projects in CY 2025: 3

a) The *Furry Friends Project* introduces robotic companion pets, a practical alternative to traditional pet therapy, into nursing homes for the purposes of reducing the incidence of depressive symptoms and improving the quality of life for nursing home residents living with dementia.

b) The goals of the project are to improve the quality of life of residents living with dementia by reducing the incidence of depressive symptoms. The project's 43 skilled nursing facility participants aim to improve the quality of life of residents living with dementia by 20% and reduce the incidence of depressive symptoms by 20%. A Resident Mood/Quality of Life Assessment outcome survey is used to track both measures.

c) The presence of a pet has the potential to stimulate both overt social-verbal and social-nonverbal communication. Joy for All Companion Pets provide psychosocial benefit in the form of improved quality of life through reduced loneliness, and increased sense of purpose/resilience. Additionally, for those with dementia, the companion pets demonstrated the ability to improve mood and cognitive activity, as well as reduce cognitive decline and associated behaviors.

d) Nursing homes benefit from non-pharmacological interventions such as therapy pets to address the decreased coping skills and negative reactions to environmental stimuli that challenge people undergoing cognitive decline. Moreover, robotic companion pets, unlike live animals, can be used on demand, eliminating scheduling needs for busy staff.

e) *Furry Friends* training and support are available to staff, volunteers, and families during and following the conclusion of the project.

Funded Entity(ies):

Ageless Innovation

Results of the Project:

Final Results: The overarching goals and objectives of the program were to enrich the lives of Wisconsin skilled nursing facility residents living with dementia with the *Furry Friends Project.* The goals of the project are to 1) improve the quality of life of residents living with dementia, through the stated objectives, improve the quality of life of residents living with dementia by 20% and reduce the incidence of depressive symptoms by 20%. The project performed well both quantitatively and qualitatively (i.e., met or exceeded goals) as measured with the Resident Mood/Quality of Life Assessment outcome survey. It also demonstrated sustained and consistent improved quality of life through observations of increased positive emotional status and reduction in depressive symptoms. Overall, improved quality of life of 32% (exceeded

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Wisconsin

WI CMP Funds Expended for Administrative Uses in CY 2025: $509.08
WI CMP Funds Expended for Emergency Uses in CY 2025: $0.00
WI Active CMP Funded Projects in CY 2025: 3

stated goal of 20%); positive emotional status increased 37%; reduction in depressive symptoms was observed to decrease over the duration of the project by 27%. Feedback provided by a facility, "I have a resident (in my study) who has a dog, whom she LOVES! She puts her dog on her walker and takes her dog for a walk throughout the facility every day. Walking every day is great exercise for my resident, but she is walking with the sole purpose of taking her dog for a walk. We feel my resident would not be taking a walk everyday if it was not for her dog." And "We really enjoy our companion pets. It's amazing to see how interactive and responsive our residents are with their pets and how much they love them. Our companion pets have brought so much quality of life back to our residents. Thank you for including our facility in your grant." Challenges and Lessons Learned: The lessons learned in the inaugural *Furry Friends Project* in Louisiana helped inform an improved design and implementation of the *Furry Friends Project*. The primary change from the inaugural Louisiana *Furry Friends Project* was to shorten the project from a two-year project to a one-year project. The protracted time period of a two-year period was overkill when persistent utilization or interaction with robotic companion pets and demonstration of their benefit could be established in a one-year project. With respect to the Wisconsin *Furry Friends Project*, the most important lesson learned was that the project has to account for facility staff turnover both going into the project, and during the project. The program aims to develop and nurture relationships with the Nursing Home Administrators (NHAs) and project community leaders (e.g., Activities Directors) at the participating communities, but it is recognized that turnover within these two positions is frequent. Therefore, the program has increased the frequency of communications with the participating communities, prior to and during the project. Program personnel monitor for email bounce backs or other indicators that there may have been a change in staff and conduct proactive outreach when needed. They have also used new methods of phone outreach to obtain updated contact information and ensure that replacement staff are knowledgeable and enthusiastic participants in the *Furry Friends Project*. Changes in leadership can disrupt communication flow, data collection processes, and impact continuity of program knowledge. In response, the program has reinforced the importance of proactive staff turnover education and encouraged participating communities to maintain updated documentation outlining project expectations, designated contacts, and utilization protocols. Communities are encouraged to retain program materials within their operational binders to ensure accessibility in the event of staffing changes. Additionally, the frequency of follow-up communications has increased when engagement patterns shift or responses lapse. These adjustments are intended to mitigate disruption caused by staff turnover and ensure continuity of implementation and reporting moving forward.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

State Civil Money Penalty Reinvestment Projects Funded in Calendar Year (CY) 2025
Dallas Long-Term Care Location

Arkansas

AR CMP Funds Expended for Administrative Uses in CY 2025: $0.00
AR CMP Funds Expended for Emergency Uses in CY 2025: $0.00
AR Active CMP Funded Projects in CY 2025: 0

The state had no CMP-funded projects in calendar year 2025.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Louisiana

LA CMP Funds Expended for Administrative Uses in CY 2025: $190,752.65

LA CMP Funds Expended for Emergency Uses in CY 2025: $0.00

LA Active CMP Funded Projects in CY 2025: 11

Project Title: Eldergrow GARDEN: Garden Access Responds to Diagnosis and Environmental Needs

Unique Identifier: LA-1221-PHC-892

Project Duration: 07/01/2022 to 06/30/2025

Total Amount of CMP Funds Approved for this Project: $417,461.49

Total Amount of CMP Funds Expended During CY 2025 for this Project: $37,233.11

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) Paramount Healthcare Consultants aims to implement the *Eldergrow GARDEN* project in nine skilled nursing facilities (SNFs), bringing nature indoors for the SNF residents with mobile, indoor therapeutic sensory gardens and therapeutic horticulture training classes.

b) The project includes an indoor therapeutic sensory garden, facility staff training, bi-monthly horticultural classes led by professional trainers, and recommendations for additional engagement opportunities. It strives to reach an attainable goal of 80% physical and emotional engagement in the gardens by measuring the wellness categories of socialization, sensory stimulation, cognitive stimulation, motor skills, spatial awareness, and creative expression during each session.

c) The project will allow SNF residents to nurture life and feel a sense of purpose. It aims to reduce boredom, isolation, and depression while engaging with the gardens. These indoor gardens are at standing height, allowing residents to enjoy themselves regardless of weather or mobility challenges.

d) The project will provide a positive program to support staff with a quality engagement activity for the SNF residents to enjoy.

e) SNF staff function as facilitators to encourage residents' engagement and a program to encourage family members to be engaged with their loved ones in the SNF.

Funded Entity(ies):

Paramount Healthcare Consultants

Louisiana

LA CMP Funds Expended for Administrative Uses in CY 2025: $190,752.65

LA CMP Funds Expended for Emergency Uses in CY 2025: $0.00

LA Active CMP Funded Projects in CY 2025: 11

Results of the Project:

Resident participation in the program grew by 111% since the project's launch, supported by 1,026 horticultural sessions that engaged an average of 156 residents each month. Across the nine skilled nursing facilities (SNFs), 98% of residents met key wellness goals, including creativity, cognition, motor skills, sensory stimulation, socialization, and spatial awareness, with nearly all reporting improved or sustained emotional well-being through individual and group gardening activities.

Project Title: It's Never Too Late (iN2L) iNSIGHT Project

Unique Identifier: LA-1221-iNL-893

Project Duration: 07/01/2022 to 06/30/2025

Total Amount of CMP Funds Approved for this Project: $758,918.09

Total Amount of CMP Funds Expended During CY 2025 for this Project: $103,036.58

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The *It's Never Too Late (iN2L) iNSIGHT Project* aims to improve the quality-of-life and decrease social isolation of residents in 15 skilled nursing facilities (SNFs).

b) It will enable SNFs to provide personalized life-enriching, re-engaging, and redirecting activities to residents by creating resident profiles for 80% of residents, obtaining quality of life (QOL) surveys for 20% of the residents, and utilizing engagement technology to increase resident involvement in activities by 20%.

c) Improve the quality of life, decrease social isolation among residents, offer an improved connection to family and friends, and increase participation in activities through technology.

d) Incorporating technology and resources into daily routines and activities will improve the quality of life for the residents involved.

e) SNF staff

Funded Entity(ies):

iN2L (It's Never Too Late)

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Louisiana

LA CMP Funds Expended for Administrative Uses in CY 2025: $190,752.65

LA CMP Funds Expended for Emergency Uses in CY 2025: $0.00

LA Active CMP Funded Projects in CY 2025: 11

Results of the Project:

Usage of the engagement technology increased by 70% across the 15 skilled nursing facilities (SNFs), helping advance project goals to improve quality of life and reduce resident isolation. Facilities exceeded all core objectives, completing quality-of-life surveys for an average of 25% of residents, surpassing the 20% target, and creating resident profiles for 83% of their census, above the 80% goal. Activity participation also rose significantly, with a 31% increase from baseline, well above the 20% improvement target.

Project Title: SNFClinic

Unique Identifier: LA-0222-LTCC-915

Project Duration: 10/01/2022 to 09/30/2025

Total Amount of CMP Funds Approved for this Project: $738,500.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $140,600.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The *SNFClinic* project aims to provide comprehensive training to staff in 25 skilled nursing facilities (SNFs) through a centralized technology-based system encompassing training, staff management, and resident care resources. Preference is given to 25 lower-star-rated SNFs.

b) The program aims to improve the quality of person-centered care. At the start of the project, baseline data will be collected using each facility's most recent annual survey results and CMS-published quality measures. Throughout the grant period, the project will measure progress against this baseline to evaluate improvements in four key areas: 1. Reduction in Survey Deficiencies: Compare the number of deficiencies cited during the grant period to each facility's baseline survey to quantify reductions. 2. Improvement in Scope and Severity of Citations: Use CMS's scope and severity index to measure changes in the seriousness of survey citations relative to baseline levels. 3. Improved Compliance Through Higher Plan of Correction (POC) Acceptance Rates: Track and compare the acceptance rate of initial Plans of Correction during the project to the acceptance rate prior to implementation. 4. Enhanced Quality of Care Through Quality Measure Performance: Monitor CMS Minimum Data Set (MDS) based quality measures (QMs) quarterly and compare each quarter's results to the pre-implementation baseline to quantify improvements in resident outcomes and facility quality ratings. Quality Measures include QM-401 Percentage of long-stay residents whose need for

Louisiana

LA CMP Funds Expended for Administrative Uses in CY 2025: $190,752.65
LA CMP Funds Expended for Emergency Uses in CY 2025: $0.00
LA Active CMP Funded Projects in CY 2025: 11

help with daily activities has increased, QM-406 Percentage of long-stay residents with a catheter inserted and left in their bladder, QM-410 Percentage of long-stay residents experiencing one or more falls with major injury, QM-419 Percentage of long-stay residents who received an antipsychotic medication, QM-434 Percentage of short-stay residents who newly received an antipsychotic medication, QM-451 Percentage of long-stay residents whose ability to move independently worsened, QM-453 Percentage of high risk long-stay residents with pressure ulcers, QM- 471 Percentage of short-stay residents who made improvements in function, QM-521 Percentage of short stay residents who were hospitalized after a nursing home admission, QM-522 Percentage of short stay residents who had an outpatient emergency department visit, QM-551 Number of hospitalizations per 1,000 long stay residents days, QM-552 Number of outpatient emergency department visits per 1,000 long stay resident days.

c) Improves the quality of life and care for skilled nursing facility residents.

d) Provides staff and management resources.

e) SNF staff

Funded Entity(ies):

Long-Term Care Consultants, LLC

Results of the Project:

Across all four goals, the project demonstrated targeted improvements but also significant variability. Approximately one-third of facilities improved in key areas, while more than half experienced increases in deficiencies or declines in resident outcomes. Data gaps limited full evaluation in several areas, but the results provide a clear picture of system-wide performance trends. 1. Reduction in Survey Deficiencies (tags): Survey tags measure the number of regulatory deficiencies cited. Across the project: Average tag decrease: –3.6; Average tag increase: +5.3; First Recertification: 52% decreased tags, 40% increased, 8% no change; Second Recertification: 57% increased, 29% decreased, 14% no data; Third Recertification: 56% increased, 33% decreased, 44% no data. Early improvements were common, but increases became more frequent in later cycles, and increases were larger in magnitude than decreases. 2. Improvement in Scope and Severity of Citations (Points): Points measure the seriousness of deficiencies. Across the project: Average point decrease: –19.5, Average point increase: +52.7, Overall: ~38% improved; ~52% declined; ~3% no change; ~7% insufficient data; First Recertification: 48% decreased, 52% increased; Second Recertification: 29% decreased, 57% increased, 14% no data; Third Recertification: 33% decreased, 44% increased, 44% no data. Severity increases were more common and significantly larger

Louisiana

LA CMP Funds Expended for Administrative Uses in CY 2025: $190,752.65
LA CMP Funds Expended for Emergency Uses in CY 2025: $0.00
LA Active CMP Funded Projects in CY 2025: 11

than decreases. 3. Improved Compliance Through Plan of Correction (POC) Acceptance. Among facilities with usable data: 44% improved (fewer days to acceptance), 28% worsened; 28% insufficient baseline data, 0% no change. Facilities with complete data generally showed improved POC efficiency, though missing data limited system-wide conclusions. 4. Enhanced Quality of Care Through Quality Measure (QM) Performance: Quality Measures reflect resident outcomes and are central to evaluating person-centered care. They include indicators such as falls with major injury, antipsychotic use, rehospitalizations, Emergency Department visits, pressure ulcers, and functional improvement. Overall QM Performance Across All Measures: 33% of facilities improved, 52% declined, 10% showed no change, 30% had no data, or data was insufficient. Patterns of Improvement: Facilities showing improvement demonstrated meaningful reductions in: Short-stay ED visits (QM-522): –8.60, Short-stay rehospitalizations (QM-521): –6.99, Long-stay antipsychotic use (QM-419): –5.58. Declines were more common and often larger: Long-stay antipsychotic use (QM-419): +9.37, Short-stay rehospitalizations (QM-521): +9.77, Short-stay ED visits (QM-522): +8.04. Stability and No-Change: 10–15% of facilities showed no change in measures such as QM-406, QM-407, QM-551, QM-552. Insufficient or No Data: 20–30% of facilities lacked sufficient data for several QMs. Four QMs had no data across the cohort: QM-401, QM-451, QM-453, QM-471. QM performance showed the greatest variability. While some facilities achieved meaningful improvements, most experienced declines in key resident outcomes, and data gaps limited full evaluation. 5. Training and Education Module Completion: Training supports person-centered care by strengthening staff knowledge and competency. Training Completion Summary: 181,186 modules assigned, 115,063 completed, Overall completion rate: 64%. Module Completion by Type: Inservice Training: 100% of facilities, 101,575 modules (average 4,063 per facility). Training Modules: 96% of facilities, 9,796 modules (average 408 per facility). Policies and Procedures: 56% of facilities, 3,248 modules (average 232 per facility). Other modules (Continuing Education Units (CEUs), competencies, survey, What If, QAPI) were completed by smaller subsets. The volume of completed modules reflects strong engagement in staff development, though the 64% completion rate indicates that many facilities were unable to complete all assigned content.

Project Title: Eversound Resident Engagement and Interaction Project

Unique Identifier: LA-0722-EVER-986

Project Duration: 01/01/2023 to 12/31/2025

Total Amount of CMP Funds Approved for this Project: $514,093.33

Total Amount of CMP Funds Expended During CY 2025 for this Project: $90,838.35

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Louisiana

LA CMP Funds Expended for Administrative Uses in CY 2025: $190,752.65
LA CMP Funds Expended for Emergency Uses in CY 2025: $0.00
LA Active CMP Funded Projects in CY 2025: 11

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The project aims to help offset social isolation in 19 skilled nursing facilities (SNFs) during COVID-19 precautionary distancing, enabling residents to stay engaged while being safely apart by delivering sounds directly and without distraction into the ears of those with hearing deficiencies or who lack focus due to dementia. Eversound is an engagement modality that eases the consequences of hearing impairment.

b) The project aims to increase residents' engagement in group and one-on-one activities and improve the quality of life for all participating communities by reducing social isolation and mitigating the impact of hearing and sensory processing impairments on well-being. The measurements of success include increasing the Eversound amplification system usage from one to three times per week by mid-project. Increase accessibility for 1:1 interactions (e.g., family visits, therapy appointments, care planning sessions, and telehealth visits) for those residents who are hard of hearing by offering and using Eversound. Increase resident-reported or observed quality of life indicators by 20% by the completion of the project. SNF staff will conduct the quarterly survey with 10% of the average daily census for that quarter, providing at least five survey responses per quarter on questions regarding resident engagement and sentiment towards Eversound as an engagement tool.

c) The program aims to enhance auditory health by providing an accessibility tool to mitigate the effects of social isolation and increase engagement with the care team, fellow residents, and family members.

d) Benefits include providing staff with an accessible intervention that can support residents experiencing hearing loss or psychosocial distress and offer overall quality of life improvement for residents.

e) SNF staff, family, and friends

Funded Entity(ies):

TouchTown, Inc., formerly known as Headphone Events Inc. (dba Eversound)

Results of the Project:

Across the 20 participating nursing facilities, 94% of residents surveyed used the engagement equipment at least once per week, with 35% using it four or more times weekly. More than half of residents (52%) reported increased activity engagement, supported through 1:1 staff interactions, group and individual

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Louisiana

LA CMP Funds Expended for Administrative Uses in CY 2025: $190,752.65
LA CMP Funds Expended for Emergency Uses in CY 2025: $0.00
LA Active CMP Funded Projects in CY 2025: 11

activities, and visits with family and friends. Monthly materials and engagement ideas were provided to each facility, helping boost participation and enhance the overall quality of the program.

Project Title: Facility Emergency Preparedness Solution

Unique Identifier: LA-1022-LDH-1028

Project Duration: 11/01/2023 to 10/31/2026

Total Amount of CMP Funds Approved for this Project: $53,418.20

Total Amount of CMP Funds Expended During CY 2025 for this Project: $21,367.28

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The *Facility Emergency Preparedness Solution* project aims to modernize current procedures while maintaining compliance with all state laws by transforming the design of its current Facilities Emergency Preparedness Survey Plan into an electronic, all-encompassing solution to be used by all nursing homes in the State of Louisiana to report required Emergency Preparedness Plans. In addition, the proposed solution would capture any changes to the facility's status before, during, and after disaster events.

b) Serve as data analytics services that can meet the ever-changing programmatic needs for insights into these Emergency Preparedness Plans and possible quick solutions to evolving emergent situations. Accomplishing development, testing, and training milestones to streamline skilled nursing facility (SNF) emergency preparedness efforts. Measurement and evaluation of this project will be conducted by a skilled nursing facility (SNF) satisfaction survey, successfully meeting the following metrics:

- 0% of SNF satisfaction rating of “Good” for simplification in the submission process of SNF emergency preparedness plans.
- 90% of nursing facilities will report a reduced time in submission as compared to the current system.
- 100% of nursing homes are trained and can use the online system.

Louisiana

LA CMP Funds Expended for Administrative Uses in CY 2025: $190,752.65
LA CMP Funds Expended for Emergency Uses in CY 2025: $0.00
LA Active CMP Funded Projects in CY 2025: 11

c) It will ensure the health and safety of residents in several ways, including the early recognition and allocation of resources, real-time communication, and location-based identification of residents' needs and responses.

d) Include features that benefit nursing homes and residents during each phase of an emergency event by enhancing safety and communication among all parties.

e) Family members, the Louisiana Department of Health (LDH), SNF staff, and other state agencies will participate in piloting the solution before implementation.

Funded Entity(ies):

Louisiana Department of Health, Health Standards Section

Results of the Project:

Phase I of the *Facility Emergency Preparedness Solution* project is complete, statewide development and testing continue as all skilled nursing facilities will use the system. Phase II is underway, integrating advanced features that link emergency plans with real-time event tracking and impact data, which must be finalized before large-scale training begins. Internal reviewers have been trained and will soon begin reviewing plans, though facilities cannot submit plans until the system enters production later this year. A final statewide submission deadline is still pending while several technical programming matters remain under discussion.

Project Title: Furry Friends Project

Unique Identifier: LA-1122-AIN-1034

Project Duration: 05/01/2023 to 04/30/2025

Total Amount of CMP Funds Approved for this Project: $455,079.86

Total Amount of CMP Funds Expended During CY 2025 for this Project: $10,081.33

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The *Furry Friends Project* aims to implement the program in 51 skilled nursing facilities (SNFs), providing a practical alternative to traditional pet therapy. Such benefits include non-pharmacological

Louisiana

LA CMP Funds Expended for Administrative Uses in CY 2025: $190,752.65
LA CMP Funds Expended for Emergency Uses in CY 2025: $0.00
LA Active CMP Funded Projects in CY 2025: 11

interventions for distressed residents, a sense of comfort that encourages better interactions, and fosters a sense of joy and well-being while providing respectful, person-centered, and individualized care for those who have benefited from lifelong interactions with pets, such as dogs and cats.

b) The project aims to improve the quality of life for residents with dementia by 20% and reduce the incidence of depressive symptoms by 20% by collaborating with care staff in the 51 SNFs. Nursing home staff will complete a Resident Mood/Quality of Life Assessment survey to measure outcomes.

c) The *Furry Friends Project* will benefit residents by providing a sense of fulfillment and comfort, increasing social interactions, spontaneous conversations, attention to activities, and interest in being more involved with their surroundings. For residents, brushing, petting, and talking to their pup or cat restores a sense of purpose and self-worth, which are important factors in reducing anxiety and depression. Interactions with pets can also elevate mood and provide relaxation.

d) The nursing home will benefit by improving well-being and reducing anxiety and distressed resident behaviors by using an alternative to pet therapy, without the safety concerns and difficulties associated with keeping a live animal on site.

e) SNF staff

Funded Entity(ies):

Ageless Innovation

Results of the Project:

Across the 51 participating skilled nursing facilities (SNFs), residents received 1,220 robotic pups and 1,005 robotic cats, contributing to an average quality of life score of 3.65 that remained stable over two years with no decline in engagement or novelty effect, supported by more than 125 positive community stories. Residents interacted with their companion pets an average of 3.43 days per week, with 34% engaging four or more days, and spent an average of 3.13 hours per day with them, with over half reporting three or more hours of daily interaction. Emotional well-being indicators were consistently strong, with residents reporting high levels of feeling rested and relaxed (3.83), social enjoyment (3.76), joy and happiness (3.71), and energy or pep (3.48), demonstrating the sustained positive impact of robotic companion pets on daily life and emotional health.

Louisiana

LA CMP Funds Expended for Administrative Uses in CY 2025: $190,752.65

LA CMP Funds Expended for Emergency Uses in CY 2025: $0.00

LA Active CMP Funded Projects in CY 2025: 11

Project Title: Reducing the Incidence of Facility-Acquired Pressure Ulcers in Long-Term Care

Unique Identifier: LA-1223-LSU-1100

Project Duration: 04/01/2024 to 03/31/2026

Total Amount of CMP Funds Approved for this Project: $787,334.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $465,435.44

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The *Reducing the Incidence of Facility-Acquired Pressure Ulcers in Long-Term Care* project will provide education to staff in 80 skilled nursing facilities (SNFs) to reduce the rates of long-stay residents who acquire pressure ulcers (PrU's) in the facility.

b) The program delivers in-person pressure-ulcer (PrU) prevention training to all 80 participating facilities, focusing on preventive practices, reducing PrU formation, and strengthening staff understanding of systems and processes based on resident risk stratification. Key quality metrics, such as CMS Quality Measure #453 and facility-reported pressure ulcer (PrU) rates, are collected and analyzed before training and again three months afterward to assess effectiveness and sustainability. Post-training staff feedback is gathered and aggregated to measure satisfaction, identify common themes, and guide improvements to the education process. Follow-up evaluations are conducted three months after training to assess sustained practice changes, document facility-reported quality improvement efforts, and compile findings into interim and final reports for the state coordinator.

c) Improve the quality of care provided to residents at high risk for pressure ulcer development.

d) Reduce the incidence of facility-acquired pressure ulcers.

e) Facility staff

Funded Entity(ies):

Louisiana State University Health Sciences Center, Shreveport

Louisiana

LA CMP Funds Expended for Administrative Uses in CY 2025: $190,752.65

LA CMP Funds Expended for Emergency Uses in CY 2025: $0.00

LA Active CMP Funded Projects in CY 2025: 11

Results of the Project:

Across the 80 participating nursing home (NH), 99% of sites have received initial training, with 3,372 staff attending and 94% earning certificates of completion. All facilities trained during the month were well prepared, except for one nursing home, which declined both the scheduled training and attempts to reschedule. Three-month follow-up visits were completed for 90% of facilities, and early outcomes were strong: 79% of nursing facilities reported reductions in NH-acquired pressure ulcers, achieving an overall average decrease of 2.32% following training.

Project Title: Reducing Falls in Long-Term Care Facilities

Unique Identifier: LA-1223-LSU-1101

Project Duration: 03/01/2024 to 02/28/2025

Total Amount of CMP Funds Approved for this Project: $179,765.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $6,955.70

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The *Reducing Falls in Long-Term Care Facilities* project aims to provide on-site fall prevention education to the staff in 36 skilled nursing facilities (SNFs) to reduce the incidence of resident falls.

b) The program will provide fall preventive measures and reduce the occurrence of falls; increase staff understanding in areas of systems and processes that need to be addressed to reduce the fall risk of SNF residents. Key quality metrics, such as CMS Quality Measure #410 falls with major injury rates and facility reported fall rates, are collected and analyzed before training and again three months afterward to assess effectiveness and sustainability. Post-training staff feedback is gathered and aggregated to measure satisfaction, identify common themes, and guide improvements to the education process. Follow-up evaluations are conducted three months after training to assess sustained practice changes, document facility-reported quality improvement efforts, and compile findings into interim and final reports for the state coordinator.

c) The resident will benefit from reduced risk of falls.

d) The nursing home will benefit from a reduction in the incidence of falls with major injury.

e) Facility staff

Louisiana

LA CMP Funds Expended for Administrative Uses in CY 2025: $190,752.65
LA CMP Funds Expended for Emergency Uses in CY 2025: $0.00
LA Active CMP Funded Projects in CY 2025: 11

Funded Entity(ies):

Louisiana State University Health Sciences Center, Shreveport

Results of the Project:

Across the 36 skilled nursing facilities (SNFs), 100% received both the initial training and the three-month follow-up visit, with 1,565 staff attending and 93% earning certificates of completion. Three months after training, 64% of facilities showed a reduction in falls with major injury, contributing to an overall average decrease of 2.73% across all sites.

Project Title: Cathy's Healing Harp - Extension

Unique Identifier: LA-0524-CHH-1170

Project Duration: 08/01/2024 to 07/31/2027

Total Amount of CMP Funds Approved for this Project: $149,999.70

Total Amount of CMP Funds Expended During CY 2025 for this Project: $47,995.56

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) Cathy's *Healing Harp - Extension* project aims to provide live therapeutic music (LTM) at the bedside to individual nursing home residents in ten skilled nursing facilities, addressing negative consequences from feelings of isolation and loneliness.

b) The project will provide ten monthly live therapeutic music (LTM) sessions in each of the 10 participating facilities, delivered in person or virtually, to support residents' emotional and physical well-being by reducing loneliness, anxiety, depression, pain, and other symptoms through individualized bedside music. Measure resident outcomes by tracking the percentage who report improvements in key areas, including anxiety, pain, loneliness, breathing, sleep, and overall happiness or contentment. The program will collect facility feedback and resident-reported data to validate improvements in quality of life, mental health, and well-being for those receiving LTM sessions. Achieve a target outcome in which at least 90% of residents receiving LTM sessions report an improvement in their quality of life.

c) Providing therapeutic harp sessions as a psychosocial intervention improves the quality of life and well-being by providing relief from anxiety and pain.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Louisiana

LA CMP Funds Expended for Administrative Uses in CY 2025: $190,752.65
LA CMP Funds Expended for Emergency Uses in CY 2025: $0.00
LA Active CMP Funded Projects in CY 2025: 11

d) The project focuses on residents who are bed-bound, unable to attend group activities, and do not receive regular visitors.

e) Facility staff

Funded Entity(ies):

Catherine R. Anderson

Results of the Project:

Residents across the 10 skilled nursing facilities (SNFs) reported quality-of-life improvements, with 67% of all contracted sessions completed to date and 766 survey responses collected, 73% completed directly by residents and 27% by staff observation. Overall, 91% of residents reported improved quality of life after sessions, including significant relief from anxiety (95%), pain (71%), and loneliness (71%), along with better sleep (83%) and increased happiness (95%).

Project Title: Liquid Lifeline: Promoting Hydration in Long Term Care Residents

Unique Identifier: LA-1024-LSU-1217

Project Duration: 01/01/2025 to 07/31/2025

Total Amount of CMP Funds Approved for this Project: $24,885.43

Total Amount of CMP Funds Expended During CY 2025 for this Project: $24,868.09

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The project will be implemented in five skilled nursing facilities (SNFs) over a seven-month period aims to improve resident quality of life by training long-term care providers and staff on the risk factors and clinical signs of dehydration, proactive resident-centered interventions, and an actionable plan of risk mitigation, surveillance, and vigilance.

b) The success of the project will be measured by on-site clinical education to 50% of full-time long-term care providers at participating facilities on dehydration and clinical impact to residents using didactic instruction and interactive learning techniques, as well as increased knowledge of

Louisiana

LA CMP Funds Expended for Administrative Uses in CY 2025: $190,752.65
LA CMP Funds Expended for Emergency Uses in CY 2025: $0.00
LA Active CMP Funded Projects in CY 2025: 11

identification of high-risk resident clinical signs and symptoms as evidenced by self-evaluation post-training surveys for 80% of attendees.

c) Proper hydration provides improved quality of life for the nursing home residents as evidenced by effective kidney/bowel elimination, increased skin and soft tissue hydration, optimized care that is individualized to the resident, decreased incidence of adverse health events, and improved mental alertness to name a few benefits.

d) Improving resident hydration enhances overall quality of life and reduces preventable complications—such as hemodynamic instability, falls, urinary tract infections, and skin breakdown, lowering care complexity, hospitalization rates, and staffing strain while strengthening the facility's overall quality of care.

e) Facility staff

Funded Entity(ies):

Louisiana State University Health Sciences Center, Shreveport

Results of the Project:

All five skilled nursing facilities (SNFs) received both the initial training and the three and six-month follow-up visits, with 316 staff trained and 95% earning certificates of completion. Six-month outcomes showed meaningful clinical improvements, with 60% of facilities reporting reductions in pressure ulcers and falls, and 80% reporting reduced urinary tract infection (UTI) rates. All facilities actively used the training materials, with many locations training most of their staff and strengthening hydration practices. Each site implemented best practice strategies such as team-based hydration discussions, visual alerts, hydration carts, and added support from recreation and dietary staff, while some also introduced cup holders, larger mugs, and urine color charts to promote hydration awareness.

Project Title: Closing the Gaps in Eldercare Knowledge

Unique Identifier: LA-0525-ATI-1331

Project Duration: 07/01/2025 to 06/30/2026

Total Amount of CMP Funds Approved for this Project: $59,601.14

Total Amount of CMP Funds Expended During CY 2025 for this Project: $25,131.12

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

State Civil Money Penalty Reinvestment Projects Funded in Calendar Year (CY) 2025
Dallas Long-Term Care Location

Louisiana

LA CMP Funds Expended for Administrative Uses in CY 2025: $190,752.65
LA CMP Funds Expended for Emergency Uses in CY 2025: $0.00
LA Active CMP Funded Projects in CY 2025: 11

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of the *Closing the Gaps in Eldercare Knowledge* project is to improve the quality of care and quality of life of long-stay nursing home residents in 12 Louisiana skilled nursing facilities (SNFs) who have dementia or dementia-related conditions by providing *Dementia Live*®, an experiential learning program simulating cognitive and sensory impairments, giving participants real-life experience of living with dementia. Through the *Dementia Live*® program, participants are empowered with new tools for improved communication skills and care practices that can be implemented as they go about their work in the nursing home. These improved communication skills and care practices will help decrease resident behavioral symptoms that arise from dementia and dementia-related conditions and will help increase resident well-being.

b) Facility staff will meet defined competency benchmarks through the *Dementia Live* online course and REVEAL Aging training. Resident engagement goals will be demonstrated by at least 30% of participants, showing a positive response to *Compassionate Touch* and Flashback activities.

c) This project aims to educate long-term care workers about the fundamentals of caring for the nursing home residents, thereby improving the quality of life for those living in long-term care.

d) This project aims to educate long-term care workers about the fundamentals of caring for the nursing home residents, thereby improving the quality of life for those living in long-term care.

e) SNF staff are the primary participants, though family members and family councils may choose to take part as well in specific areas.

Funded Entity(ies):

AGE-u-cate Training Institute

Results of the Project:

All 12 skilled nursing facilities (SNFs) have been fully equipped with the Dementia Live Gear Pack, Sensory Kit, two sets of Flashback Reminiscence Cards, access to online coach resources, and guided implementation support. One-third of facilities registered for the November 2025 monthly project support meeting, and half received individualized assistance to address specific implementation needs. This early engagement reflects strong adoption of program materials and steady progress toward full implementation across all sites.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

State Civil Money Penalty Reinvestment Projects Funded in Calendar Year (CY) 2025
Dallas Long-Term Care Location

New Mexico

NM CMP Funds Expended for Administrative Uses in CY 2025: $23,599.00

NM CMP Funds Expended for Emergency Uses in CY 2025: $0.00

NM Active CMP Funded Projects in CY 2025: 3

Project Title: Workforce Solutions

Unique Identifier: NM-1022-NMHC-1029

Project Duration: 01/01/2023 to 12/30/2025

Total Amount of CMP Funds Approved for this Project: $431,084.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $143,694.80

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The *Workforce Solutions* project aims to collaborate with facilities to implement ideas and best practices designed to retain experienced individuals, collaborating with them to identify specific challenges and help develop solutions to the staffing crisis across New Mexico. Project performance will be measured by quarterly follow-up with all participating facilities. New Mexico Health Care Association (NMHCA) staff will monitor turnover and new hires and seek information on reactions to changes in incentives offered. After two full quarters of implementing ideas, facilities that are not on track to meet the three measurable goals will participate in a one-on-one analysis of their efforts, and different approaches will be applied. At the conclusion of year three, NMHCA will provide all facilities with a general written report highlighting the most successful retention methods, as well as a report discussing both successful and unsuccessful retention efforts in their facilities. Nursing home residents will benefit from the Workforce grant, which focuses on both the recruitment and retention of long-term caregivers, leading to a more stable workforce that will improve the quality of care and residents' quality of life.

b) The project goals for each facility are to decrease turnover in front-line staff by 10% annually during the program; to increase staff by 10% annually during the program to help facilities reach optimum levels; and to decrease survey citations related to staffing by 10% annually during the program.

c) The nursing home resident will benefit from care from consistent staff.

d) The nursing home will benefit by experiencing less staff turnover.

e) Not applicable

Funded Entity(ies):

New Mexico Health Care Association

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

New Mexico

NM CMP Funds Expended for Administrative Uses in CY 2025: $23,599.00
NM CMP Funds Expended for Emergency Uses in CY 2025: $0.00
NM Active CMP Funded Projects in CY 2025: 3

Results of the Project:

To gain insight into the staff of New Mexico skilled nursing facilities, New Mexico Health Care Association (NMHCA) and New Mexico Crisis Access Line (NMCAL) spoke with staff members from various departments. These staff members were chosen randomly as they went through their normal shift duties. Exit discussions were conducted with the Administrator and/or the Director of Nursing when available and the more serious concerns were shared. The positive aspects from the interviews were also shared and management was encouraged to begin to make changes in areas of concern and highlight the positive areas with all staff to push for more of that type of interaction/policy. In one instance, NMHCA/NMCAL reached out to regional management after leaving the facility to share the findings as it was at a critical point with staff. Leadership training and regional assistance were recommended. Written reports provided a generalized narrative that summarized the comments from staff. Comments were considered and individualized as well as generalized best practices were recommended. NMHCA/NMCAL hosted at least two leadership trainings each year designed to facilitate employee retention. *Staying Power: How to Keep Your Employees Longer* was presented on March 1, 2023, and had the following objectives. Discover current employee turnover trends and future staffing projections, uncover the real reasons employees leave most organizations and ways to encourage them to stay, learn ways to become a M.A.G.N.E.T. employer who attracts better applicants and keeps staff longer.
Enhancing Employee Experience to Drive Retention and Engagement, presented on August 24, 2023, and the presenter was Donna Cutting. “Successfully navigating the future of work means that we have to pay more attention to the employee experience. Employees first don’t mean residents last – it’s the foundation upon which extraordinary resident experiences are built. This high-energy, fun, and interactive keynote will provide you with a map for creating a culture of happy people who stay and serve your residents and guests with excellence. Let’s get real. Employee turnover was a challenge even before the pandemic. We can’t go back to practicing the same ineffective interventions as before. It’s time to go deep. Let go of the quick-fix approach to employee turnover and start creating a culture that makes people want to come to work. A culture that prioritizes respect, care, and inclusiveness and lets your team members know how much they matter. When you start treating employees like customers, you’ll find it easy to attract and retain the perfect people for your organization.” In January of 2024, three programs on Leadership and retention by Claudia S. Blumenstock were offered. *The Staff Experience That Can Make or Break Our Workforce: Keys to Recruitment and Retention; Is Anybody Listening? How Communication Can Create a Connected Workforce*; *No One Wants Pizza: A New Approach to Recruitment and Retention*. In August of 2024, the project offered two programs on staffing retention by Judy Salisbury. *Avoid Revolving-Door Whiplash: A Fresh Approach to Retention and Success and Building a Positive Work Environment*: *It Begins with Staff*. In February of 2025, three programs were offered on leadership and retention by Barry Moline. *Nursing*

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

New Mexico

NM CMP Funds Expended for Administrative Uses in CY 2025: $23,599.00
NM CMP Funds Expended for Emergency Uses in CY 2025: $0.00
NM Active CMP Funded Projects in CY 2025: 3

Home Leader (NHL) to Chief Executive Officer (CEO) – Distinguishing Yourself with the Mindset of a Leader; *Building Culture and Teamwork in a New Era of Engagement*; and *The Future of Work: Artificial Intelligence (AI), Teamwork, and Leadership*. *Think Like an Improviser at Work* by Mike McGuire was offered in August of 2025. Turnover in higher level management positions and changes in ownership provided the biggest barriers to success. This led to being unable to reach every facility. Of the 64 facilities targeted, approximately 14 were not visited. Several facilities declined to participate, and others were scheduled but Administrator changes caused cancellations.

Project Title: SNFClinic

Unique Identifier: NM-0424-LTCC-1140

Project Duration: 08/01/2024 to 07/30/2027

Total Amount of CMP Funds Approved for this Project: $253,980.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $77,605.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) Creation of facility-specific *SNFClinic* project accounts for each of the facilities, including the loading of all facility personnel into the SNFClinic system. This involves overseeing the collection and input of employee names, telephone numbers, email addresses, and departmental information. Training of key staff on using SNFClinic. Customization of each facility's SNFClinic account on issues such as, without limitation, (a) monthly training calendars; (b) new employee onboarding training services; and (c) creating and uploading facility-specific training modules. Monthly access to an unlimited number of staff at the facilities to all SNFClinic features. Ongoing facility staff training on SNFClinic as needed. Ongoing facility-specific customization as needed. Ongoing customer service. Development and release of expanded training modules and nursing and administrator continuing education units (CEUs) as approved by the appropriate governing boards. Ongoing system enhancement, as needed. Ongoing system design, updates, and maintenance.

b) 1. On average, the participating facilities will improve in thirty percent (30%) of their CMS Quality Measures; and 2. Fifty percent (50%) of the participating facilities' Quality Measure star ratings will improve.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

New Mexico

NM CMP Funds Expended for Administrative Uses in CY 2025: $23,599.00
NM CMP Funds Expended for Emergency Uses in CY 2025: $0.00
NM Active CMP Funded Projects in CY 2025: 3

c) SNFClinic is an online electronic learning management system (eLMS) that provides clinical and in-service staff training and resident care resources designed to directly improve the quality of care provided at skilled nursing home facilities.

d) Reduce number of survey inspection scores, reduction/improvement in health inspection scores, improvement in at least one MDS (Minimum Data Set) category. Improve overall star rating.

e) Not applicable

Funded Entity(ies):

Long-Term Care Consultants, LLC

Results of the Project:

Challenges: Delays in publishing CMS quality data have prevented Long Term Care Consultants (LTCC) from reporting on project progress. On August 15, 2025, CMS announced that it was freezing its publication of nursing home performance data to ensure data accuracy after behind-the-scenes technical changes to its Care Compare website. As a result of this freeze, project data is only available as of March 31, 2025. The delays created by CMS's data freeze have been exacerbated and extended by the federal government shutdown that began on October 1, 2025. November 1, 2025, through January 31, 2026, performance: Goal 1 performance to date is exceptional. All of the facilities improved in at least two of the measured Minimum Data Set (MDS) quality measures (QMs). On average, the facilities improved in 60.7% of the measured MDS QMs. Goal 2 performance: Ten of the facilities (58.8%) improved their QM star rating. Three of the facilities (17.6%) had their QM star rating go down. Four of the facilities (23.5%) had no change in the QM star rating. While the retention rate is well below the national average, it increased over the project period, peaking at the end of 2024, and dropping slightly at the end of 2025 but still 3.7 % higher than prior to the project. Year 1: Retention in 2023 declined from 2022 by 0.4, missing the goal of 5.26 but it was significantly less than national average of 4.5. Year 2: Retention in 2024 increased by 5.3%, slightly exceeding the 10% goal, while the national average retention rates only increased by 6.2%. Year 3: Retention in 2025 decreased 1.6, missing the 10% goal. This was similar to the drop of 1.2 at the national average. The total retention rate increase over the three years was 3.3, or 6.2%. This did not meet the stated goal of 10% year over year, but the national average over the three years decreased by 1.9 or 3.6%, so New Mexico's retention did improve. In the third year, there were a significant number of facilities that changed ownership, which contributed to turnover. Quality of care is directly and profoundly related to consistency of staffing. High staff turnover and overreliance on temporary, per-diem workers severely disrupt care, while consistent teams lead to better clinical outcomes, fewer errors, and higher patient

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

New Mexico

NM CMP Funds Expended for Administrative Uses in CY 2025: $23,599.00
NM CMP Funds Expended for Emergency Uses in CY 2025: $0.00
NM Active CMP Funded Projects in CY 2025: 3

satisfaction. Year 1: Quality of care citations declined from 2022 to 2023 by 7.5%, missing the goal by 2.5%. Year 2: Quality of care citations in 2024 decreased by 13.51%, exceeding the 10% goal. Year 3: Quality of care citations in 2025 decreased 21.88, doubling the 10% goal. Quality of care citations dropped 37.5% from the end of 2022 through the end of 2025, exceeding the goal overall.

Project Title: Targeted Candida auris MDRO Infection Control Readiness in Long-Term Care

Unique Identifier: NM-0624-ICCN-1177

Project Duration: 10/07/2024 to 07/30/2025

Total Amount of CMP Funds Approved for this Project: $244,998.14

Total Amount of CMP Funds Expended During CY 2025 for this Project: $0.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The *Targeted Candida auris MDRO (Multi-Drug Resistant Organism) Infection Control Readiness in Long-Term Care* project aims to address the preparedness of nursing homes in New Mexico to respond to the identification of C. auris cases, prevent transmission, and protect their resident population from a highly resistant pathogen associated with high mortality.

b) There are three project goals, the first is to educate facilities on the nature and risk of C. auris infection and colonization. The second goal is to assist facilities in evaluating their risk and being able to recognize and respond effectively in the event of a C. auris outbreak, understanding that a single case represents an outbreak. And thirdly, to assist nursing home facilities in developing a response plan should C. auris be identified or suspected in their resident population. At the conclusion of the on-site assessment, the facility Infection Preventionist or designee, and leadership will be able to assess their level of risk and preparedness based on quantifiable adenosine triphosphate (ATP) data collected during rounding. The perceived level of risk and preparedness will be measured using a Likert Scale, with pre- and post-assessment comparison. At the conclusion of the on-site assessment, the facility Infection Preventionist or designee, and leadership will be able to identify at least two opportunities to mitigate the risk of C. auris transmission in the event of an outbreak. Measured using an exit survey with a written response. Facilities will have a written plan for managing a C. auris outbreak within 30 days of the facility-specific on-site risk assessment

New Mexico

NM CMP Funds Expended for Administrative Uses in CY 2025: $23,599.00
NM CMP Funds Expended for Emergency Uses in CY 2025: $0.00
NM Active CMP Funded Projects in CY 2025: 3

measured via a follow-up review and verification of the completed plan. Measured using a binary response (completed/not completed).

c) Addressing the risk of C. auris in nursing homes, and assisting facilities to respond quickly, and effectively control an outbreak when cases are identified or suspected, directly addresses resident safety and quality of life.

d) Upon completion of this project, participating facilities will have a tangible resource in the form of a written plan for future reference. Staff will be better prepared to respond to a potential C. auris outbreak.

e) Not applicable

Funded Entity(ies):

ICCNM Foundation (Infection Control Consultants of New Mexico)

Results of the Project:

A total of 49 onsite assessments were completed. Assessments included pre- and post-surveys measuring perceived risk and level of preparedness regarding C. auris and adenosine triphosphate (ATP) measurements. Forty-nine facilities received a binder containing resources for the prevention and management of C. auris, including a template for a written C. auris plan that could be personalized to the facility. Forty-nine facilities received a written report with observed findings and recommendations to mitigate risk for C. auris transmission. Forty-nine final facility review interviews scheduled. Of the 49 scheduled follow-up interviews, 57% were completed. 21 facilities did not show to their scheduled review. Sixty-four percent (64%) of the facilities had a verified written C. auris plan. Data from the pre- and post-assessment surveys indicate that the first two goals of the project were achieved. The following charts highlight the shift in response distribution measuring awareness regarding C. auris as a multi-drug resistant organism (MDRO) of concern and the perceived preparedness of the facility to care for infected or colonized residents and skilled nursing patients. Following the assessment and provision of education regarding the significance of C. auris, respondents reported a greater awareness of C. auris as an MDRO and in the likelihood that cases could be admitted or identified in their facility. In addition, facilities also reported having an increased level of preparedness to provide care, with no facility reporting not being prepared, and an increase from 2% to 18% among those identifying as very prepared. This project successfully met the deliverables of the project. Although, a number of facilities did not complete a written plan, one of the project goals, those responsible for infection prevention and control, and facilities leaders had a measurable increase in their awareness of C. auris and potential for outbreaks in their facilities and

New Mexico

NM CMP Funds Expended for Administrative Uses in CY 2025: $23,599.00
NM CMP Funds Expended for Emergency Uses in CY 2025: $0.00
NM Active CMP Funded Projects in CY 2025: 3

their level of preparedness to appropriately manage patients and residents with C. auris and MDRO of concern. Maintaining safe care environments relies on knowledge and awareness of these challenging organisms and is critical in maintaining safe care to vulnerable populations such as those in long-term care (LTC) and skilled nursing facility (SNF) healthcare settings. The use of adenosine triphosphate (ATP) as a quantitative measure of the commonly encountered equipment and items within the care environment was an effective tool to highlight area areas where additional attention to the cleaning and disinfection practices were required.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

State Civil Money Penalty Reinvestment Projects Funded in Calendar Year (CY) 2025
Dallas Long-Term Care Location

Oklahoma

OK CMP Funds Expended for Administrative Uses in CY 2025: $256,115.00
OK CMP Funds Expended for Emergency Uses in CY 2025: $0.00
OK Active CMP Funded Projects in CY 2025: 0

The state had no CMP-funded projects in calendar year 2025.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Texas

TX CMP Funds Expended for Administrative Uses in CY 2025: $211,415.70

TX CMP Funds Expended for Emergency Uses in CY 2025: $0.00

TX Active CMP Funded Projects in CY 2025: 28

Project Title: Resident Engagement and Calming Technology - REACT Project

Unique Identifier: TX-1021-MRC-865

Project Duration: 02/01/2022 to 01/31/2025

Total Amount of CMP Funds Approved for this Project: $45,202.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $0.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The project aims to ensure residents enjoy a comfortable setting rich with activities and sensory stimulation. This program will further enhance the environment for Mirador residents through technology offered by It's Never Too Late (iN2L).

b) The iN2L system will be used 1) to improve the quality of life for residents by increasing participation in both individual and group activities and by enhancing the resident-centered nature of activities by offering more specialized opportunities based on resident interests, cultural values and religious and spiritual needs; and 2) to enhancing the effectiveness of restorative program by improving independence and safety in activities of daily living (ADLs) such as mobility, dressing, hygiene, et cetera. and reducing incidents of agitation and aggression through engagement with technology.

c) iN2L allows residents living with dementia or other chronic or temporary medical conditions to stay engaged and connected through thousands of computer-based experiences and life-enriching activities.

d) Additionally, the system can be used in rehabilitation and ongoing restorative programs designed to increase residents' ability to provide for themselves and function as independently as possible.

e) Not applicable

Funded Entity(ies):

MRC Senior Living Corpus Christi dba MRC Mirador

Results of the Project:

Project results: Goal #1: To improve the quality of life and satisfaction among residents. * Indicators include 12-month averages on the following metrics from WeCare Connect Resident Satisfaction Surveys - three-

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Texas

TX CMP Funds Expended for Administrative Uses in CY 2025: $211,415.70
TX CMP Funds Expended for Emergency Uses in CY 2025: $0.00
TX Active CMP Funded Projects in CY 2025: 28

year averages. 1) Overall Resident Satisfaction = 86.7 with peer benchmark of 81.6. 2) Satisfaction with Life Enrichment Services = 98.1 with peer benchmark of 92.2. Goal #2: To support resident improvements during rehab therapy and restorative programs. * Measured using information from the Quality Measures on CMS Nursing Home Compare website - three-year averages. 1) the percentage of long-stay residents needing increased activities of daily living (ADL) help = 23% with Texas average of 17% (lower is better). 2) the Improvement in Mobility for short-stay residents = 74% with Texas average of 68% (higher is better). Lessons learned: Having a desired outcome of decreasing the need for ADL help in long-stay residents was not supported during the project. Among long-stay residents at Mirador, 23% saw an increase in need for daily help with a state average of just 17%. It is speculated that a more concentrated and systematic approach for use by restorative aides was needed in order to see more positive outcomes. Use of the systems with short-stay residents participating in rehabilitation did produce solid results. The systems enhanced the ability of therapists to add variety and greater creativity to individualized therapy programs. Because the systems are technologically based, there is always the chance the machines will occasionally malfunction. To avoid as much downtime as possible, it is imperative that community teams are coached early in the project how to access technical support for the systems as easily as possible. Engage leaders who are consistently talking about and promoting the use of the systems are key to project success. Challenges: The facility's Administrator who had been engaged with this project from its inception left employment with the community in October 2024. Following his departure, use of the systems dropped off in the final quarter of the project reinforcing importance of the on-going need for an engaged leader promoting consistent use of the systems.

Project Title: iN2L (It's Never Too Late)

Unique Identifier: TX-1121-SLP-872

Project Duration: 02/15/2022 to 02/14/2025

Total Amount of CMP Funds Approved for this Project: $1,361,398.18

Total Amount of CMP Funds Expended During CY 2025 for this Project: $0.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The increase in social isolation and depression experienced during the pandemic highlighted the need for improved activity programs that can be easily adapted from group activities to individual activities, equally engaging the mind, interests, and providing social interaction and connection to the

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Texas

TX CMP Funds Expended for Administrative Uses in CY 2025: $211,415.70
TX CMP Funds Expended for Emergency Uses in CY 2025: $0.00
TX Active CMP Funded Projects in CY 2025: 28

outside world. SLP wishes to align our activity programming with the Health and Human Services (HHS) Healthy People 2030 goal of increasing the proportion of nursing home residents with physical or cognitive health problems who engage in physical activity in their 49 nursing facilities.

b) The goal of the project is to improve care and quality of life for all residents through engagement in physical and cognitive exercise using the It's Never Too Late (iN2L) programs to improve declines in activities of daily living (ADLs) and decrease the prevalence of depression and psychotropic medication use.

c) The *iN2L* project directly benefits nursing home residents by providing access to technology, enabling increased connection with friends and family. The *iN2L* project will provide opportunities for residents to experience activities in group or individual settings, with or without staff assistance, thereby increasing their independence. The program and activities can accommodate and engage residents with or without cognitive impairment. With the use of the iN2L physical activity programs, residents will have increased opportunities to participate in movement and exercise, promoting overall health and well-being.

d) With the implementation of *iN2L*, the activity programming will be enhanced, expanded, and allow for improved customization to accommodate each resident's individual needs.

e) Not applicable

Funded Entity(ies):

SLP Operations LLC

Results of the Project:

Project results: Quality Measure (QM) (long-stay) Help with Activities of Daily Living (ADLs), First quarter of 2024 (SLP-all centers average) is 19.51%, which is lower than the state average of 21.10%. However, it is above the national average which is 18.00%. QM (long-stay) Received Antipsychotic Medication is at 9.23%, which is higher than the state average which is 8.40% and lower than the national average of 20.10%. Lessons learned: Playing music all day makes the residents happy; continuous training is needed with the center's staff; and the facility must stay on top of equipment issues. Challenges: Internet issues and some machines with software or hardware issues were encountered, which meant working with iN2L to get the machines fixed.

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State Civil Money Penalty Reinvestment Projects Funded in Calendar Year (CY) 2025
Dallas Long-Term Care Location

Texas

TX CMP Funds Expended for Administrative Uses in CY 2025: $211,415.70

TX CMP Funds Expended for Emergency Uses in CY 2025: $0.00

TX Active CMP Funded Projects in CY 2025: 28

Project Title: Improving Culture and Quality of Care Through Virtual Intelligence

Unique Identifier: TX-1221-LMG-889

Project Duration: 03/01/2022 to 02/28/2025

Total Amount of CMP Funds Approved for this Project: $128,342.30

Total Amount of CMP Funds Expended During CY 2025 for this Project: $33,541.12

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) With the implementation of the It's Never Too Late (iN2L) program, the two participating facilities will be able to provide personalized life-enriching, re-engaging, and redirecting activities to residents, resulting in an increased quality of life for all participants.

b) A 50% improvement is expected in resident satisfaction in the engagement of programs offered for activities, rehabilitation, restorative, and socialization. It is also expected that this would increase the number of residents who come to more activities and social programs by 25%. The goal would be to meet the request for more stimulating quality experiences in the facility, as well as to improve the quality of care. The objective would be to benefit the residents through offering a more engaging and eventful day to enhance their time in the facility, improve skills, communication, behaviors, and social and activity programs, as well as overall well-being.

c) It's Never Too Late (iN2L) applications and games will increase residents' opportunities for education and life-long learning, decrease intergenerational and cultural gaps, and strengthen resident and community connections. The therapeutic aspects of iN2L will facilitate longer, more thorough, and interesting treatment sessions for all therapy disciplines. The iN2L's Resident Profile Pages will provide personalized portals, including preferred activity content and a library of photos and text messages from family and friends. Personalized activity programming through iN2L will empower residents to take ownership of their social interests and remain better connected to the community.

d) The project aims to create a great workplace environment through leadership, training, community trust, communication, team spirit, employee recognition, and empowerment, while having a joyful spirit.

e) Not applicable

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Texas

TX CMP Funds Expended for Administrative Uses in CY 2025: $211,415.70

TX CMP Funds Expended for Emergency Uses in CY 2025: $0.00

TX Active CMP Funded Projects in CY 2025: 28

Funded Entity(ies):

Legacy Management Group (Bryan Opco and Cameron OpCo) dba Legacy Nursing and Rehabilitation

Results of the Project:

Project goals: 1) 50% improvement in resident satisfaction; 2) 25% increase in the amount of time residents spend using the software and participating in activities. The data collected about It's Never Too Late (iN2L) supports that the residents have a wider array of activities available in the homes with iN2L. This improves the quality of activities, which directly impacts overall resident satisfaction. Specifically, the census in Cameron is growing each month and this is due to satisfied residents and families. Lessons learned: Regular use must be reinforced and continuously monitored; new staff members need to be trained on the iN2L offerings; and after grant funds were expended, cost to maintain and keep the system increased more than expected. Challenges: Staff training was the most consistent issue. When new staff got "out of the habit" of using the equipment, the project would have to periodically be jumpstarted again.

Project Title: Enrichment for All - Magnolia Place

Unique Identifier: TX-1221-MPWR-896

Project Duration: 03/15/2022 to 03/14/2025

Total Amount of CMP Funds Approved for this Project: $60,918.89

Total Amount of CMP Funds Expended During CY 2025 for this Project: $0.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) Using the It's Never Too Late (IN2L) person-based technology, Magnolia Place will offer ongoing activity and rehabilitation enrichment that results in goal achievement of an improved sense of wellbeing, increased resident engagement, and improved activities of daily living scores.

b) Magnolia Place expects a 50% improvement in resident satisfaction with engagement in programs offered for activities, rehabilitation, restorative care, and socialization. It is also expected that this will increase the number of residents participating in more activities and social programs by 25%. The goal would be to meet the request for more stimulating and high-quality experiences in the facility, as well as to improve the quality of care. The objective would be to benefit the residents by offering a more engaging and eventful day, thereby enhancing their time in the facility, improving skills,

Texas

TX CMP Funds Expended for Administrative Uses in CY 2025: $211,415.70
TX CMP Funds Expended for Emergency Uses in CY 2025: $0.00
TX Active CMP Funded Projects in CY 2025: 28

communication, behaviors, and participation in social and activity programs, as well as overall well-being.

c) The use of adaptive technology in the iN2L system creates a person-centered experience that can provide nursing home residents with the resources to help reduce the complications from chronic and cognitive disorders, increase therapeutic engagement to improve compliance and outcomes, and enhance social connection and quality of life.

d) By adopting a promising intervention strategy that is both multi-disciplinary and multifactorial in nature, we have the opportunity to slow their physical and cognitive decline, which will lead to fewer office visits and hospitalizations, resulting in significant healthcare cost savings.

e) Not applicable

Funded Entity(ies):

Jefferson Post-Acute 2015 OPCO LLC dba Magnolia Place Wellness and Rehabilitation

Results of the Project:

Project goals: 1) Improve or maintain activities of daily living (ADL) function. 2) Increase resident engagement in scheduled recreation and restorative groups. 3) Improve the quality of life of nursing home residents through recreation and restorative care interventions. Goals were achieved by 1) Implementing a cohesive multidisciplinary system that ensured identifying and addressing the needs of each resident. 2) Increasing participation in life enrichment activities and adherence to rehabilitation interventions by implementing engagement technology, which delivers person-centered therapy, restorative, recreational and leisure activities (RLAs). 3) Consistently monitored Minimum Data Set (MDS) data and QOL (Quality of Life) surveys to measure the efficacy of the Enrichment for All program and make proactive adjustments as needed. This combined approach enhanced resident and staff interactions and resulted in an improved quality of care (QOC) in the community. Lessons Learned: Engagement technology such as It's Never Too Late (iN2L) can significantly enhance both quality of life and therapy participation when integrated into daily routines. Residents are more motivated and engaged in rehabilitation when activities feel purposeful, familiar, and enjoyable. Improved participation in therapy contributes directly to better functional outcomes and supports stronger ADL performance. ADL assistance is most effective when paired with meaningful engagement that builds confidence, reduces frustration, and promotes independence. Collaboration between life enrichment, therapy, and nursing is essential to sustaining positive emotional and functional outcomes. Challenges: Consistently training new staff on evening and weekend shifts on utilizing iN2L

Texas

TX CMP Funds Expended for Administrative Uses in CY 2025: $211,415.70
TX CMP Funds Expended for Emergency Uses in CY 2025: $0.00
TX Active CMP Funded Projects in CY 2025: 28

tools. Ensure select employees are contacting iN2L tech support for immediate troubleshooting if a unit isn't operational.

Project Title: Bingocize: Social and Physical Engagement to Enhance Quality of Life

Unique Identifier: TX-1221-TAM-897

Project Duration: 04/01/2022 to 03/31/2025

Total Amount of CMP Funds Approved for this Project: $374,501.02

Total Amount of CMP Funds Expended During CY 2025 for this Project: $34,791.44

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The *Bingocize* project aims to improve the quality of life for residents of 24 certified nursing facilities (CNFs) in San Antonio and its surrounding areas. The primary focus of the project is to enhance the residents' quality of life. Participating students will develop relationships, empathy skills, and an understanding of the complex issues related to aging and long-term care. *Bingocize* strategically combines physical exercise and Bingo through a series of gentle range-of-motion exercises that have been recognized as an evidence-based program for falls prevention.

b) The goal of this project is to implement the *Bingocize*® program in 24 CNFs across South Texas. This is an opportunity to not only address a critical need in CNF residents but also facilitate strong community partnerships between educational institutions and CNFs.

c) A sustained *Bingocize*® program will provide current and future CNF residents the opportunity to participate in an evidence-based program capable of producing culture change and improving quality of life in several ways. First, the exercise portion of the program will positively impact functional performance, leading to maintenance of activities of daily living (ADLs) and a reduced fall risk.

d) Because the *Bingocize*® program is a group activity, residents will have the opportunity to socially engage and communicate with other residents as well as staff, university faculty, and students. Finally, residents are expected to enjoy playing *Bingocize*®.

e) The program provides opportunities for students to develop their technical knowledge, build relationship and empathy skills, and acquire a thorough understanding of complex issues related to aging and long-term care. Students from multiple disciplines (e.g., Psychology, Public Health, and

Texas

TX CMP Funds Expended for Administrative Uses in CY 2025: $211,415.70
TX CMP Funds Expended for Emergency Uses in CY 2025: $0.00
TX Active CMP Funded Projects in CY 2025: 28

Kinesiology) will become prepared for future aging-related careers by significantly improving attitudes towards nursing home residents. This attitude is critically important considering the ongoing shortage of qualified CNF staff, high turnover rates among the long-term care workforce, and the aging of the baby boomer generation.

Funded Entity(ies):

Texas A and M University - San Antonio

Results of the Project:

Project Results: Social Benefits of Participation: Participants consistently emphasized how *Bingocize* created valuable social connections in the facility environment. These interactions reduced isolation and created a sense of community. Physical Improvements: Many participants reported tangible physical benefits from the program's exercise component such as improvements in mobility, pain reduction, and increased functional capacity for daily activities. Cognitive Stimulation: The mental engagement aspects of the program were highly valued by participants who appreciated the dual physical-cognitive approach. Residents reported improved mood and mental alertness on *Bingocize* days. Evolving Attitudes: A common pattern emerged of initial skepticism transforming into enthusiasm, particularly among those who attended multiple sessions. Peer encouragement played a key role in sustaining participation among initially reluctant residents. Program Limitations and Recommendations: While acknowledging certain limitations, "The program is not for everyone. Some residents are too sick." Participants overwhelmingly supported program continuation with specific suggestions for prizes, music, and greater adaptability for diverse physical capabilities. Lessons Learned: Program Reception and Benefits: *Bingocize* was extremely well-received by most certified nursing facility staff and residents, with Activity Directors highlighting significant quality of life improvements across physical, emotional, cognitive, and social engagement domains. Workforce Development Needs: Working effectively with nursing home residents requires individuals possessing a unique combination of empathy, patience, and dedication—qualities that proved essential for successful program implementation and sustainability. Educational Opportunities: Creating additional pathways for students to work with nursing home residents through internships and educational initiatives proved valuable, not only building a more dedicated workforce but also preparing future generations to better support aging populations. Implementation Success Factors: Strong program outcomes were consistently associated with regular communication between project staff and facilities, coupled with genuine buy-in from both Administrators and Activity Directors. Challenges: Staffing and Administrative Challenges: Facilities were consistently understaffed, with high turnover rates among Activity Directors and Administrators. Staff at multiple locations were slow or reluctant to complete required *Bingocize* training,

Texas

TX CMP Funds Expended for Administrative Uses in CY 2025: $211,415.70
TX CMP Funds Expended for Emergency Uses in CY 2025: $0.00
TX Active CMP Funded Projects in CY 2025: 28

failed to maintain attendance records, and left students unsupervised with vulnerable residents who had specific health needs. Implementation Barriers: Program implementation was hindered by scheduling conflicts between student availability and facility calendars, frequent session cancellations due to competing priorities at the facilities, and complications with Memorandum of Understanding (MOU) development and approval processes. Participant Engagement Challenges: Resident participation was affected by individual resistance to the program, requests for different incentives (not funded by the project, but through Texas A and M University - San Antonio (TAMUSA) internal sources), and the need for better adapted exercises for residents with physical limitations. Safety and Health Concerns: Student facilitators reported sometimes feeling unsafe due to inadequate supervision by nursing home staff, while COVID-19 outbreaks caused significant program disruptions and created additional health risks.

Project Title: Restorative Program Initiative - iN2L (It's Never Too Late)

Unique Identifier: TX-1221-SRFH-901

Project Duration: 02/15/2022 to 02/14/2025

Total Amount of CMP Funds Approved for this Project: $47,753.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $0.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The iN2L (It's Never Too Late) program will enable Sarah Roberts French Home to provide personalized, life-enriching, engaging, and redirecting activities to residents, resulting in an increased quality of life for all participants.

b) The goals of the project are to improve or maintain activities of daily life (ADL) function and improve the quality of life of our residents, by enriching restorative care interventions. The project aims to achieve these goals by implementing a cohesive multidisciplinary system that will ensure identifying and addressing the needs of each resident; and increasing participation in life enrichment activities and adherence to rehabilitation interventions by implementing engagement technology, which delivers person-centered therapy, restorative, recreational and leisure activities (RLAs). This combined approach will enhance our resident/staff interactions that will result in an improved quality of care (QOC) in the community.

Texas

TX CMP Funds Expended for Administrative Uses in CY 2025: $211,415.70
TX CMP Funds Expended for Emergency Uses in CY 2025: $0.00
TX Active CMP Funded Projects in CY 2025: 28

c) Nursing home residents that are receiving therapy: will complete more repetitions when a purpose is added to the exercise, and people who participate in technology-delivered, person-centered therapeutic and recreational activities are significantly more active and energetic, and are at higher functioning ADL levels; demonstrate greater levels of activity and social engagement behaviors; function at higher cognitive levels; express more positive emotions and are less depressed; and demonstrate greater self-efficacy.

d) The iN2L project implementation will allow the nursing home to establish a “train the trainer” program, which will recognize staff who take a leadership role in implementing and creating best practices for using iN2L. All iN2L onsite trainings provide eligible staff with continuing education units (CEUs).

e) Not applicable

Funded Entity(ies):

The Sarah Roberts French Home

Results of the Project:

Project Goals: (1) Provide Personalized Life Enrichment, Engaging and Stimulating Activities - Emotional goals were met with increased quality of life and more resident participation in activities. (2) Activities to Increase Quality of Life for All Participants - More residents participated in the various programs that It's Never Too Late (iN2L) offered. Residents were able to bond more with each other, establishing new friendships with both residents and staff members. (3) Motor Skill Activities - The iN2L motor skill activities program assisted in increasing the residents’ flexibility, range of motion, and memory function by increasing reminiscence of old times with movies provided. (4) Employee Training Sessions - The Alzheimer’s training for employees taught the staff how to interact with residents with these diagnoses by slowing down while collaborating with the residents. The employees' listening skills increased when providing care to residents because of an increased understanding of what the resident is going through each day. "Survey results are consistent with the initial survey numbers. We have residents actively engaging and participating in surveys and enjoying the variety of topics and opportunities to engage in IN2L opportunities. Residents do enjoy the challenges in iN2L programs that offer a test to their knowledge and recall. The older television shows that they are familiar with bringing back clean comedy and happy memories which they discuss among themselves while watching." Lessons Learned - Residents who have advanced Alzheimer’s or dementia and those that are advancing in their disease process are both able to enjoy activities with the iN2L. Having this available was a magnificent way to increase their quality of life.

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Texas

TX CMP Funds Expended for Administrative Uses in CY 2025: $211,415.70

TX CMP Funds Expended for Emergency Uses in CY 2025: $0.00

TX Active CMP Funded Projects in CY 2025: 28

Project Title: Music Therapy (Music Therapy for Memory Care)

Unique Identifier: TX-0123-CCY-1043

Project Duration: 06/01/2023 to 05/31/2026

Total Amount of CMP Funds Approved for this Project: $54,536.10

Total Amount of CMP Funds Expended During CY 2025 for this Project: $9,172.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The program aims to provide CC Young residents with meaningful musical activities in partnership with Music Therapy Solutions over a 3-year period.

b) Certified music therapists will provide group sessions for residents twice a week to help reduce agitation behaviors, reduce exit-seeking behaviors, reduce repetitive and non-purposeful behavior, and increase eye contact.

c) The project aims to enhance the well-being of our residents through every stage of their lives. Along with quality nursing care and pharmaceutical therapies, the music project can help alleviate residents' feelings of agitation and anxiety, making their lives more joyful.

d) Agitated residents continue to be a recurring issue the music therapist faces. Once the therapist was able to engage them in song, their behavior changed, and they became more peaceful. Music always seems to have a calming effect on residents who may be fearful, agitated, or experiencing pain or frustration with the facility staff. As a result of the relationships the therapist has built with them, she is able to overcome the most difficult situations by using familiar songs or engaging them in conversation.

e) Not applicable

Funded Entity(ies):

CC Young Memorial Home

Results of the Project:

Project Results: Each session allows residents the right to make choices. Residents had the choice to sing along with songs, play an instrument, recreate the lyrics to certain songs, or recall family memories related

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Texas

TX CMP Funds Expended for Administrative Uses in CY 2025: $211,415.70
TX CMP Funds Expended for Emergency Uses in CY 2025: $0.00
TX Active CMP Funded Projects in CY 2025: 28

to travel, holidays, and experiences. During the second quarter, therapist introduced acting into the sessions. Participants were guided to act out a career or a moment in time. Data used to track resident interaction was measured in the following way: members who made choices; members who moved to music; members who played an instrument; and members who sang. Each session also tracked residents' improvement from the start of the session to the end. The individuals who were not engaged at the beginning of the session were fully engaged by the end. Therapists used the above data to track engagement. Challenges: From August through October, music therapists still had to find ways to engage residents who were not alert or showing minimal engagement. The therapists looked for ways to redirect or engage in different songs. There were a small number of residents who avoided instrument play and showed passive engagement. Some residents also showed signs of agitation.

Project Title: Smile Proud: Improving Oral Health Among Texas Nursing Home Residents

Unique Identifier: TX-0123-TMF-1046

Project Duration: 06/01/2023 to 05/31/2025

Total Amount of CMP Funds Approved for this Project: $563,881.73

Total Amount of CMP Funds Expended During CY 2025 for this Project: $178,348.96

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The *Smile Proud* project is designed to improve residents' daily oral hygiene in 36 skilled nursing facilities (SNFs), which may lead to lower rates of oral infections, reduce preventable oral health-related urgent care visits, and prevent chronic diseases, such as pneumonia.

b) 1. Improve nursing home staff knowledge, engagement, and skills related to residents' daily oral care. Measurement: Knowledge gained evidenced by improved scores on assessments (pre- and post- training). 2. Improve nursing home residents' perception of their oral care and support by staff. Measurement: Question on the Baseline Oral Health Activity Score (BLOHA): How is your oral care and support from clinical staff? (Excellent, Good, or Poor). 3. Improve nursing home resident BLOHA. Measurement: Score on the initial resident BLOHA compared to the final BLOHA score. The BLOHAs will receive a score ranging from 0-16 (O meaning normal oral health and 16

Texas

TX CMP Funds Expended for Administrative Uses in CY 2025: $211,415.70
TX CMP Funds Expended for Emergency Uses in CY 2025: $0.00
TX Active CMP Funded Projects in CY 2025: 28

significant oral health concerns). 4. Completion of a nursing home *Smile Proud* sustainability plan. Measurement: Sustainability plan complete.

c) Improving daily oral hygiene leads to positive oral health outcomes, such as improved early detection of oral cancers, reduced oral health-related emergency room visits, fewer incidents of oral infections, and fewer serious illnesses, including pneumonia, which are reported among older Texans. The direct benefits for residents are improved oral hygiene (cleaner dentures or natural teeth, fresher breath), increased appetite and level of alertness, weight gain or maintenance, and increased hydration.

d) TMF has recruited 39 nursing homes that will receive in-person education provided by a registered dental hygienist (RDH).

e) Not applicable

Funded Entity(ies):

TMF Health Quality Institute

Results of the Project:

GOAL: Improve nursing home staff knowledge, engagement and skills related to residents' daily oral care. MEASUREMENT: Show knowledge gain evidenced by improved scores on assessments (pre/post training). SMART GOAL/OBJECTIVE: By the end of the project, 90% of the nursing homes' (NH) direct-care staff who participate in *Smile Proud* training will achieve at least an 80% score on all post-assessments. TMF analyzed 488 post-assessments that were submitted by participating homes that completed the training and the pre- and post-assessments or were collected by the registered dental hygienist (RDH) during in-person trainings. It is important to note that many homes completed trainings two and three virtually. They also completed the pre- and post-assessments but did not submit their data; therefore, their results are not included in this analysis. The questions most frequently answered incorrectly on the post-assessment were related to the potential impact of poor oral health on systemic health. The RDH reviewed all post-assessments at the end of each session with participating staff to ensure that they understood the content before concluding the training. GOAL: Improve NH resident perception of their oral care and support by staff. MEASUREMENT: Determined by a question on the Baseline Oral Health Activity Score (BLOHA): How is your oral care and support from clinical staff? (Excellent/Good or Poor). SMART GOAL/OBJECTIVE: By the end of the project, of the residents who indicated that their oral care and support from clinical staff was poor on the initial BLOHA, at least 60% will indicate that their perception has improved on the final BLOHA. A total of 174 residents who participated in the pre- and post-training phases

Texas

TX CMP Funds Expended for Administrative Uses in CY 2025: $211,415.70
TX CMP Funds Expended for Emergency Uses in CY 2025: $0.00
TX Active CMP Funded Projects in CY 2025: 28

of the BLOHA rated their oral care support from staff as poor on the initial BLOHA. In the post-training BLOHA, 77 of these residents reported an improved perception, rating their experience as either good or excellent. This reflects a 44% improvement in resident perceptions of oral care and staff support. GOAL: Improve NH resident BLOHA scores. MEASUREMENT: Compare the score on the initial resident BLOHA to the final BLOHA score. BLOHA-scored items include food debris, oral pain, dry mouth, gum inflammation, loose or broken teeth, halitosis and suspicious lesions, resident perception in oral care and support from clinical staff, no obvious problems, early care needed, or referral needed. The BLOHAs will receive a score ranging from zero to 16, with zero meaning normal oral health and 16 meaning significant oral health concerns. SMART GOAL/OBJECTIVE: By the end of the project, 80% of residents whose initial BLOHA score was five or above will have improved by a minimum of two points on the final BLOHA score. The pre-training BLOHA was completed on 301 residents. Of these, 160 residents (53%) scored five or higher, indicating a need for oral care. At the time of the post-training BLOHA, 235 of the original 301 residents were available. Among the 235 residents assessed post-training, 121 had previously scored five or higher on the initial BLOHA. Of those 121 residents, 90 showed an improvement of two or more points, or 74% of residents available for re-evaluation showed improvement. GOAL: Complete an NH *Smile Proud* Sustainability Plan. MEASUREMENT: Sustainability Plan complete. SMART GOAL/OBJECTIVE: By the end of the project, 90% of the NHs that complete the project will provide the RDH with a plan to sustain the program. Of the 35 participating NHs that completed the program through the fourth training, 21 submitted sustainability plans outlining their strategies for continuing the *Smile Proud* program, resulting in a 60% submission rate. These plans included provisions for including the training when onboarding new staff and conducting refresher training for existing staff. LESSONS LEARNED: One of the most significant lessons learned during the project was the critical role of NH leadership, particularly their commitment in promoting and sustaining oral health initiatives. Leadership commitment proved essential but was also difficult to sustain. CHALLENGES: (1) Scheduling visits or virtual training, as well as cancellations due to key staff absences or shifting priorities within the homes. (2) Availability of staff to attend scheduled training as well as the length of the training. (3) High leadership turnover and lack of consistent leadership engagement in the initiative. (4) Keeping an organized system to track resident consent forms was a consistent challenge for some facilities. At the start of the project, consent forms were signed and resident identification numbers assigned to anonymize data. However, critical documentation was often misplaced due to the long intervals between pre- and post-assessments and staff turnover. These challenges did not negate the effectiveness of the program, as evidenced by 35 of 38 homes completing the program.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

State Civil Money Penalty Reinvestment Projects Funded in Calendar Year (CY) 2025
Dallas Long-Term Care Location

Texas

TX CMP Funds Expended for Administrative Uses in CY 2025: $211,415.70

TX CMP Funds Expended for Emergency Uses in CY 2025: $0.00

TX Active CMP Funded Projects in CY 2025: 28

Project Title: Serenity Place - Multi-Sensory Room

Unique Identifier: TX-0424-PMHR-1131

Project Duration: 09/01/2024 to 08/31/2027

Total Amount of CMP Funds Approved for this Project: $10,890.82

Total Amount of CMP Funds Expended During CY 2025 for this Project: $0.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The project aims to create a multi-sensory room that will be a safe therapeutic environment offering specifically tailored sensory-rich opportunities for individuals with all levels of dementia in one nursing home.

b) Pleasant Manor is seeking a culture change in the facility in the approaches and treatment in which we serve dementia residents while in our care. An individualized plan will be created for each resident by the inter-disciplinary team including nursing, therapy, activities, and social work. Residents will be continuously monitored in the sensory room by trained staff who will ascertain if it meets the individual's needs. The room will be used by activities, therapy staff, as well as trained certified nursing assistants (CNAs) and nurses. The multi-sensory room will provide relaxation and stress relief, improve sensory integration, improve cognitive communication function, develop coping strategies, encourage social interaction, and foster independence.

c) Cognitive deficits with behaviors such as sundowning are prevalent in nursing homes. This project will create a multi-sensory room that provides a safe and therapeutic environment, offering specifically tailored sensory-rich opportunities for individuals with all levels of dementia. The *Multi-Sensory Room* project will provide a safe environment for residents, helping them create meaningful interactions with staff, peers, and family, and fostering a greater sense of fulfillment in life.

d) The facility is committed to sharing any knowledge gained from the Multi-Sensory Room project throughout the organization. They plan to utilize various media avenues, including Flagpost, company newsletter, and the company's therapy homepage, to demonstrate the efficacy of the program in improving the quality of life for long-term care residents.

e) Not applicable

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Texas

TX CMP Funds Expended for Administrative Uses in CY 2025: $211,415.70

TX CMP Funds Expended for Emergency Uses in CY 2025: $0.00

TX Active CMP Funded Projects in CY 2025: 28

Funded Entity(ies):

Percheron Healthcare dba Pleasant Manor Healthcare and Rehabilitation

Results of the Project:

GOAL 1: By 30 days following contract execution, Pleasant Manor (PM) will complete facility level training during all staff meeting on purposes and techniques for multi-sensory room and have 90% of staff participate. Goal achieved on January 15, 2025. GOAL 2: By 30 days following contract execution, PM will complete therapist and activity training during all staff meeting on purposes and techniques for multi-sensory room and have 90% of staff participate. Goal was achieved on January 30, 2025. GOAL 3: By 30 days following contract execution, PM will complete evaluations and establish a Plan of Care (POC) through 1:1 session of Occupational Therapy (OT) and Speech Therapy (ST) to establish appropriate sensory needs of each resident and have 75% of residents participate. Goal achieved by January 30, 2025. GOAL 4: By 150 days following contract execution, PM will complete Dementia Behavior Disturbance Scale (DBD Scale) for baseline data collection on residents following two months of multi-sensory room use and 50% of all residents participating. Improve DBD Scale point score by at least 10 points. DBD Scales completed on April 30, 2025, with 60% of all resident scores improving by a minimum of ten (10) points. There was a 2% reduction in behaviors based on DBD Scale assessments. The DBD Scale measure dementia behaviors including repetitive questions, losing, or hiding things, lack of interest in activities, nocturnal wakefulness, unwarranted accusations, excessive daytime sleeping, and other behaviors often association with sundowning.

Project Title: Mind, Body, and Sensory Room

Unique Identifier: TX-0524-WHR-1165

Project Duration: 09/01/2024 to 08/31/2026

Total Amount of CMP Funds Approved for this Project: $9,770.31

Total Amount of CMP Funds Expended During CY 2025 for this Project: $0.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The aim of the project is to enhance the independence and engagement of nursing home residents in one nursing home within their environment by creating a multi-sensory room that provides a safe,

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Texas

TX CMP Funds Expended for Administrative Uses in CY 2025: $211,415.70
TX CMP Funds Expended for Emergency Uses in CY 2025: $0.00
TX Active CMP Funded Projects in CY 2025: 28

therapeutic environment offering specifically tailored sensory-rich opportunities for all residents, regardless of their dementia level.

b) The goal in implementing the *Mind, Body and Sensory Room* project is to improve resident independence and ability to engage with their environment. The Allen Cognitive Scale is a progressive scale that indicates a person's cognitive impairment. It ranges from level one (severe cognitive impairment) to level six (no cognitive impairment). There is also a gradation within the levels to indicate specific levels of functioning. Prior to implementing the Mind, Body and Sensory Room project, all residents will be assessed to determine their Allen Cognitive Scale, as well as after two months following sensory room intervention to evaluate long-term effectiveness of the project. Results will be measured through April 2026, to demonstrate the efficacy of the program.

c) Cognitive deficits with behaviors such as sundowning are highly prevalent in nursing homes. Residents with more severe and profound diagnoses have been shown to have difficulty with cognition, sensory processing, and regulation, and participation in activities. They are prone to becoming overwhelmed by the intensity of stimulation in their natural environment. This will lead to 1) Decreased use of antipsychotics and psychotropics; 2) Decreased caregiver burden for patients with dementia; 3) Increased social interactions with peers and family members through reminiscence; and 4) Increased patients' sense of safety and their involvement with their environment.

d) Techniques learned from this program will be invaluable in dementia programming, as they assist with de-escalation and behavior management techniques applicable to many patients with dementia and cognitive decline. The items purchased and utilized in the sensory room will remain relevant to the dementia population for years to come. The ability to engage the five senses through these items is a crucial aspect of dementia care. The items purchased will be able to serve many patients, addressing their ever-changing needs. These items can be adapted to meet the needs of many patients at various stages of their dementia and cognitive decline.

e) Not applicable

Funded Entity(ies):

Sage Terrace Healthcare dba Westover Hills Rehabilitation and Healthcare

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

State Civil Money Penalty Reinvestment Projects Funded in Calendar Year (CY) 2025
Dallas Long-Term Care Location

Texas

TX CMP Funds Expended for Administrative Uses in CY 2025: $211,415.70

TX CMP Funds Expended for Emergency Uses in CY 2025: $0.00

TX Active CMP Funded Projects in CY 2025: 28

Results of the Project:

PROJECT RESULTS: To determine the "*Abilities Care Approach*" scores for each resident, speech and occupational therapists have collaborated to complete tasks to assess sequencing through leather lacing, following instructions when coloring a picture, visuospatial reasoning when recreating a craft item, and overall cognitive abilities through completing a Saint Louis University Mental Status (SLUMS) assessment. As residents demonstrate other behavioral or functional changes, these assessments may be readministered to determine whether the resident's cognition has changed as well. INTERIM RESULT: The "*Abilities Care Approach*" assessments continue to be completed and scored by both speech and occupational therapists. Overall, patients have continued to score within the cognitive age range of 12-17 years like in quarter two, compared to versus 18 months to three years from quarter one. The Patient Health Questionaire-9 (PHQ-9) assessment is utilized to assess potential mood and behavior, speech therapists, nursing, and social work all collaborate to complete the assessment on a quarterly basis as scheduled by the Minimum Data Set (MDS) nurse in relation to other assessments. Because this is scheduled, residents will easily receive the assessments whether they are on therapy caseload. In the assessment, scores fall within several ranges: zero to four (0-4) points is none to minimal depression, five to nine (5-9) points is mild depression, 10-14 points is moderate depression, 15-19 points in moderately severe depression, and 20-27 points is severe depression. INTERIM RESULT: During the initial PHQ-9 assessments, residents scored on average 2.28 out of 27 points, whereas residents scored an average of 2.10 points during the first quarter and 2.0 points in the second quarter. Now in the third quarter, residents score an average of 0.04 points, effectively making the average score zero (0) out of 27 points. This has demonstrated a continued decrease in moods and behaviors, so much so that the residents on average now score within the "no depression" range.

Project Title: Phase 2 - Culture Transformation through the Eden Alternative Training

Unique Identifier: TX-0524-MRC-1171

Project Duration: 09/26/2024 to 09/25/2026

Total Amount of CMP Funds Approved for this Project: $37,294.82

Total Amount of CMP Funds Expended During CY 2025 for this Project: $7,015.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Texas

TX CMP Funds Expended for Administrative Uses in CY 2025: $211,415.70
TX CMP Funds Expended for Emergency Uses in CY 2025: $0.00
TX Active CMP Funded Projects in CY 2025: 28

a) The aim of the training is to promote culture change through person-directed care. The project aims to offer three distinct training programs to six skilled nursing facilities (SNFs). A training event will be held for approximately 25 participants and will occur in person at a central location for the six nursing facilities. On-site consulting Eden staff will provide services.

b) The primary goals of this project are: (1) to influence the mindset of members of the care partner team to where they begin seeing in their day-to-day work opportunities to serve SNF residents using person-directed approaches to care; and (2) to empower members of the care partner team by equipping them with the knowledge, tools, and skills required to create and sustain a person-directed culture of care. The Certified Eden Associate Training (CEAT) will provide a broad net of training among employees who care for and provide services first-hand to residents.

c) Nursing home residents are expected to benefit from this project through the continued development of empowered employees, who are prepared to transform care and operational practices, thereby improving overall well-being and quality of life for residents. The lives of each nursing home resident have the potential to be positively impacted.

d) By creating a highly participatory approach to exploring and "trying on" aspects of person-directed care, all stakeholders can make the content their own and help customize it for the unique needs of the organization. This project will enhance the methods and culture in which care and services are delivered to residents in the skilled nursing facilities in Methodist Retirement Communities.

e) Not applicable

Funded Entity(ies):

Methodist Retirement Communities

Results of the Project:

OUTCOME #1: From Certified Eden Associate Training (CEAT) trainings, the goal is to see at least a 5% positive overall shift toward person-directed perceptions from pre-test to post-test. This goal was met through the first four quarters of the project with an overall positive shift of 8.8% being seen from pre-test scores to post-test scores. OUTCOME #2: From CEAT trainings, goal #2 is to see at least a 5% positive overall shift toward person-directed perceptions from pre-test to post-test taken four to six months following the training. This goal was met through first four quarters of the project with an overall positive shift of 7.7% being seen from pre-test scores to four to six-month post-test scores. OUTCOME #3: For 1-Day Eden Trainings, the goal is to have 95% of all participants score at least 70% on a post-test. This objective was

Texas

TX CMP Funds Expended for Administrative Uses in CY 2025: $211,415.70
TX CMP Funds Expended for Emergency Uses in CY 2025: $0.00
TX Active CMP Funded Projects in CY 2025: 28

met as 100% of all participants scored at least 70% or more. OUTCOME #4: As desired, the Quality of Care and Quality of Staff scores from the WeCare Connect surveys both surpassed the benchmark scores for surveys completed through the first four quarters of the project. Nursing home residents are expected to benefit from this proposed project through the continued development of empowered employees, prepared to transform care and operational practices that improve overall well-being and quality of life for residents. The lives of each nursing home resident have the potential to be positively impacted.

Project Title: The Java Project: Addressing Loneliness and Social Isolation

Unique Identifier: TX-0624-CHI-1183

Project Duration: 10/01/2024 to 09/30/2027

Total Amount of CMP Funds Approved for this Project: $15,000.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $5,000.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The program consists of the *Java Music Club*, *Java Memory Care*, and *Java Mentorship*. The goal of the project is to improve the overall quality of life for nursing home residents in one nursing home by addressing social isolation and loneliness through peer support and mentoring.

b) The goal of the *Java Project* is to improve quality of life of residents in nursing facilities by decreasing loneliness and social isolation through the implementation of three evidence based, standardized peer support activity programs developed by Dr. Kristine Theurer, founder of *Java Group Programs*. The objectives are to implement weekly peer support and mentoring groups using the *Java* materials and methods, to reduce loneliness and social isolation, and increase happiness among participants.

c) The *Java Project* employs an innovative approach that involves residents helping one another to address loneliness and social isolation specifically. Skilled nursing facility (SNF) residents will benefit from the *Java* programs by developing stronger social and emotional bonds with each other. Through sharing grief, sorrow, and happiness in the *Java* groups, empathetic connections are built, and these social relationships carry over to other activities and nursing home life. Residents will directly benefit from new, close relationships and from having a meaningful purpose in helping their peers.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Texas

TX CMP Funds Expended for Administrative Uses in CY 2025: $211,415.70
TX CMP Funds Expended for Emergency Uses in CY 2025: $0.00
TX Active CMP Funded Projects in CY 2025: 28

d) The *Java* programs are designed to continue indefinitely with no additional costs. The programs are a one-time purchase, with no ongoing fees. Recorded trainings are included in the materials and can be used on an ongoing basis to train new employees. The communities are encouraged to reach out for support as needed after the three years are completed, so that new staff can receive training.

e) Not applicable

Funded Entity(ies):

Clarewood House, Inc.

Results of the Project:

PROJECT DATA: The Java Scale was conducted during Year 1, Quarter 4 with 50% of the regular *Java Music* program attendees. The Java Scale aims to assess if there are any observable improvements in the participants' sense of well-being before and while the *Java Music* program is underway. It takes participation, emotional connection, and happiness as indicators of decreased social isolation and loneliness and increased well-being. Here are the results: Social Isolation - Observed Average Decreases: 42.5%; Loneliness - Observed Average Decrease: 47.5%; Happiness - Observed Average Increase: 65.0%. The Observation Form and the Java Scale were successfully completed during this quarter. The purpose of the Observation Form is to assess if the *Java* program is being implemented as intended. These are the observers' remarks: most of the program components were successfully facilitated. Most of the participants were engaged and demonstrated positive responses during the session, and the group members seemed happier and more relaxed at the end of the session that was observed. Number of participants during the 4th quarter: 14 participants. Number of sessions during the 4th quarter: 12 sessions. Total number of participants during Year 1: 44 participants. Total number of sessions during Year 1: 28 sessions.

Project Title: Bingocize NTX: An Evidence-Based Health Promotion Program to Improve the Quality of Life of North Texas Certified Nursing Facility Residents

Unique Identifier: TX-0624-SMU-1185

Project Duration: 10/10/2024 to 09/30/2027

Total Amount of CMP Funds Approved for this Project: $533,574.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $95,731.94

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

State Civil Money Penalty Reinvestment Projects Funded in Calendar Year (CY) 2025
Dallas Long-Term Care Location

Texas

TX CMP Funds Expended for Administrative Uses in CY 2025: $211,415.70
TX CMP Funds Expended for Emergency Uses in CY 2025: $0.00
TX Active CMP Funded Projects in CY 2025: 28

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) *Bingocize* is an evidence-based health promotion program that combines exercise and the game of bingo to improve the quality of life for residents. The program involves activities and exercises designed to improve functional performance, resulting in improved activities of daily living (ADLs) and a reduced risk of falls. Residents in 36 certified nursing facilities (CNFs) participating in *Bingocize* will have the opportunity to socially engage and communicate with other residents, as well as staff, university faculty, and students. *Bingocize* will educate university students in best practices for working with nursing home residents in long-term care.

b) The goal of this project is to implement the *Bingocize* program in 36 certified nursing facilities (CNFs) across North Texas. This as an opportunity to not only address a critical need in CNF residents but also facilitate strong community partnerships between educational institutions and CNFs. The program provides opportunities for students to develop their technical knowledge, build relationship and empathy skills, and acquire a thorough understanding of complex issues related to aging and long-term care.

c) A sustained *Bingocize* program will provide current and future CNF residents with the opportunity to participate in an evidence-based program capable of producing culture change and improving quality of life in several ways. First, the exercise portion of the program will positively affect functional performance, leading to maintenance in ADLs and reduced fall risk. Second, because the *Bingocize* program is a group activity, the residents will have the opportunity to socially engage and communicate with other residents, as well as staff, university faculty, and students. Finally, residents are expected to enjoy playing *Bingocize* and winning prizes.

d) Nursing homes will benefit from the project by providing residents with an evidence-based program.

e) Students from multiple disciplines (e.g., Applied Physiology, Health Management, and Psychology) will become prepared for future aging-related careers by significantly improving attitudes towards nursing home residents.

Funded Entity(ies):

Southern Methodist University

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Texas

TX CMP Funds Expended for Administrative Uses in CY 2025: $211,415.70

TX CMP Funds Expended for Emergency Uses in CY 2025: $0.00

TX Active CMP Funded Projects in CY 2025: 28

Results of the Project:

PROJECT DATA: Progress has been slower than anticipated on project objectives due to several unforeseen and unexpected factors that occurred in Quarter 3. First, several key personnel changes have had a significant impact on the project. Second, significant changes in ownership and leadership within partnering certified nursing home facilities (CNFs) were problematic for implementation during the third quarter. Efforts were made to contact appropriate individuals in the new organization to discuss implementation of the program. Significant progress in overcoming these setbacks. Objective 1: CNF staff will demonstrate skill and knowledge to lead *Bingocize* with CNF residents. Objective 2: Faculty and students from Southern Methodist University will demonstrate skill and knowledge to lead *Bingocize* while assisting CNF staff to implement *Bingocize* programs.

Project Title: The Java Project: Addressing Loneliness and Social Isolation

Unique Identifier: TX-0824-CCC-1193

Project Duration: 04/29/2025 to 02/15/2027

Total Amount of CMP Funds Approved for this Project: $15,000.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $0.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The *Java Project* will bring peer-centric mentoring and inclusiveness activities to one facility. Residents will benefit from giving and receiving mentoring activities in the three programs (*Java Music*, *Java Memory Care*, and *Java Mentorship*) to be implemented in the facility. The program will address resident isolation and provide residents with a sense of purpose.

b) The goal of the *Java Project* is to improve quality of life of residents in nursing facilities by decreasing loneliness and social isolation through the implementation of three evidence based, standardized peer support activity programs developed by Dr. Kristine Theurer, founder of *Java Group Programs*. The objectives are to implement weekly peer support and mentoring groups using the Java materials and methods, to reduce loneliness and social isolation, and increase happiness among participants.

c) The *Java Project* involves an innovative approach based on residents helping each other to specifically target loneliness and social isolation. Nursing facility residents will benefit from the *Java*

Texas

TX CMP Funds Expended for Administrative Uses in CY 2025: $211,415.70
TX CMP Funds Expended for Emergency Uses in CY 2025: $0.00
TX Active CMP Funded Projects in CY 2025: 28

programs by developing stronger social and emotional bonds with each other. Through sharing grief, sorrow and happiness in the *Java* groups, empathetic connections are built, and these social relationships carry over to other activities and nursing home life. Social isolation, loneliness, and depression are associated with poor quality of life and poor quality of care. Residents will directly benefit from new, close relationships and from having a meaningful purpose in helping their peers.

d) The *Java* programs are designed to continue indefinitely in the home with no additional costs. The programs are a one-time purchase, with no ongoing fees. Recorded trainings are included in the materials and can be used on an ongoing basis to train new employees. The communities are encouraged to reach out for support as needed after the three years are completed so that new staff can receive training.

e) Not Applicable

Funded Entity(ies):

Mesquite Senior Care, LLC. Dba Christian Care Center

Results of the Project:

PROJECT DATA for YEAR 1, QUARTER 3: Number of sessions during this quarter: 11 sessions. Number of participants during this quarter: Nine (9) participants. The Java Scale: It was conducted with 50% of the regular *Java Music* program attendees during this quarter. The Java Scale aims to assess if there are any observable improvements in participants' well-being before and while the *Java Music* program is underway. It takes participation, emotional connection, and happiness as indicators of decreased social isolation and loneliness, and increased well-being. Results: Social Isolation - Observed Average Decreases: 42%. Loneliness - Observed Average Decrease: 42%. Happiness - Observed Average Increase: 40%. Successes this period: Participants shared how much they look forward to the program each week. They were also inviting others to attend, not just the staff inviting participants. Issue identified: Consistent participation waned due to winter illnesses. The program is now a valued part of the ongoing activities and continues to strengthen social and emotional connections for residents. The Java Scale results demonstrated the impact of the *Java Music Club* program among participants. The program is on track and has met the goals at this point of the project.

Texas

TX CMP Funds Expended for Administrative Uses in CY 2025: $211,415.70

TX CMP Funds Expended for Emergency Uses in CY 2025: $0.00

TX Active CMP Funded Projects in CY 2025: 28

Project Title: SNFClinic

Unique Identifier: TX-1024-LTCC-1219

Project Duration: 02/19/2025 to 02/04/2027

Total Amount of CMP Funds Approved for this Project: $1,225,080.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $203,350.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) This project seeks to provide comprehensive training for nursing facility staff through a centralized technology-based system. The program will target facilities with high turnover rates and will provide these facilities with a centralized system for training, staff management, and resident care resources.

b) *SNFClinic* addresses the need for care-focused training and resources by providing Basic, Intermediate, and Advanced Clinical Nursing Skills training to provide ongoing education in how to correctly perform nursing procedures. The expected outcomes (i.e., realistic, actionable goals) of the project are: 1. On average, the participating facilities will improve in thirty percent (30%) of their CMS Quality Measures (QM); and 2. Fifty percent (50%) of the participating facilities' Quality Measure star ratings will improve. Long Term Care Consultants (LTCC) will use to measure these goals are Goal 1: QM data published by CMS on a quarterly basis. Project performance will be measured against baselines established upon commencement of the project. Goal 2: Changes to the participating nursing homes' QM star rating on the CMS Care Compare website. Project performance will be measured against the baseline QM rating at the start of the project.

c) The *SNFClinic* project is an online electronic learning management system (eLMS) that provides clinical and in-service staff training and resident care resources designed to directly improve the quality of care provided at skilled nursing home facilities.

d) The intent of the project and the facilities' participation is to participate in meaningful, long-term operational changes that will result in improvements to quality of care and more efficient systems that will save both time and financial resources.

e) Not applicable

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Texas

TX CMP Funds Expended for Administrative Uses in CY 2025: $211,415.70

TX CMP Funds Expended for Emergency Uses in CY 2025: $0.00

TX Active CMP Funded Projects in CY 2025: 28

Funded Entity(ies):

Long Term Care Consultants, LLC

Results of the Project:

PROJECT DATA: All 82 participating facilities have been onboard and are participating in the project. GOAL 1: On average, the participating facilities will improve in thirty percent (30%) of the Minimum Data Set (MDS) Quality Measures (QM) used to calculate the CMS QM star rating. A communications and data freeze imposed by CMS in August 2025 has hindered Long Term Care Consultant's (LTCC) ability to report on this goal. CMS's publication of this data has been delayed and is expected to be updated on January 28, 2026. GOAL 2: Fifty percent (50%) of the participating facilities' QM ratings will improve. Measurements: 44 of 82 (53.7%) of the participating facilities improved their QM star rating. 8 of 82 (9.8%) of the participating facilities' QM star ratings went down. 30 of 82 (64.6%) of the participating facilities' QM star ratings remained the same. Overall, the participating facilities' average QM star rating increased from 3.3 to four stars.

Project Title: A Path to Purpose

Unique Identifier: TX-1224-JWC-1248

Project Duration: 03/01/2025 to 02/28/2026

Total Amount of CMP Funds Approved for this Project: $9,823.60

Total Amount of CMP Funds Expended During CY 2025 for this Project: $4,911.80

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) *A Path to Purpose* project aims to strengthen the relationships between leaders and their teams, promoting a culture of collaboration, accountability, and compassion. It seeks to create a more stable, engaging workforce, ensuring that residents receive consistent, high-quality care that truly meets their needs and enhances their overall well-being and quality of life. “A Path to Purpose” aims to address several critical issues that directly impact the quality of life for residents in the nursing home. The most significant challenges this project seeks to overcome are high employee turnover; leadership culture and its impact on resident relationships; and inconsistent care and the loss of personalized care.

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Texas

TX CMP Funds Expended for Administrative Uses in CY 2025: $211,415.70
TX CMP Funds Expended for Emergency Uses in CY 2025: $0.00
TX Active CMP Funded Projects in CY 2025: 28

b) The goal of *A Path to Purpose* is to significantly enhance residents' quality of life by transforming the culture and collaboration within the leadership team. By fostering positive behaviors like innovation, accountability, and teamwork among leaders, and reducing limiting behaviors such as blame and confusion, the nursing home can create a more supportive and effective environment for residents and all staff members. This goal will be achieved through: (1) Leadership Team Assessment: Each team member will complete an online, 10-minute Leadership Team Values Assessment to identify strengths and areas for improvement within the team. (2) Strategic Implementation: Based on their results, leaders will receive practical, easy-to-implement strategies that are designed to strengthen their teamwork and leadership practices, benefiting the residents. Expected Outcomes: (1) Reduction in Limiting Leadership Behaviors: the project anticipates a decrease of 5% or more in limiting behaviors, such as confusion and blame, within the Leadership Team over the course of one year. (2) Increase in Positive Leadership Behaviors: the program aims for at 5% or more increase in constructive behaviors, such as compassion, accountability, and teamwork over the course of one year.

c) Research consistently shows that the quality of leadership within a nursing home directly influences the well-being of its residents. A positive leadership culture enhances teamwork, employee satisfaction, and retention, all of which contributes to better care outcomes for residents. *A Path to Purpose* is designed to harness these principles, using the Leadership Team Values Assessment (LTVA) and focused leadership development to cultivate a leadership environment that prioritizes compassion, collaboration, and accountability. By improving the way the Leadership Team works together, this project aims to create an environment where residents experience the highest possible quality of life.

d) All members of the Leadership Team will be directly involved with the *A Path to Purpose* project. They are a vital part of the project because culture directly impacts all residents and staff. A Path to Purpose is specifically designed for long-term sustainability. The Fully Staffed monthly program provides downloadable worksheets, resources, audio, and transcripts allowing learners to access these materials long after the completion of A Path to Purpose.

e) Not applicable

Funded Entity(ies):

James L. West Presbyterian Special Care Center dba James L. West Center for Dementia Care.

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Texas

TX CMP Funds Expended for Administrative Uses in CY 2025: $211,415.70

TX CMP Funds Expended for Emergency Uses in CY 2025: $0.00

TX Active CMP Funded Projects in CY 2025: 28

Results of the Project:

PROJECT DATA: 1. Baseline data collection - Complete; 2. Review Assessment Logistics and Communication Tools - Complete; 3. Conduct Leadership Team Values Assessment (LTVA#1) - assessment tool being distributed to leadership team - Complete; 4. Results of Team Values Assessment - Complete and presented to leadership through two coaching calls with DRIVE leadership. Follow-up coaching call to work on specific goals with leadership team; and 5. The clinical and administrative leadership team set specific goals to be actionable and achievable. These steps directly impact nursing home residents' quality of life by improving the culture of the organization. Research consistently shows that the quality of leadership within a nursing home directly influences the well-being of its residents. Helping leadership improve quality of their interactions and the culture directly impacts the quality of life of the residents. The steps taken by the team to improve the culture are directly impacting the overall quality of life for residents.

Project Title: "See Me" - An Activities Program to Improve Quality of Life

Unique Identifier: TX-1224-NOMI-1250

Project Duration: 07/01/2025 to 06/30/2028

Total Amount of CMP Funds Approved for this Project: $299,980.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $13,210.29

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The *"See Me"* project is an activities program that will improve the quality of life for nursing home residents by improving mood and decreasing social isolation. This program helps residents create Biography and Life Story Books (BLSB) as a simple and effective tool to use as an activity in group and/or individual reminiscence sessions. Reminiscence is known as an effective activity to promote well-being for residents with various health conditions, from dementia to long-term care, and the elderly without cognitive problems. Reminiscence helps residents recall past events, emotions, thoughts, et cetera, increase positive psychological factors, such as quality of life and life satisfaction, and adapt well to the present situation. Moreover, reminiscence sessions can be easily integrated into nursing homes activities programming and facilitated by activities staff in a group or individual format.

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Texas

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TX CMP Funds Expended for Emergency Uses in CY 2025: $0.00
TX Active CMP Funded Projects in CY 2025: 28

b) The goal of this program is to enhance mood, well-being and socialization through an understanding, acknowledgement, and celebration of the residents' life story. Twenty (20) nursing homes will register and participate in the program. The program will assist residents and their families to create up to 1,800 hardcover life story books and unlimited number of e-books with hyperlinks for the residents to share with family and representatives. The objective of the three-year project is to have the 20 nursing homes integrate the life story books into their activities, programming, and care practices. Anticipated outcomes for participating residents in this evidenced-based program are to enhance quality of life (QoL) by increasing social engagement, psychological health, and satisfaction with the program. The program will improve residents' mood and QoL by increasing socialization and participation in activities by creating a biographical life story book and using it in reminiscence of the residents' life story. To measure the program's effectiveness, the project will track the number of residents participating in the program and provide tools to allow the nursing home staff to measure resident satisfaction, quality of life, mood, and socialization. To measure resident satisfaction and QoL the program will use a modified Minnesota Resident Quality of Life Survey form. The other measures will be taken from regular Minimum Data Set (MDS) assessments for mood and social isolation and submitted to the program director to measure extent of change versus expected change and collate the data for quarterly reports to the state agency.

c) The project aims to improve nursing home residents' quality of life by enhancing the mood, well-being and socialization through understanding, acknowledgement, and celebration of the residents' life story. The BLSB creates an opportunity for residents to talk about their life experiences, build connections with others, and develop a sense of identity. Life story books provide positive long-term memory triggers that can be used to promote both verbal and non-verbal communication and interactions with the person living in a nursing home and view them in relation to their unique family history and past experiences. The findings reveal that life story books improve staff satisfaction, attitudes and knowledge of resident needs, enhance person-centered care, and improve families' perception of their relationship with the resident.

d) Nursing homes often have issues with staff turnover, so program staff will be available to train new staff by teleconferences and video conferences as requested. In addition, as a refresher and to keep them up to date, the homes will receive a quarterly email newsletter with hyperlinks to completed books, research, and articles on biographical life story work in practice.

e) Not applicable

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Texas

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TX CMP Funds Expended for Emergency Uses in CY 2025: $0.00
TX Active CMP Funded Projects in CY 2025: 28

Funded Entity(ies):

2noome LLC dba 2nomi

Results of the Project:

Interim results are not yet available. Data will be collected when a resident creates a book, the most recent Minimum Data Set (MDS) scores will be used for baseline, and scores updated every six months for up to ten residents participating in the program at each nursing home. As no homes have had a full six months of program implementation, there is no comparative data analysis to report. The project is collecting initial baseline data as they create books. The project will track the number of residents participating in the program and measure resident satisfaction using the approved survey tool and quality of life using MDS assessments for mood and social isolation. Specifically, for Mood, MDS item D0160 will be used: The total severity score indicates the extent of potential depression symptoms. Program goals are a 10% relative decrease in the severity of depressive symptoms in the total number of residents participating in the program. For Social Isolation, MDS items D0700 will be used: which assess how often the resident feels lonely or isolated.

Project Title: Virtual Dementia Tour Comprehensive Education Program

Unique Identifier: TX-1224-SWD-1256

Project Duration: 08/01/2025 to 07/31/2027

Total Amount of CMP Funds Approved for this Project: $746,620.57

Total Amount of CMP Funds Expended During CY 2025 for this Project: $12,605.52

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) Second Wind Dreams, Inc. (SWD) will implement a two-year project, the *Virtual Dementia Tour Comprehensive Education Program*, which will provide the *Virtual Dementia Tour® (VDT®),* the Dementia Aware Competency Evaluation® (DACE®), and their newest program, the *Inclusive Virtual Dementia Tour (IVDT)* to 75 skilled nursing homes across the state of Texas. Nursing home staff will receive training on the experience of dementia under a standard care environment through the *VDT* in year one of the project, then be guided through the experience of care delivery in an inclusive, empathic person-centered environment through training and implementation of the *IVDT* in year two.

Texas

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The differences between the two experiences will be compared from a clinical perspective and will help staff understand how to better care for residents living with dementia.

b) The overarching goals of the *VDT* and *Inclusive VDT* are for participants to observe a difference in care, to model how good evidence-based person-centered care (EPCC) can be achieved, to reduce residents' behavioral expressions of need and fear, to decrease psychoactive medications, and to draw parallels between current care practices and person-centered care practices. The outcomes are an increase in insight and empathy, adoption of a model of effective care approaches, and best practices for increased empathic person-centered care, measured through DACE results and other training assessments.

c) The project is intended to improve resident care through evidence-based training. Additionally, staff will be assessed with the DACE tool, providing an evidence-based and quantifiable assessment. The applicant will train two facilitators in a train-the-trainer model, and the facilitators will then train all existing facility caregivers within one year.

d) SWD will support nursing homes as they continue the use of the *VDT* and *IVDT* on a regular basis with staff and new hires. Trained nursing home facilitators will be able to conduct the *VDT* as many times as they like to keep the staff sensitized to the needs of a resident with dementia and to ensure competency in dementia care. The project will encourage them to provide ongoing in-services to speak to the individual needs of the residents with dementia by using the *VDT* as the springboard to discussion. SWD will also offer monthly newsletters containing *VDT* and dementia-related tips and content.

e) Not applicable

Funded Entity(ies):

Second Wind Dreams, Inc.

Results of the Project:

PROJECT DATA: (1) Received 37 of 75 Information Forms this quarter through consistent outreach efforts, including mail, email, and phone communication. (2) Scheduled 21 trainings for the upcoming period of November 2025 through January 2026. (3) Successfully completed the first five training courses of the program's first year. (4) Observed a measurable improvement in Dementia Aware Competency Evaluation (DACE) scores following the initial round of site visits. (5) Completed five site visits of the 26 scheduled during Year 1. TRAINING FEEDBACK/FINDINGS: Supportive administration; participant feedback that the

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Texas

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TX Active CMP Funded Projects in CY 2025: 28

training helped them understand residents with dementia better; enthusiastic facilitators and tour guides. LESSONS LEARNED: In one case it was learned that a language barrier was an issue, and it was important to have a Spanish speaking team member to help to translate the forms for the participants who needed extra support. The Nursing Home Certified Trainers (NCCTs) will be provided with some documents already translated in Spanish. SWD has updated the DACE form to provide a clearer process flow related to actions and timeline prior to the site visit or training as well as during and after. CHALLENGES: Tour guide and/or facilitator changes or tardiness put schedules behind; the lack of cooperation by facility administration or facilitators; training is not mandatory; staff scheduling and timing issues; no resident rooms available for a few of the training courses.

Project Title: Furry Friends Project

Unique Identifier: TX-1224-AIN-1257

Project Duration: 11/01/2025 to 10/31/2026

Total Amount of CMP Funds Approved for this Project: $581,086.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $0.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) Ageless Innovation is seeking to enrich the lives of Texas skilled nursing facility residents living with dementia with the *Furry Friends Project*. The program will provide robotic pets to residents at each of the participating facilities. Robotic companion pet therapy offers an alternative to traditional pet therapy.

b) The project's 118 participating communities will: 1. Improve the quality of life of residents living with dementia by 20%; and 2. Reduce the incidence of depressive symptoms by 20%. To track both measures, SWD will be using the Resident Mood/Quality of Life Assessment by Staff outcome survey. The project will achieve these goals by introducing assistive robotic companion pets, which provide a practical alternative to traditional pet therapy.

c) People living with dementia experience similar benefits when interacting with robotic companion pets as they do with live animals. Robotic companion pets can also be used on demand, eliminating scheduling needs for busy staff. Research has concluded that the presence of a pet has the potential to stimulate both overt social-verbal and social-nonverbal communication. Research has also shown

Texas

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TX CMP Funds Expended for Emergency Uses in CY 2025: $0.00
TX Active CMP Funded Projects in CY 2025: 28

that Joy for All Companion Pets provide psychosocial benefit in the form of improved quality of life through reduced loneliness, and increased sense of purpose/resilience. Additionally, for those with dementia, the companion pets demonstrated the ability to improve mood/cognitive activity and reduce cognitive decline and associated behaviors.

d) Ageless Innovation will establish a "train-the-trainer" and best practices model, which will allow experienced staff to convey best practices for introducing and engaging with the pets. This will provide staff who were not able to attend the initial implementation and training, as well as newly hired staff, an understanding of the project's goals and the value the pets in improving well-being, reducing anxiety and distressed behaviors.

e) Not applicable

Funded Entity(ies):

Ageless Innovation

Results of the Project:

Interim results are not yet available.

Project Title: Certified Dementia Practitioner

Unique Identifier: TX-0525-CYMH-1344

Project Duration: 08/01/2025 to 07/31/2028

Total Amount of CMP Funds Approved for this Project: $14,625.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $0.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) CC Young is a state-licensed skilled nursing facility where the state mandates that skilled nursing staff complete 12 hours of training. Currently, only six of those hours are required to cover general information related to dementia. However, due to the growing number of individuals diagnosed with Alzheimer's and dementia, CC Young recognizes that six hours of required training is insufficient to provide the highest quality of care for the residents. The project will recertify 15 staff members and

Texas

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TX Active CMP Funded Projects in CY 2025: 28

train new employees as Certified Dementia Practitioners, emphasizing that investing in high-quality training not only benefits residents but also boosts staff satisfaction, loyalty, and retention.

b) CC Young aims to train 60 new employees through The Alzheimer's Disease and Dementia Care Course (ADDC), offered by the National Council of Certified Dementia Practitioners (NCCDP), to enhance dementia care competency. Upon completing the eight-hour course, participants will take a final exam to assess their knowledge and skills, qualifying them as Certified Dementia Practitioners (CDPs) upon passing. Additionally, 15 skilled nursing employees will complete the recertification process, requiring six hours of follow-up training taught by a CDP trainer. To measure the effectiveness of the course, CC Young will use a pre- and post-assessment model incorporating two assessments, "Aging and Disability Resource Center (ADRC) Staff Dementia Knowledge Assessment Tool" and "Confidence in Dementia Scale" questionnaire. Success will be determined through statistical analysis of pre- and post-assessment scores.

c) One of the key principles of the training focuses on creating a supportive environment for these residents. As a result, staff surveyed the floors where residents reside and discovered that many have difficulty navigating various activities and even remembering the locations of their rooms. The initial training has initiated a phase of discovery in which staff are transitioning the floors to incorporate way-finding solutions. These modifications enhance residents' familiarity with their environment and promote greater independence.

d) CC Young has made the *Certified Dementia Practitioner* program a priority for the skilled nursing staff, to provide the best care possible to the residents. After the grant funding, CC Young will continue to seek funding from private foundation funding.

e) Not applicable

Funded Entity(ies):

CC Young Memorial Home

Results of the Project:

PROJECT DATA: Fifteen participants completed pre- and post-tests measuring knowledge of dementia care (21-question assessment, reported as percentages) and confidence in caring for residents with dementia (Likert-scale assessment, maximum score 45). Knowledge: Pre-test average: 75.5%, post-test average: 78%. Individual results showed variability, with gains for several participants and stable or decreased scores for others. Confidence: Pre-test average: 36 of 45, post-test average: 44.4 out of 45.

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Most participants demonstrated increased confidence, with many reaching or approaching the maximum score. LESSONS LEARNED: Post-test results demonstrate a substantial increase in caregiver confidence, indicating that participants felt significantly more prepared and self-assured in providing dementia-informed care following the training. Confidence gains were observed across all disciplines, suggesting the education was effective for both clinical and non-clinical staff who regularly interact with residents living with dementia. Overall knowledge scores showed a modest average increase, with notable individual variation. This variability reflects differences in baseline experience, role-specific responsibilities, and prior exposure to dementia education. In several cases, participants entered the training with high pre-test knowledge, limiting the magnitude of measurable score increases. Confidence gains—particularly when paired with stable or improved knowledge—are strongly associated with improved communication, reduced caregiver stress, and more consistent application of person-centered care strategies. Taken together, these findings indicate that the training successfully strengthened workforce readiness, reinforced interdisciplinary collaboration, and supported higher-quality, dementia-informed care practices for residents living with dementia. CHALLENGES: An additional 15 practitioners are scheduled for certification renewal at the beginning of the new year. While these renewals were initially planned for completion during the first quarter, the timeline was intentionally adjusted. During this period, National Council of Certified Dementia Practitioners (NCCDP) implemented a comprehensive redesign of its website and user platform. To ensure system stability, data accuracy, and a smooth renewal process, renewals were strategically deferred to the second quarter.

Project Title: Comfort Cove-Multi Sensory Experience

Unique Identifier: TX-0525-SRHC-1345

Project Duration: 09/08/2025 to 08/31/2027

Total Amount of CMP Funds Approved for this Project: $9,993.11

Total Amount of CMP Funds Expended During CY 2025 for this Project: $0.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) Southland Rehabilitation and Healthcare recognize the critical need for non-pharmacological interventions to address dementia-related behavioral disturbances. Research increasingly demonstrates the effectiveness of multi-sensory stimulation environments in mitigating these

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Texas

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TX CMP Funds Expended for Emergency Uses in CY 2025: $0.00
TX Active CMP Funded Projects in CY 2025: 28

challenges. The project aims to improve nursing home residents' quality of life using sensory experience to provide therapeutic interventions to participating residents.

b) Project Goal: To reduce behavioral and psychological symptoms in residents with dementia by 75% within the two-year projected timeline with implementation of the sensory integration techniques within the "Comfort Cove" and home-like environment as measured by documented behavior incidents and staff observation. Project Objective (Start Date: August 1, 2025): Data analysis will be conducted in 6-month intervals for each participating resident. The Adolescent-Adult Sensory Profile will be used to measure the success of the project over the two-year grant period. Assessment will be completed through pre- and post-test measures to determine the effectiveness of the program with a decrease in reported behavioral symptoms and improved psychological regulation by 75% within two years. Results from the Adolescent-Adult Sensory Profile based on use of sensory techniques should display a positive correlation with decreased reported behavioral incidents. The initial assessment will be given to all participating residents prior to engagement in sensory interventions and implementation of *"Comfort Cove"* to establish baseline scores. Ongoing monitoring and reevaluation every six months for necessary adjustments to meet individual sensory needs. This will determine the long-term effectiveness of sensory interventions in adults with cognitive impairments, including patients with dementia, to reduce, sustain, and impact behavioral and psychological symptoms.

c) The *"Comfort Cove"* will provide a direct sensory experience that will benefit qualifying residents experiencing behavioral and psychological symptoms related to dementia, within Southland Rehabilitation and Healthcare facility. The *"Comfort Cove"* project will allow residents access to an immersive experience to meet individualized sensory needs. The creation of a dedicated therapeutic sensory room will provide a safe and stimulating experience designed to meet individual sensory needs of our residents with behavioral and psychological symptoms related to dementia. This room will offer a range of multisensory experiences, including calming visual projections, soothing sounds, tactile stimulation, and aromatherapy, all carefully curated to promote relaxation, reduce anxiety, and redirect challenging behaviors.

d) *"Comfort Cove"* is designed to offer an immersive and therapeutic environment for residents with dementia, reducing agitation, enhancing mood, and improving overall quality of life. Following the completion of the project, the sensory room will continue to be implemented and utilized as a core component of dementia care strategy. The sensory room will continue to be implemented and utilized to provide an immersive sensory experience to improve quality of life in individuals with dementia. It is expected that staff will continue to engage residents in the use of sensory

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Texas

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TX Active CMP Funded Projects in CY 2025: 28

training/room after the project has ended. All project materials, including multisensory items, room modifications, and equipment are expected to be actively used and maintained as part of daily operations.

e) Not applicable

Funded Entity(ies):

Liberty County Hospital District No. 1 dba Southland Rehabilitation and Healthcare Center

Results of the Project:

PROJECT DATA: One resident was enrolled in the sensory program due to persistent wandering behaviors that resulted in physical fatigue, decreased nutritional intake, weight loss and limited participation in leisure activities secondary to poor sustained attention. Following several structured sensory room sessions, the resident demonstrated measurable improvements in functional tolerance and behavioral regulation. The resident's ability to sustain attention to tasks increased, and anxiety levels decreased, allowing her to remain seated for longer periods and engage in calming sensory activities, including listening to music. These changes were associated with observable reductions in facial expressions of distress and a decrease in repetitive behaviors. Behavioral improvements also extended to mealtime participation. The resident demonstrated reduced negative behaviors during meals, improved meal attendance, and increased acceptance of staff assistance. As a result, the residents' overall nutritional intake improved with noted weight gain. Overall outcomes observed included a reduction in wandering behaviors, improved attention to tasks, decreased anxiety and enhanced nutritional intake, supporting the effectiveness of sensory based interventions in addressing behavioral and functional concerns in residents with dementia. CHALLENGES: During implementation, the facility identified the need to strengthen staff education related to regulatory expectations and documentation requirements associated with sensory-based interventions. The facility also identified challenges in selecting an appropriate assessment tool for residents in the later stages of dementia. LESSONS LEARNED: 1) Ensuring consistent, compliant documentation across disciplines is essential to accurately reflect skilled services, justify ongoing interventions, and maintain alignment with regulatory requirements. 2) Traditional standardized assessments are often limited in capturing functional abilities, sensory processing needs, and behavioral responses in this population, necessitating the identification or adaptation of assessment measures that support person centered care and meaningful outcome tracking.

Texas

TX CMP Funds Expended for Administrative Uses in CY 2025: $211,415.70

TX CMP Funds Expended for Emergency Uses in CY 2025: $0.00

TX Active CMP Funded Projects in CY 2025: 28

Project Title: Improving Dementia Capability with CARES Dementia 5-Step Method

Unique Identifier: TX-0625-NHM-1346

Project Duration: 11/01/2025 to 10/31/2028

Total Amount of CMP Funds Approved for this Project: $419,832.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $0.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) This training includes evidence-based strategies from the Alzheimer's Association and allows staff to lead themselves through the modules, which utilize videos of real residents, certified nursing assistants (CNAs), other staff members, and families. *CARES*® offers an evidence-based 5-step method for dementia care that facilities can roll out consistently with nationally recognized online training and certification programs. In addition to meeting state requirements, the goal is to reduce resident behavior by having staff incorporate the *CARES® Dementia 5-Step Method* into all resident interactions. The goal is to help participating nursing homes improve care delivered to residents, especially those living with Alzheimer's Disease and related dementias. To do this, the project will help participating nursing homes implement a dementia training program for their staff using the *CARES*® dementia online training and certification programs.

b) OBJECTIVE 1: By the end of month 12, each nursing facility will train and certify a minimum of 5% of direct-care staff in each of three programs: *CARES® Dementia 5-Step Method* (5%), *CARES® Dementia Safety Topics* (5%), and *CARES® Dementia-Related Behavior* (5%). OBJECTIVE 2: By the end of month 24, each nursing facility will train and certify an additional 5% of direct-care staff (at a minimum) in *CARES® Dementia 5-Step Method* (5%), *CARES® Dementia Safety Topics* (5%), and *CARES® Dementia-Related Behavior* (5%). OBJECTIVE 3: By the end of month 36, each nursing facility will train and certify an additional 5% of direct-care staff (at a minimum) in *CARES® Dementia 5-Step Method* (5%), *CARES® Dementia Safety Topics* (5%), and *CARES® Dementia-Related Behavior* (5%). OBJECTIVE 4: Upon completion of the training, staff participants will be encouraged to fill out a short evaluation about the training program and what they learned. By the end of the project, each nursing facility will train and certify a minimum of 15% of direct care staff in each of the three *CARES*® online dementia care training and certification programs.

c) This project will benefit nursing home residents by giving all staff greater skills and knowledge about dementia. It directly benefits residents improving their person-centered care and quality of life in the

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On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Texas

TX CMP Funds Expended for Administrative Uses in CY 2025: $211,415.70
TX CMP Funds Expended for Emergency Uses in CY 2025: $0.00
TX Active CMP Funded Projects in CY 2025: 28

following ways: 1) Improving care delivery by teaching staff the evidence-based, non-pharmacological called the *CARES® Dementia 5-Step Method (C-Connect with the Person, A-Assess Behavior, R-Respond Appropriately, E-Evaluate What Works, and S-Share with Others)*. 2) Improving staff engagement with residents focusing on connecting with the residents in a deep and meaningful way. 3) Encouraging positive culture change based on person-centered values and practices, including choice, dignity, respect, self-determination, and purposeful living.

d) By sharing the project goals with direct care staff during the ramp up to the start of the project, each nursing home will be able to avoid a reduction in participation and engagement. This is an investment in their workforce by creating a more skilled, empathetic, and communicative team that will enrich and improve the quality of life of our residents. *CARES®* helps mitigate the risks of staff turnover and labor shortages as it is available during new employee orientation without having to wait for a scheduled education session.

e) Not applicable

Funded Entity(ies):

Nexion Health Management Inc

Results of the Project:

Interim results are not yet available.

Project Title: Improving Dementia Capability with CARES Dementia 5-Step Method

Unique Identifier: TX-0525-HCI-1347

Project Duration: 08/08/2025 to 07/31/2028

Total Amount of CMP Funds Approved for this Project: $449,820.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $0.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The training includes evidence-based strategies from the Alzheimer's Association and allows staff to lead themselves through the modules, which utilize videos of real residents, certified nursing

assistants (CNAs), other staff members, and families. *CARES*® offers an evidence-based 5-step method for dementia care that facilities can roll out consistently with nationally recognized online training and certification programs. In addition to meeting state requirements, the goal is to reduce resident behavior by having staff incorporate the *CARES*® *Dementia 5-Step Method* into all resident interactions. The goal is to help participating nursing homes improve care delivered to residents, especially those living with Alzheimer's Disease and related dementias. To do this, the project will help participating nursing homes implement a dementia training program for their staff using the *CARES*® dementia online training and certification programs.

b) OBJECTIVE 1: By the end of month 12, each nursing facility will train and certify a minimum of 5% of direct-care staff in each of three programs: *CARES*® *Dementia 5-Step Method* (5%), *CARES*® *Dementia Safety Topics* (5%), and *CARES*® *Dementia-Related Behavior* (5%). OBJECTIVE 2: By the end of month 24, each nursing facility will train and certify an additional 5% of direct-care staff (at a minimum) in *CARES*® *Dementia 5-Step Method* (5%), *CARES*® *Dementia Safety Topics* (5%), and *CARES*® *Dementia-Related Behavior* (5%). OBJECTIVE 3: By the end of month 36, each nursing facility will train and certify an additional 5% of direct-care staff (at a minimum) in *CARES*® *Dementia 5-Step Method* (5%), *CARES*® *Dementia Safety Topics* (5%), and *CARES*® *Dementia-Related Behavior* (5%). OBJECTIVE 4: Upon completion of the training, staff participants will be encouraged to fill out a short evaluation about the training program and what they learned. By the end of the project, each nursing facility will train and certify a minimum of 15% of direct care staff in each of the three *CARES*® online dementia care training and certification programs.

c) This project will benefit nursing home residents by giving all staff greater skills and knowledge about dementia. It directly benefits residents improving their person-centered care and quality of life in the following ways: 1) Improving care delivery by teaching staff the evidence-based, non-pharmacological called the *CARES*® *Dementia 5-Step Method (C-Connect with the Person, A-Assess Behavior, R-Respond Appropriately, E-Evaluate What Works, and S-Share with Others).* 2) Improving staff engagement with residents focusing on connecting with the resident in a deep and meaningful way. 3) Encouraging positive culture change based on person-centered values and practices, including choice, dignity, respect, self-determination, and purposeful living.

d) By sharing the project goals with direct care staff during the ramp up to the start of the project, each nursing home will be able to avoid a reduction in participation and engagement. This is an investment in their workforce by creating a more skilled, empathetic, and communicative team that will enrich and improve the quality of life of our residents. *CARES*® helps mitigate the risks of staff

Texas

TX CMP Funds Expended for Administrative Uses in CY 2025: $211,415.70
TX CMP Funds Expended for Emergency Uses in CY 2025: $0.00
TX Active CMP Funded Projects in CY 2025: 28

turnover and labor shortages as it is available during new employee orientation without having to wait for a scheduled education session.

e) Not applicable

Funded Entity(ies):

HealthCare Interactive, Inc.

Results of the Project:

PROJECT DATA: 1. COMPLETED - HealthCare Interactive (HCI) conducted Zoom welcome meetings. 2. COMPLETED - HCI conducted additional one-on-one Zoom meetings with individual site champions as part of our technical assistance. These will be ongoing as necessary to engage with sites. 3. COMPLETED - HCI conducted two virtual facilitated training Zoom-based *CARES* training where staff could join via Zoom and complete the training for *CARES Dementia 5-Step Method* with an official HCI CARES trainer. In this case, it was John Hobday, founder of HCI and developer of *CARES*. Based off the success of this virtual facilitated training, additional training has been scheduled. Assuming these continue to be well attended and successful, the project will continue to host them to help support sites. 4. COMPLETED - *CARES* online training and certification began and continues. To date, 47 staff members have begun *CARES Dementia 5-Step Method* (with 36 completing training and certification); seven staff members have begun *CARES Dementia Safety Topics* (with six completed); and eight staff members have begun *CARES Behavior* (with six completed). 5. COMPLETED - Technical assistance provided.

Project Title: The Java Project: Addressing Loneliness and Social Isolation

Unique Identifier: TX-0525-JGP-1348

Project Duration: 08/01/2025 to 07/31/2028

Total Amount of CMP Funds Approved for this Project: $90,000.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $30,000.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) Rates of loneliness in long-term care homes vary from 56% to 95.5% and are a risk factor for mortality. The *Java* programs are weekly resident peer support and mentoring programs facilitated

Texas

TX CMP Funds Expended for Administrative Uses in CY 2025: $211,415.70
TX CMP Funds Expended for Emergency Uses in CY 2025: $0.00
TX Active CMP Funded Projects in CY 2025: 28

by staff. These programs have been implemented by over 2,000 organizations in Canada and the United States. Published research documents show significantly reduced loneliness, a 30% decrease in depression scores, and a 60% increase in activity participation among residents. The three programs included in the *Java Project* are: the *Java Music Club*, a resident peer support program, *Java Memory Care*, peer support for residents living with dementia, and *Java Mentorship* which engages residents to support fellow residents who do not normally go to programs. All three programs are implemented by existing staff using live webinars, short training videos, and the step-by-step guides provided.

b) Project Goal: The goal of the *Java Project* is to improve quality of life of residents in nursing facilities by decreasing loneliness and social isolation through the implementation of three evidence based, standardized peer support activity programs developed by Dr. Kristine Theurer, founder of Java *Group Programs*. Quantifiable Objectives: The project objectives are to implement weekly peer support and mentoring groups using *Java* materials and methods, to reduce loneliness and social isolation, and increase happiness among participants. To track changes in social well-being, long-term care homes will use a single point assessment of social well-being called the Java Scale. The Java Scale is an observational tool that measures social well-being in a way that allows for inclusion of all residents, including residents living with advanced dementia. The Java Scale aims to assess if there are any observable improvements in participants before and while the *Java Project* is underway. In this scale, social participation, emotional connection, and happiness are taken as positive indicators of social well-being.

c) The *Java Project* involves an innovative approach based on residents helping each other to specifically target loneliness and social isolation. Nursing facility residents will benefit from the *Java* programs by developing stronger social and emotional bonds with each other. Through sharing grief, sorrow and happiness in the *Java* groups, empathetic connections are built, and these social relationships carry over to other activities and nursing home life. Social isolation, loneliness, and depression are associated with poor quality of life and poor quality of care. Residents will directly benefit from new, close relationships and from having a meaningful purpose in helping their peers.

d) The *Java* programs are designed to continue indefinitely in the home with no additional costs. The programs are a one-time purchase, with no ongoing fees. Recorded trainings are included in the materials and can be used on an ongoing basis to train new employees. The communities are encouraged to join ongoing free live refresher and new staff training sessions scheduled regularly by *Java*.

e) Not applicable

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Texas

TX CMP Funds Expended for Administrative Uses in CY 2025: $211,415.70

TX CMP Funds Expended for Emergency Uses in CY 2025: $0.00

TX Active CMP Funded Projects in CY 2025: 28

Funded Entity(ies):

Java Group Programs LLC

Results of the Project:

PROJECT DATA: Number of communities that received the *Java Music Club* training: six. Number of communities that implemented the *Java Music* program: four. Total number of sessions offered: 16. Total number of residents participating in the *Java Project*: 45
All the communities received the program materials and participated in the training. The project measures will be completed in the third quarter (February through April 2026) as Thanksgiving and Christmas events will dominate facilities' activities during the second quarter (November 2025-January 2026).

Project Title: LeadingAge Texas' Leadership Collective Training

Unique Identifier: TX-0625-SAJ-1349

Project Duration: 09/05/2025 to 08/31/2027

Total Amount of CMP Funds Approved for this Project: $5,000.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $0.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) This purpose of this project is to provide leadership training for two employees of the nursing home. Leadership training is a crucial component of the business as it directly impacts the quality of care, staff morale, and overall operation of the facility. This project is to have two employees enroll in *LeadingAge Texas' Leadership Collective Training* program which runs from October 2025 through May 2026 and then implements their learnings at Seven Acres over the following 18 months.

b) Each participant in this training will set their own goals and objectives depending on their individual role, strengths, learning gaps, and areas of interest. The following outcome metrics will be monitored and evaluated from the time the training is complete (May 2026) through implementation of skills and techniques acquired, on a quarterly basis between May 2026 and August 2027, including at the candidate's annual review. IMPROVE COMMUNICATION SKILLS: OBJECTIVE: Enhance the ability to effectively communicate with staff, residents, and families. GOAL: After training, the employee should lead at least one team meeting per quarter, presenting a topic relevant to their role, and

Texas

TX CMP Funds Expended for Administrative Uses in CY 2025: $211,415.70
TX CMP Funds Expended for Emergency Uses in CY 2025: $0.00
TX Active CMP Funded Projects in CY 2025: 28

demonstrating clear communication. They will ensure that goals, expectations, and resident needs are understood by their audience. Progress will be reviewed quarterly and during annual review by manager and from staff survey feedback on presentations. DEVELOP CONFLICT RESOLUTION CAPABILITY: OBJECTIVE: Equip the participant with skills and techniques to resolve disputes and address conflicts efficiently and professionally. GOAL: Have the employee resolve at least one interpersonal conflict or team disagreement each month, using techniques learned to encourage positive resolutions and maintain morale. Progress will be reviewed quarterly and at annual review by manager and survey of participants and tracking the success rate of resolutions of disputes/conflicts. EFFECTIVE DELEGATION: OBJECTIVE: Help the employee delegate tasks appropriately to improve operational efficiency. GOAL: Over the next three months (and on an ongoing basis), identify three to four responsibilities to delegate, identify who will manage these tasks, train them, and follow up to make sure tasks are completed on time and correctly by the new staff assignee. Progress will be reviewed quarterly and at annual review by the manager to ensure that the candidate is choosing proper tasks to delegate and following through to ensure training and tasks are being completed.

c) Leadership training for staff in nursing homes directly benefits residents by improving the quality of care, enhancing safety, and fostering a more compassionate environment. The training aims to improve nursing home residents' quality of care by improving communication amongst staff, residents, and families, equip participants with skills and techniques to resolve and address disputes or conflicts efficiently, and improve operational efficiency.

d) The recipient of this training will be able to reinforce their learning, seeking improvement in the skills, and integrating leadership principles into daily activities and operations. The skills learned through the LeadingAge Texas program can be built upon through taking advantage of ongoing education and training opportunities. Skills can be fine-tuned through practical application by leading team meetings, participating in quality improvement initiatives and becoming a mentor to other employees. Additionally, being part of the LeadingAge Leadership Collective will introduce the employee to a circle of professionals from facilities around the state, which will become a valued resource of support.

e) Not applicable

Funded Entity(ies):

Seven Acres Jewish Senior Care Services, Inc.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Texas

TX CMP Funds Expended for Administrative Uses in CY 2025: $211,415.70
TX CMP Funds Expended for Emergency Uses in CY 2025: $0.00
TX Active CMP Funded Projects in CY 2025: 28

Results of the Project:

Interim results are not yet available.

Project Title: iCARE Dementia Training Project

Unique Identifier: TX-0525-ADC-1350

Project Duration: 08/01/2025 to 07/31/2026

Total Amount of CMP Funds Approved for this Project: $184,500.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $0.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The *iCARE Dementia Training Project* is a training project to improve the quality of care in 37 nursing homes over a 1-year period in the state of Texas. The project aims to improve nursing home residents' quality of care and quality of life by offering specialized training which will equip caregivers with critical skills and knowledge to help support residents on their personal journey with dementia.

b) The goals of the Texas *iCARE Dementia Training Project* are to 1) improve the quality of life of residents, by 2) improving the interactions between staff and residents living with dementia. To achieve these goals several specific, measurable, achievable, relevant, and timely objectives will be achieved over the project's one-year period. The project's thirty-seven (37) participating communities will attain: 20% improvement in the quality of interactions between staff and residents living with dementia, and 20% improvement the residents' quality of life. To track both measures, the project will be using the Staff/Resident Interaction and Quality of Life Assessment by Staff Survey outcome survey. Under the supervision of the community's project leaders and with assistance from America's Dementia Coach (ADC), the staff who participated in the training will complete this survey online. ADC will compile the resulting reports demonstrating improvements and variations in the quality of the interactions between residents and their neighbors and staff. The ADC Project Administrator (Melonie Tindall) will be responsible for managing data collection. The data will be entered into the *iCARE Project* Results Measurement Historical Tracking spreadsheet which will provide quarterly results and historical overview and perspective of the project's success. ADC will submit comprehensive quarterly reports that will include Staff/Resident Interaction and Quality of Life

Texas

TX CMP Funds Expended for Administrative Uses in CY 2025: $211,415.70
TX CMP Funds Expended for Emergency Uses in CY 2025: $0.00
TX Active CMP Funded Projects in CY 2025: 28

Assessment by Staff Survey Reports; Success Stories contributed by staff at the participating communities; and *iCARE Project* Results Measurement Historical Tracking spreadsheet.

c) Effective dementia training allows senior living professionals to embrace the belief that wellbeing encompasses all the dimensions of personhood, and for residents to reconnect with a sense of self that inspires autonomy, freedom from boredom, and opportunities for better interactions with their caregivers. An understanding of the underlying challenges faced by residents undergoing cognitive decline leads to better communication and enriched interactions. Specialized training equips caregivers with critical skills and knowledge to help support residents on their personal journey with dementia. Comprehensive, dementia-specific training can also provide senior living staff with coping strategies during difficult interactions with residents.

d) Refresher trainings, tailored to address community-specific and staff needs, will be provided during the last two months of the project to reinforce person-centered care principles. As part of this one-year project's implementation, the project will also conduct quarterly peer-to-peer huddles with staff that will reinforce the knowledge learned during the training. In addition, the project's participating communities will have access to online training videos and an e-newsletter with tips and access to free continuing education units (CEUs) will be distributed for staff to maintain their certification.

e) Not applicable

Funded Entity(ies):

America's Dementia Coach

Results of the Project:

PROJECT DATA: Over the one-year project period, the 37 participating communities are working toward the following measurable outcomes: (1) A 20% improvement in the quality of staff–resident interactions, and (2) A 20% improvement in resident quality of life. Progress Measurement and Oversight America's Dementia Coach (ADC) monitors project progress through a structured quarterly reporting process. Quarter 2 reporting activities included continued collection and review of: Staff–Resident Interaction and Quality of Life survey data; Qualitative success stories and staff feedback from participating communities; and ongoing historical tracking of project metrics to measure trends over time. Melonie Tindall continues to partner closely with community project leaders (CPLs) to address identified challenges, reinforce project expectations, and provide ongoing assistance to support consistent participation and outcomes across all communities. Quarter 2 Progress Summary Baseline survey data were collected following staff training during Quarter 1. During Quarter 2, participating communities were encouraged to continue survey

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Texas

TX CMP Funds Expended for Administrative Uses in CY 2025: $211,415.70
TX CMP Funds Expended for Emergency Uses in CY 2025: $0.00
TX Active CMP Funded Projects in CY 2025: 28

participation to support longitudinal measurement of staff engagement and resident well-being. Quarter 2 data have been incorporated into the historical tracking framework and will be used to assess incremental progress toward project outcome goals in subsequent reporting periods. Analysis of the data indicates a 10.9% quarter-over-quarter improvement in average scores from Quarter 1 to Quarter 2, reflecting positive directional progress toward the project's targeted outcomes. Results will be updated quarterly to reflect continued progress in staff engagement and resident well-being. CHALLENGES: During the first two quarters of the project, four primary challenges were identified. Each presented opportunities for improved communication, flexibility, and strengthened collaboration with participating communities. (1) Leadership Turnover - Several administrators and project leads transitioned out of their roles during the first quarter. (2) Ownership Changes - Seven of the thirty-seven participating communities experienced ownership transitions during the reporting period. (3) Staffing Constraints - Staffing shortages continued to present challenges across multiple communities, impacting the ability to schedule and complete training as originally planned. (4) Illness and Other Disruptions - A small number of communities experienced illness-related disruptions, including COVID-19 outbreaks and other unforeseen factors, necessitating the postponement and rescheduling of training dates.

Project Title: Rhythmic Abilities in Long-Term Care

Unique Identifier: TX-0625-RPTH-1354

Project Duration: 09/01/2025 to 08/31/2027

Total Amount of CMP Funds Approved for this Project: $9,797.78

Total Amount of CMP Funds Expended During CY 2025 for this Project: $0.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The facility plans to introduce a structured drumming program as a non-pharmacological approach to address behavioral symptoms associated with dementia, such as sundowning. Drawing on research and successful outcomes from sister facilities, the program will use music to stimulate memory, encourage movement, and foster social interaction, offering residents a meaningful and therapeutic alternative to medication. The project will implement a music-based intervention aimed at improving the quality of life for its residents, 82% of whom suffer from dementia or cognitive impairments.

Texas

TX CMP Funds Expended for Administrative Uses in CY 2025: $211,415.70
TX CMP Funds Expended for Emergency Uses in CY 2025: $0.00
TX Active CMP Funded Projects in CY 2025: 28

b) Results will be measured through July 2027 to demonstrate the effectiveness of the drumming program. The focus will be resident participation and increased socialization as reflected in quarterly surveys. The quarterly survey will be completed by staff members present during the program. If a resident is unable to communicate answers, staff will assist in completion of the questions.

c) The drumming program is predicted to decrease stress, improve interpersonal relationships, increase volitional movement, decrease behavioral and psychological symptoms, and improve quality of life. It will provide an effective intervention for residents with dementia or cognitive impairments to express themselves.

d) The drumming group will be performed four times per month, indefinitely. The nursing home has seen the benefits of this activity in the residents and believes that this program will change the lives of residents. The facility strives to make this a stable program and have developed methods to improve consistency amongst staff members. The therapy department will be the key components of program implementation. By training the staff in the protocol and methods of facilitation, the program can be led by any of the staff members.

e) Not applicable

Funded Entity(ies):

Liberty County Hospital District No. 1 dba River Pointe of Trinity Healthcare and Rehabilitation

Results of the Project:

Interim results are not yet available.

Project Title: Oral Health Training Project for Nursing Homes

Unique Identifier: TX-1223-UTHSA-1410 / TX-0219-UTHSA-234

Project Duration: 07/10/2024 to 07/09/2027

Total Amount of CMP Funds Approved for this Project: $1,559,409.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $157,051.76

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Texas

TX CMP Funds Expended for Administrative Uses in CY 2025: $211,415.70
TX CMP Funds Expended for Emergency Uses in CY 2025: $0.00
TX Active CMP Funded Projects in CY 2025: 28

a) The program will provide evidence-based, oral health training to nursing home aides and caregivers. This project will enhance oral health among nursing home residents in and around San Antonio by delivering evidence-based oral health training. It will also increase the oral health knowledge of nursing home aides and caregivers by educating them on the importance of oral health for overall well-being. The training encompasses a broad range of topics, including daily oral hygiene, recognizing oral diseases, managing oral pain, collaborating with dental professionals, and developing individualized oral care plans for residents.

b) The goal of the project is to equip nursing home staff with the knowledge and skills needed to maintain and improve the oral health of the nursing home residents. By improving oral health care in nursing homes, the project aims to enhance the quality of life for residents and reduce the incidence of serious health complications related to poor oral health.

c) The primary benefit to nursing home residents is the improvement of oral health among residents. By training nursing home staff on proper oral hygiene practices, the project aims to reduce the prevalence of common oral health issues, including tooth decay, gum disease, and oral infections. Other benefits include enhanced overall health, increased comfort and well-being, personalized care, empowerment, and autonomy, as well as preventive care.

d) To increase oral health knowledge of nursing home aides, residents, and caregivers with an emphasis on the importance of oral health for overall health.

e) Not applicable

Funded Entity(ies):

University of Texas Health Science Center at San Antonio

Results of the Project:

Interim project results: 11 facilities (115 individual staff members) have completed the oral health training during the second year of the project. Credentials for the staff trained are the following: 77 Certified Nursing Assistants; 14 Licensed Vocational Nurses; 11 Registered Nurses; two Resident Aides; and 11 Administrative/other staff. Baseline assessments were conducted to determine the staff's oral health knowledge. One hundred fourteen (114) nursing home staff members completed both a pre-training assessment and a post-training assessment. The average oral health post assessment scores were 11% higher following the oral health training.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Iowa

IA CMP Funds Expended for Administrative Uses in CY 2025: $128,834.48

IA CMP Funds Expended for Emergency Uses in CY 2025: $0.00

IA Active CMP Funded Projects in CY 2025: 7

Project Title: Akron Care Center's Quality Improvement Initiative

Unique Identifier: IA-1122-ACC-1032

Project Duration: 03/01/2023 to 02/28/2026

Total Amount of CMP Funds Approved for this Project: $44,688.26

Total Amount of CMP Funds Expended During CY 2025 for this Project: $7,300.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of the project is to utilize engagement technology for group activities, therapy, and one-on-one activities to improve the quality of care and resident satisfaction.

b) Increase participation in group and individualized activities and a more personal engagement of residents based on knowledge obtained from individual profiles.

c) Decrease restlessness, tiredness, and sadness, but increase in residents feeling of less connection to family, friends, and nursing home staff. Increase staff knowledge of the resident and resident's participation in activities.

d) One nursing home

e) Not applicable

Funded Entity(ies):

Akron Care Center

Results of the Project:

Interim project results include: 1) 20% resident participation in the Quality of Life/Social Connection Survey demonstrating participation in social activities and communication with family and friends, 2) system usage, and 3) creation of individual resident profiles. The survey was completed with 48% of the residents. There was a significant turnover of residents at the facility with the loss of long term actively participating residents, 60% of residents participated in social activities at least a few times a week. Residents felt like they communicated with family and friends more frequently. Challenges in 2025 involved entire activity department turnover and devices not working. New activity staff have remained steady and problems with devices have been resolved.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Iowa

IA CMP Funds Expended for Administrative Uses in CY 2025: $128,834.48

IA CMP Funds Expended for Emergency Uses in CY 2025: $0.00

IA Active CMP Funded Projects in CY 2025: 7

Project Title: Iowa iCARE Dementia Training Project

Unique Identifier: IA-0524-ADC-1166

Project Duration: 08/01/2024 to 07/31/2025

Total Amount of CMP Funds Approved for this Project: $229,760.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $0.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of the project is to provide specialized training to 47 skilled nursing facilities, equipping caregivers with the critical skills and knowledge necessary to support residents on their dementia journey.

b) Survey results will demonstrate a 20% improvement in the quality of interactions between staff and residents, an increase in the number of certified dementia practitioners in Iowa, and an improvement in the quality of life of skilled nursing community residents.

c) Residents will be supported by staff equipped to address their concerns and behaviors associated with dementia by increasing their skills and knowledge to support residents with dementia.

d) Forty-seven (47) nursing homes

e) Not applicable

Funded Entity(ies):

America's Dementia Coach

Results of the Project:

Specialized dementia training was provided to 47 communities. The achievement of goals was met with the following results: Goal #1, 20% improvement in the quality of interactions between staff and residents with dementia, 36% was achieved. Goal #2, Increase the number of certified dementia practitioners. Results: trainings were completed for all 47 facilities resulting in 164 certifications. A total of 696 participants from all facilities qualified to become Certified Dementia Practitioners. Goal #3, Improve resident quality of life resulted in a culture shift toward person-centered care. Family members expressed increased satisfaction with staff's ability to connect with and care for their loved ones. Risks encountered included staff turnover

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On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Iowa

IA CMP Funds Expended for Administrative Uses in CY 2025: $128,834.48
IA CMP Funds Expended for Emergency Uses in CY 2025: $0.00
IA Active CMP Funded Projects in CY 2025: 7

and limitations of remote training. Remedies implemented included a more structured onboarding protocol and standardized communication, creation of enhanced strategies for engagement and monitoring post-training certification because staff delayed or failed to complete post-training certification requirements. Lessons learned include proactive communication that drives success, sustainability requires continued support and staff empowerment to provide resident benefit.

Project Title: Certified Dementia Practitioner Credentialing Implementation

Unique Identifier: IA-1024-WRS-1224

Project Duration: 02/01/2025 to 12/31/2027

Total Amount of CMP Funds Approved for this Project: $30,000.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $14,188.44

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of the project was to launch a certified dementia practitioner credentialing program.

b) The goal was to train two internal team members as certified Alzheimer's and dementia care trainers and provide seminars to each of the participating nursing homes.

c) Residents will benefit by a shift from caregiver-centered to person-centered care. This training will equip caregivers to join residents in their perceived reality, reducing challenging behaviors and creating a better caregiving experience.

d) Six nursing homes within the Wesley Retirement network.

e) Not applicable

Funded Entity(ies):

Wesley Retirement Services

Results of the Project:

Two internal team members completed certification with the National Council. Seminars were completed for all facilities, resulting in 41 participants qualifying for certification.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Iowa

IA CMP Funds Expended for Administrative Uses in CY 2025: $128,834.48

IA CMP Funds Expended for Emergency Uses in CY 2025: $0.00

IA Active CMP Funded Projects in CY 2025: 7

Project Title: Cycling Without Age

Unique Identifier: IA-1024-HIR-1225

Project Duration: 01/08/2025 to 01/07/2027

Total Amount of CMP Funds Approved for this Project: $15,000.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $15,000.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of the project is to utilize volunteer trishaw pilots to take residents as passengers on bike rides.

b) Improve the quality of life of residents through keeping track of booked trishaw rides, document feedback from residents, family members and staff and document improvement in physical health and mobility.

c) This will help the resident to increase physical activity levels, reduce social isolation, and improve overall quality of life.

d) One nursing home

e) Not applicable

Funded Entity(ies):

Presbyterian Homes and Services, H

Results of the Project:

This project is seasonal and dependent on weather conditions in Iowa. Thirty-eight (38) rides were completed after the trishaw arrived. Multiple residents have requested rides and are enjoying them. Family members join residents during the rides. Feedback has been positive. Residents enjoy the views and learn about their community and don't want to end their rides. The rides have increased the motivation to participate in activities because residents have requested to be awoken from naps to ride. One challenge was a mechanical problem with the trishaw battery that was resolved.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Iowa

IA CMP Funds Expended for Administrative Uses in CY 2025: $128,834.48

IA CMP Funds Expended for Emergency Uses in CY 2025: $0.00

IA Active CMP Funded Projects in CY 2025: 7

Project Title: Furry Friends Project

Unique Identifier: IA-1024-AIN-1227

Project Duration: 02/01/2025 to 01/31/2026

Total Amount of CMP Funds Approved for this Project: $368,344.15

Total Amount of CMP Funds Expended During CY 2025 for this Project: $342,871.60

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of the project is to provide robotic companion pets to residents living with dementia to reduce loneliness.

b) Improve the quality of life of residents living with dementia by 20%; To reduce the incidence of depressive symptoms by 20%; and to track the frequency of the resident interactions with his/her companion pet.

c) Meet psychosocial needs of connection, comfort, and communication. The robotic pets can facilitate reminiscence with improved self-esteem, provide residents with sense of fulfillment and comfort in their lives. It inspires residents to share memories resulting in increased social interactions, spontaneous conversations, attention to an activity and an interest in being more involved. The robotic pets can be helpful in treating anxiety and reduce depression.

d) Seventy-nine (79) nursing homes

e) Not applicable

Funded Entity(ies):

Ageless Innovation

Results of the Project:

The goal to improve the quality of life for residents living with dementia improved from an average of 2.5 to 3.60. The average score for reduction in depressive symptoms increased from 3.23 to 3.79. Facilities provided many positive testimonials and photographs showing the residents with their adoptive pets. Confidentiality was maintained in the photographs. Facilities described decreases in adverse and disruptive

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Iowa

IA CMP Funds Expended for Administrative Uses in CY 2025: $128,834.48
IA CMP Funds Expended for Emergency Uses in CY 2025: $0.00
IA Active CMP Funded Projects in CY 2025: 7

behaviors and that residents are opening up and more social. This project was highlighted on the local news station in Des Moines, Iowa.

Project Title: SNFClinic

Unique Identifier: IA-0325-LTCC-1318

Project Duration: 04/01/2025 to 03/31/2028

Total Amount of CMP Funds Approved for this Project: $747,000.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $0.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of the project is to provide an online electronic learning management system that provides clinical staff training and resident care resources.

b) Improve the quality measure outcomes used by CMS resulting in an average increase of 30%; improve the CMS star rating for 50% of the nursing homes.

c) Provide staff training and resident care resources to improve the quality of care provided to residents.

d) Fifty (50) nursing homes

e) This project has been implemented in nine other states.

Funded Entity(ies):

Long-Term Care Consultants, LLC

Results of the Project:

The participating nursing homes' Minimum Data Set (MDS) Quality Measure performance data was not available during October 1, 2025, through December 31, 2025. The applicant shared that August 15, 2025, CMS announced that it was freezing its publication of nursing home performance data to ensure data accuracy after behind-the-scenes technical changes to its Care Compare website. On January 9, 2026, CMS announced that behind the scenes technical changes were complete. CMS Quality and Safety Special Alert Memo Ref: QSSAM-26-01-NH.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Iowa

IA CMP Funds Expended for Administrative Uses in CY 2025: $128,834.48
IA CMP Funds Expended for Emergency Uses in CY 2025: $0.00
IA Active CMP Funded Projects in CY 2025: 7

Project Title: Park Centre - Memory Care Activity Enhancements

Unique Identifier: IA-0325-PKC-1319

Project Duration: 08/01/2025 to 07/31/2026

Total Amount of CMP Funds Approved for this Project: $4,747.58

Total Amount of CMP Funds Expended During CY 2025 for this Project: $0.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of the project is to create a homelike environment to improve health span. The environment will include interactive life stations to allow residents to independently engage in activities.

b) To decrease the number of falls in the memory care unit (baseline 44.2%); to decrease the number of behaviors affecting others (baseline 18.6%); to decrease the use of psychotropic medications (baseline 14.9%); to provide results from the We Care Connect survey and direct care staff interviews.

c) This intentional interest-based program will increase social interaction among our residents and team. The facility is moving to smaller more frequent groups for decreased stimuli and increased resident one-on-one interactions.

d) One nursing home

e) Not applicable

Funded Entity(ies):

Park Centre (Wesley Life)

Results of the Project:

Due to a larger construction project to redevelop the Centre's Memory Care space, the project team is waiting for construction to be completed before purchasing the project items. In the fourth quarter of 2025, Park Centre's Director of Well-Being resigned. She was the team member who was going to purchase the budgeted items. The Centre paused purchasing until the new leader started. The position was filled internally, and the items were ordered in January 2026.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

State Civil Money Penalty Reinvestment Projects Funded in Calendar Year (CY) 2025
Kansas City Long-Term Care Location

Kansas

KS CMP Funds Expended for Administrative Uses in CY 2025: $77,307.44

KS CMP Funds Expended for Emergency Uses in CY 2025: $0.00

KS Active CMP Funded Projects in CY 2025: 5

Project Title: Back to Basics: Building Blocks to Cultivate Compassion, Empathy, and Life Engagement to Improve Quality of Life for Long-Term Care Residents

Unique Identifier: KS-1223-AGE-1097

Project Duration: 03/01/2024 to 02/28/2025

Total Amount of CMP Funds Approved for this Project: $147,517.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $5,467.50

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The project aims to improve the quality of life for residents in 29 skilled nursing facilities (SNFs) through a multi-faceted approach that prioritizes physical, emotional, and social well-being. The project will feature one-hour micro-learning device-enabled courses designed to build empathy and compassion by closing skill gaps and promoting practical application in caring for long-term care residents.

b) The project will feature one-hour micro-learning device-enabled courses designed to build empathy and compassion by closing skill gaps and promoting practical application in caring for long-term care residents.

c) Promoting mental and emotional well-being is essential and should be a vibrant element of organizational culture. Investing in staff training to enhance empathy and communication skills is vital, as it contributes to the emotional well-being of residents. Creating a comfortable environment and respecting residents' autonomy and dignity is integral to improving their quality of life in nursing homes.

d) Facility staff can learn to understand individuals with dementia better, ensuring the highest quality of care and understanding is provided to residents.

e) Not applicable

Funded Entity(ies):

AGE-u-cate Training Institute

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

State Civil Money Penalty Reinvestment Projects Funded in Calendar Year (CY) 2025
Kansas City Long-Term Care Location

Kansas

KS CMP Funds Expended for Administrative Uses in CY 2025: $77,307.44
KS CMP Funds Expended for Emergency Uses in CY 2025: $0.00
KS Active CMP Funded Projects in CY 2025: 5

Results of the Project:

Improving the quality of life for nursing home residents involves a multi-faceted approach that prioritizes their physical, emotional, and social well-being. The project will have one-hour micro-learning device-enabled courses created to build empathy and compassion by closing skill gaps and fostering practical application in caring for long-term care residents. Promoting mental and emotional well-being is essential and should be a vibrant element of organizational culture. Investing in staff training to enhance empathy and communication skills is vital, as it contributes to the residents' emotional comfort. Creating a comfortable environment and respecting residents' autonomy and dignity is integral to improving their quality of life in nursing homes. By learning how to better understand individuals with dementia, facility staff can ensure the best quality of care and understanding is given to the residents. Dementia Live coaches completed a six-hour online training course with scores ranging between 78% - 97%. The facility-appointed project manager distributed the REVEAL Aging course "Foundation for Dementia Care" to facility staff and 117 out of 117 scored 75% or above. The project manager also distributed REVAL Aging courses, *Cultivating Empathy* and *Compassionate Touch* Caregiver to facility staff and five of 22 scored 75% or above. Ninety-two (92) certified nursing home staff from five facilities completed the Cultivating Empathy course, scoring 75% or above. One hundred thirty-five (135) residents engaged with Flashback in nine (9) facilities, with staff observing 121 (89%) expressing a positive response (smiling laughing, engaging). Facilities reported the number of residents who were offered *Compassionate Touch* by the staff and the number of residents who expressed a positive response. The expected result was 30% but 61 residents who were offered *Compassionate Touch* by staff received a positive response from "the majority" of residents (51%). Ninety-two percent (92%) of facility submissions indicated that the staff considered *Dementia Live* a positive experience. Lessoned learned over the course of the project was that offering all courses at the beginning of the project instead of pacing it out will give facilities more time to implement. A decision mid-stream to provide unlimited access to the three REVEAL Aging courses via Vimeo link, verses a sign-on to the Learning Management System, which created a headache for participants. The change turned out to be a good move because the engagement with the REVEAL Aging courses accelerated. Virtual meetings were scheduled in advance with an invitation to project leaders and Dementia Live coaches. As a supplement to the lack of attendance, four implementation resources were emailed in August, September, November, and February.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Kansas

KS CMP Funds Expended for Administrative Uses in CY 2025: $77,307.44

KS CMP Funds Expended for Emergency Uses in CY 2025: $0.00

KS Active CMP Funded Projects in CY 2025: 5

Project Title: Music From the Heart

Unique Identifier: KS-0524-HTS-1163

Project Duration: 07/01/2024 to 06/30/2027

Total Amount of CMP Funds Approved for this Project: $29,997.90

Total Amount of CMP Funds Expended During CY 2025 for this Project: $9,512.06

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The project aims to improve the quality of care for residents in two skilled nursing facilities by conducting live, therapeutic music sessions tailored to each resident's physical, emotional, and spiritual needs.

b) The project aims to improve the perceived quality of life of 75% of the participating residents following live, therapeutic 30-minute music sessions.

c) Live music played therapeutically by Heartland Therapeutic Strings' musicians fosters an environment in which healing (a balance between body, mind, and emotions) can occur in residents.

d) Heartland Therapeutic Strings will improve the quality of care for residents by conducting live, therapeutic music sessions tailored to each resident's physical, emotional, and spiritual needs.

e) Not applicable

Funded Entity(ies):

Heartland Therapeutic Strings

Results of the Project:

The goals for this project were to: (1) assess the degree to which the residents feel safe working with our therapeutic musician, (2) assess the degree to which the residents feel a sense of respect and companionship without therapeutic musician, and (3) assess the degree to which residents feel that live, therapeutic music has made a difference in the resident's perception of quality of life. A total of 22 residents from both facilities were identified. Of these, only 18 residents were surveyed. The results clearly show that residents feel safe with the therapeutic musician, a sense of respect and companionship with the therapeutic musician, and an overall sense of improved wellbeing because of the live, therapeutic music

Kansas

KS CMP Funds Expended for Administrative Uses in CY 2025: $77,307.44
KS CMP Funds Expended for Emergency Uses in CY 2025: $0.00
KS Active CMP Funded Projects in CY 2025: 5

sessions Heartland Therapeutic Strings (HTS) has been conducting over the last 18 months. Location #1: I felt safe during the session: 8/10 Strongly Agreed, 2/10 Agreed. The musician treated me with respect: 9/10 Strongly Agreed, 1/10 Agreed. I enjoyed the musician's company: 8/10 Strongly Agreed, 2/10 Agreed. The music helped me to relax: 8/10 Strongly Agreed, 2/10 Agreed. I began to feel better by the end of the session: 8/10 Strongly Agreed, 2/10 Agreed. Location #2: I felt safe during the session: 2/8 Strongly Agreed, 5/8 Agreed, 1/8 Not Sure. The musician treated me with respect: 3/8 Strongly Agreed, 5/8 Agreed. I enjoyed the musician's company: 2/8 Strongly Agreed, 6/8 Agreed. The music helped me to relax: 3/8 Strongly Agreed, 5/8 Agreed. I began to feel better by the end of the session: 2/8 Strongly Agreed, 6/8 Agreed.

Project Title: SNFClinic

Unique Identifier: KS-0724-LTCC-1187

Project Duration: 01/01/2025 to 12/31/2027

Total Amount of CMP Funds Approved for this Project: $642,420.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $194,331.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) This project seeks to provide comprehensive training for nursing facility staff through a centralized technology-based system.

b) The program will target facilities with high turnover rates and will provide these facilities with a centralized system for training, staff management, and resident care resources. Following completion of this program, the applicant anticipates a reduction in survey deficiencies, improvement in scope and severity tags, improvement in compliance, increase of overall quality of care, reduction in high-risk long-stay residents with pressure ulcers, and increase in short-stay residents who made improvements in function.

c) By completing the training on the online electronic learning management system, care for residents should improve resulting in less deficient practices.

d) The *SNFClinic* project is an online electronic learning management system that provides clinical and in-service staff training and resident care resources designed to directly improve the quality of care provided at skilled nursing home facilities.

Kansas

KS CMP Funds Expended for Administrative Uses in CY 2025: $77,307.44
KS CMP Funds Expended for Emergency Uses in CY 2025: $0.00
KS Active CMP Funded Projects in CY 2025: 5

e) Not applicable

Funded Entity(ies):

Long-Term Care Consultants, LLC

Results of the Project:

Goal 1: On average, a thirty percent (30%) improvement across all participating nursing homes in the Minimum Data Set ("MDS") Quality Measures ("QM") used by CMS to calculate the QM star rating. Average improvement: 44%. Forty of the 42 facilities (95%) improved in at least one Minimum Data Set (MDS) Quality Measure (QM) category. On average, the facilities improved in 44% of the measured MDS QM categories. This exceeded the Goal 1 outcomes. Goal 2: Fifty percent (50%) of the participating nursing homes' QM star matings will improve. 3.0-star average. Thirteen of the 42 facilities (31%) increased their QM star rating. This exceeds the goal 2 expected outcomes. Fourteen of the 42 facilities' (33%) QM star rating went down. The remaining 15 facilities' (36%) QM star ratings were unchanged. The facilities' average QM star rating remained the same. Project Issues and Challenges: As previously reported, factors outside of Long-Term Care Consultant's (LTCC) control have caused delays in CMS's publication of project data. Project data published on February 25, 2026, is current through September 30, 2025. Since the federal government shutdown last fall, CMS has been systematically catching up on data publication. LTCC is therefore confident that timely project data will be available as the project progresses.

Project Title: ALZPro, a Long-Term Care (LTC) Workforce Model: Workforce and Family Education, Training, and Support for Sustainable, Person-Centered Dementia Care

Unique Identifier: KS-0924-AZS-1210

Project Duration: 02/01/2025 to 01/31/2028

Total Amount of CMP Funds Approved for this Project: $179,174.84

Total Amount of CMP Funds Expended During CY 2025 for this Project: $40,800.35

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Kansas

KS CMP Funds Expended for Administrative Uses in CY 2025: $77,307.44
KS CMP Funds Expended for Emergency Uses in CY 2025: $0.00
KS Active CMP Funded Projects in CY 2025: 5

a) The project implements an online person-centered dementia care program in conjunction with the *essentiALZ* exam, which demonstrates knowledge of quality care dementia practices and empowers staff to manage the complex challenges dementia can bring, and allows individuals living with dementia the opportunity to receive personalized, person-centered quality care.

b) The project will utilize *Project ECHO (Extension for Community Healthcare Outcomes)* platform, an evidence-based distance-learning model to bring together members of the long-term care communities and multidisciplinary experts for a six-session collaborative learning series. Quantifiable objectives goals: 80% redemption rate of the care provider training, 85% satisfaction with professional training program, 80% pass rate for the *essentiALZ* certification, 20% increase in professional provider knowledge, and 20% increase in professional provider confidence, 85% satisfaction with the family caregiver education.

c) By learning how to better understand residents with Alzheimer's and dementia, facility staff and family can ensure the best quality of care and understanding is given the individual residents.

d) The goal of this project is to create a network for training, connection, engagement, education, and support for professional care providers of individuals living with dementia and resident families to positively written resources such as brochures, booklets, information cards and other materials are another form of reinforcing training/education for both staff and families and allow for information to be disseminated to resident families who aren't local or who lack resources to access other family program options such as online (lack of Wi-Fi) or in person (lack of transportation) options. These resources are updated to reflect new changes in research, diagnosis, and medications as new information is released. Restocking these resources each year for participating facilities is budgeted for each year of the grant and allows for accurate and up-to-date information to be disbursed to existing staff, existing families, new staff and new families.

e) Not applicable

Funded Entity(ies):

Alzheimer's Association

Results of the Project:

EssentiALZ certification: Twenty (20) *essentiALZ* training and certification opportunities were made available to each participating community. Of the 12 communities currently participating in the project, nine have begun utilizing the *essentiALZ* training during this grant period. Measurables: Total *essentiALZ*

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Kansas

KS CMP Funds Expended for Administrative Uses in CY 2025: $77,307.44
KS CMP Funds Expended for Emergency Uses in CY 2025: $0.00
KS Active CMP Funded Projects in CY 2025: 5

redemptions: 79; Total *essentiALZ* satisfaction: 91.6%; Total Average percentage increase in knowledge: 8.3%; Total average percentage confidence increase: 12.4%. Other Data: *EssentiALZ* completions: 50 and *EssentiALZ* pass rate: 98%. Kansas Education (KED) Conference: The Kansas Education Conference on Dementia occurred on June 26, 2025. Two staff from each participating facility registered. Other Date: All 12 facilities registered to attend the KED conference. One hundred percent (100%) of the survey respondents reported that they "strongly agreed" or "agreed" to the statement "I feel more knowledgeable after attending this workshop on person-center care". One hundred percent (100%) of the survey respondents reported that they "strongly agreed" or "agreed" to the statement "I feel more confident after attending this workshop on person-center care". One hundred percent (100%) of the survey respondents reported that they "strongly agreed" or "agreed" to the statement "I was satisfied with this workshop on person-center care".
Project ECHO is a 6-week online series for leadership staff from each participating skilled nursing facility to attend. This series began in January of 2026. There is no information to report on knowledge and confidence changes as this series is still ongoing. Measurables: Facilities that completed *Project ECHO* series: 0; Facilities registered for current *Project ECHO* series: 2; Number of participants registered for the current *ECHO* series: 9; Total year-to-date (YTD) average percentage increase in knowledge: Not applicable; Total YTD average percentage increase in confidence: Not applicable. Family Programs: Family Education Program information was distributed three times to each participation skilled nursing facility for this year. Measurables: Program opportunities distributed: 65. Respondents stated they "Strongly agreed" or "agreed" to the statement "I was satisfied with this program.": 90%. Respondents stated they "Strongly agree" or "agree" to the statement "Based on my experience, I would be willing to attend additional Association programs.": 94%. Successes and Difficulties: Looking back on this first year of work, there have been so many accomplishments to celebrate. Communities have been highly receptive of our person-center care workshop, *essentiALZ* training and certification program, and the upcoming *ECHO* series. The improvement in provider confidence is response to the *essentiALZ* intervention alone is encouraging and it is expected that participation in the *ECHO* series which kicked off last month will also yield beneficial results. Enrollment numbers are quite satisfactory for the first year of the project. Despite these successes, many challenges were faced this past year. Many learning moments occurred at the first person-centered Care workshop at KED 2025 that Pathom, Inc. looks forward to correcting for KED 2026. Additionally, Pathom, Inc. has had some staff turnover in leadership roles that have required reintroduction to themselves and the project. Additionally, Pathom, Inc. experienced a stall in *essentiALZ* usage and low enrollment for *Project ECHO* during the last two months of the calendar year 2025. Pathom Inc. expected the holiday and winter seasons to be lower participation due to the holidays and flu season and will continue to adjust as needed during those months.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

State Civil Money Penalty Reinvestment Projects Funded in Calendar Year (CY) 2025
Kansas City Long-Term Care Location

Kansas

KS CMP Funds Expended for Administrative Uses in CY 2025: $77,307.44

KS CMP Funds Expended for Emergency Uses in CY 2025: $0.00

KS Active CMP Funded Projects in CY 2025: 5

Project Title: Reminiscing for Improved Connection and Quality of Life

Unique Identifier: KS-0825-PAI-1391

Project Duration: 12/15/2025 to 12/14/2028

Total Amount of CMP Funds Approved for this Project: $30,000.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $0.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The project aims to provide access to high value information to ease reminiscence interactions. Residents' quality of life will improve due to the more personal interactions of caregivers, family members, and other residents. Staff will bond more strongly with residents due to understanding the highlights of a resident's life. Increased bonding between staff and residents will lead to improved quality of life.

b) The project aims to enroll up to 74 residents across two skilled nursing facilities (SNFs) and create individual Life Highlights profiles for 80% or more residents over three-year period. Eighty percent (80%) or more of staff will be introduced to the Life Highlights program. The program will administer a pos- test survey to measure staff 'agree/highly agree' that they know their resident at a deeper level, with a target 80% or above. The program will collect first-hand accounts indicating Life Highlights provides topics for more meaningful staff and resident interactions, and analyze testimonials for resident increased community contribution, laughing, talking, and overall well-being and improved quality of life.

c) Residents experience increased loneliness, confusion, and agitation. Redirection and de-escalation are critical to provide an increased quality of life to restore health, dignity, and familiarity. The purpose of this project is to provide residents with an improved quality of life through highly personal reminiscence interaction.

d) Recalling the personal information of every resident beyond superficial topics is not possible, particularly upon new resident intakes. Add the ongoing challenge of variable staffing common today in typical long term care facilities and the SNF's ability to provide a familiar, personal home for residents becomes extremely difficult. Having Life Highlights readily available without a computer to look up, will help staff make residents feel more at home and to help with de-escalation and redirection.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Kansas

KS CMP Funds Expended for Administrative Uses in CY 2025: $77,307.44
KS CMP Funds Expended for Emergency Uses in CY 2025: $0.00
KS Active CMP Funded Projects in CY 2025: 5

e) Not applicable

Funded Entity(ies):

Pathom, Inc

Results of the Project:

Interim results are not yet available.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

State Civil Money Penalty Reinvestment Projects Funded in Calendar Year (CY) 2025
Kansas City Long-Term Care Location

Missouri

MO CMP Funds Expended for Administrative Uses in CY 2025: $0.00
MO CMP Funds Expended for Emergency Uses in CY 2025: $0.00
MO Active CMP Funded Projects in CY 2025: 4

Project Title: Weekly Chair Exercise Program

Unique Identifier: MO-0924-HCC-1214

Project Duration: 01/01/2025 to 12/31/2027

Total Amount of CMP Funds Approved for this Project: $13,932.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $3,447.44

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) All Hope Care Center (HCC) residents have a chronic illness. Depression is a common complication of chronic illness. Depression does not have to be a normal part of having a chronic illness. Physical exercise has shown to release endorphins and other natural brain chemicals that can enhance an individual's sense of well-being. Additionally, exercise can help people with long-lasting conditions cope with symptoms and improve their overall health as physical exercise increases the amount of oxygen and blood circulating through our brains. Exercise has been shown to prevent disease, lower the risk of falls, improve mental health and well-being, strengthen social ties, and improve cognitive function in aging populations. The project will implement a 45-minute chair exercise on a weekly basis utilizing a professional fitness exercise instructor certified in conducting various types of chair exercises including seated yoga, seated dance, and seated Tai Chi.

b) Project goal and objectives include providing weekly exercise classes for the residents of HCC to improve the quality of life of all residents, especially those living with depression. Specific metrics used to determine if regular participation in exercise classes has influenced resident's mental health, the HCC Resident Activity Director will track mood data including quarterly resident assessment instrument (RAI) scores and weekly resident survey data. HCC Resident Activities Director will chart all resident's baseline (pre-class) Patient Health Questionnaire-9 (PHQ-9) Minimum Data Set (MDS) scores as well as track quarterly PHQ-9 scores to determine if there has been a change in participating resident's reported depressive symptoms. The HCC Resident Activities Director will coordinate with participating residents to complete a weekly pre and post exercise class survey to capture data regarding resident's reported mental health just before and just after physical exercise. Survey questions will be recorded, tracked, and reviewed by the Resident Activities Director to determine if participation in the chair exercise program has affected the resident's reported baseline score. Pre/Post Exercise Class Survey Questions (1-3 scale: 1=low, 2=medium, 3=high) 1. What is your current level of tension, stress, and mental fatigue? 2. What is your current level of energy? 3.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Missouri

MO CMP Funds Expended for Administrative Uses in CY 2025: $0.00
MO CMP Funds Expended for Emergency Uses in CY 2025: $0.00
MO Active CMP Funded Projects in CY 2025: 4

What is your current level of focus and motivation? 4. What is your current level of anger and frustration? 5. What is your current level of appetite?

c) Residents of HCC will directly benefit from both the socialization and physical activity that comes with participating in regularly scheduled group exercise classes.

d) HCC hopes to become a site for instructors to earn required training hours free of charge to HCC.

e) Not applicable

Funded Entity(ies):

Hope Care Center

Results of the Project:

Interim Results for Year 1 of the Project (four quarters): An average of 7.5 residents (50%) participated in the project in Year 1. Mood data utilizing the Patient Health Questionnaire (PHQ-9) Minimum Data Set (MDS) scores decreased from a baseline of 6.7 to an average of 3.67. Resident pre- and post-survey data over four quarters resulted in an increase in energy levels of 0.65, and increase in focus levels of 0.64, an increase in appetite of 0.65, a decrease in stress levels of 0.61 and a decrease in anger of 0.10.

Project Title: Improving Dementia Capability with CARES Dementia 5-Step Method

Unique Identifier: MO-1124-LSS-1231

Project Duration: 09/22/2025 to 09/21/2028

Total Amount of CMP Funds Approved for this Project: $74,970.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $0.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of the project is to improve the quality of care delivered to residents-especially those living with Alzheimer's Disease and related dementias (ADRD). To do this, a dementia training program will be implemented using the *CARES*® dementia online training, certification, and credentialing programs.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Missouri

MO CMP Funds Expended for Administrative Uses in CY 2025: $0.00
MO CMP Funds Expended for Emergency Uses in CY 2025: $0.00
MO Active CMP Funded Projects in CY 2025: 4

b) In Year 1 (month one), the applicant will work with the partner to register organization in the HCI Learning Management System for all *CARES* online training and certification programs; identify main nursing facility contact for *CARES* training aka Site Champion; prepare data tracking spreadsheets and user survey to track metrics for the project; assemble and distribute training documentation for each site; schedule Zoom Welcome/*CARES* training implementation meetings. In Year 1 (month two), the applicant will conduct Zoom Welcome/*CARES* training implementation meetings and *CARES* online training and certification begins; and identify a supervisor at each site for the *CARES* Observational Tool Online Supervisor Training. In Year 1 (months three to 12), *CARES* online training and certification training continues, and data collection will occur to track goals and objectives. In Year 2 (months 13 to 24), *CARES* online training and certification training continues. The applicant will identify the second cohort of supervisors for the *CARES* Observational Tool Online Supervisor Training. Data collection will occur to track goals and objectives. In Year 3 (months 25 to 36), *CARES* online training and certification training continue. The applicant will identify the third cohort of supervisors for the *CARES* Observational Tool Online Supervisor Training. Data collection will occur to track goals and objectives. For final evaluation: 1. A minimum of 75% of direct-care staff in participating nursing homes will be trained and certified in *CARES® Dementia 5-Step Method™.* 2. A minimum of 30% of direct-care staff in participating nursing homes will be trained and certified in *CARES® Activities of Daily Living™.* 3. A minimum of 10% of direct-care staff in participating nursing homes will be trained and certified in *CARES® Dementia 5-Step Method for Families™.* 4. Three supervisors will be trained in the *CARES®* Observational Tool. 5. Upon completion of the training, staff participants will be encouraged to fill out a short evaluation about the training.

c)This project directly benefits residents improving their person-centered care and quality of life in the following ways: 1. Improved care delivery by teaching staff the evidence-based, non-pharmacological *CARES® Dementia 5-Step Method* called the *CARES® Approach (C-Connect with the Person, A-Assess Behavior, R-Respond Appropriately, E-Evaluate What Works, and S-Share with Others).* 2. Teaching staff non-escalation and de-escalation techniques that can lead to improved quality of care and decreased use of antipsychotic medications. 3. Improving staff engagement with residents focusing on connecting with the resident in a deep and meaningful way. 4. Encouraging positive culture change based on person-centered values and practices including choice, dignity, respect, self-determination, and purposeful living. 5. Helping staff improve their use of person-centered care using the *CARES®* Observational Tool.

d)The project will benefit the nursing home by developing an evidence-based, person-centered, and non-pharmacological dementia care training for staff. The goal is to help improve the quality of care delivered to residents.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Missouri

MO CMP Funds Expended for Administrative Uses in CY 2025: $0.00
MO CMP Funds Expended for Emergency Uses in CY 2025: $0.00
MO Active CMP Funded Projects in CY 2025: 4

e) Not applicable

Funded Entity(ies):

Lutheran Senior Services

Results of the Project:

First quarter results: All participating nursing homes have been registered in the HCI Learning Management System for three years of access to the three approved *CARES* ® online training and certification programs. Site champions have been identified for all participating nursing homes. Data tracking spreadsheets and user survey to track metrics have been developed. Training documentation for each site has been distributed. *CARES*® Welcome meeting has been conducted. Online training and certification have begun: 17.6% of direct care staff have completed the *CARES* ® *Dementia 5-Step Method* training and 34.4% of direct care staff have completed the *CARES*® *Dementia Related Behavior* training. A supervisor at each site has been identified for the *CARES*® Observational Tool online supervisor training.

Project Title: SNFClinic

Unique Identifier: MO-1124-LTCC-1232

Project Duration: 07/23/2025 to 07/22/2028

Total Amount of CMP Funds Approved for this Project: $343,620.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $0.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The *SNFClinic* project is an online electronic learning management system (eLMS) that provides clinical and in-service staff training and resident care resources designed to directly improve the quality of care provided at skilled nursing home facilities.

b) Goal 1: On average, there will be a thirty percent (30%) improvement across all participating nursing homes in the quality measures (QMs) used by the Centers for Medicare and Medicaid Services (CMS) to calculate the QM star rating published on the Care Compare website. Goal 2: Fifty percent (50%) of the participating nursing homes' QM star ratings will improve.

Missouri

MO CMP Funds Expended for Administrative Uses in CY 2025: $0.00
MO CMP Funds Expended for Emergency Uses in CY 2025: $0.00
MO Active CMP Funded Projects in CY 2025: 4

c) The project provides tools and resources to nursing home facilities that relate directly to the quality of care provided to residents.

d) Facilities receive (1) monthly training calendars, (2) new employee onboarding training services, and (3) development of any facility-specific training modules. The intent of the project and the facilities' participation is to participate in meaningful, long-term operational changes that will result in improvements to quality of care and more efficient systems that will save both time and financial resources.

e) Not applicable

Funded Entity(ies):

Long-Term Care Consultants, LLC

Results of the Project:

Interim results are not yet available.

Project Title: 2025 Provider Meeting

Unique Identifier: MO-0625-SLCR-1352

Project Duration: 09/09/2025 to 10/08/2025

Total Amount of CMP Funds Approved for this Project: $43,646.22

Total Amount of CMP Funds Expended During CY 2025 for this Project: $16,815.95

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of holding the provider meetings is to provide an opportunity for the Missouri Section for Long-Term Care Regulation (SLCR) staff to update representatives of the long-term care industry on current activities, issues, and legislation which affect the regulation and operation of long-term care facilities in the state. SLCR estimates a total of 1,500 long-term care provider staff will attend.

b) The meetings will provide an avenue for meaningful interaction and education between providers and regulatory staff through sharing information, concerns, and ideas and providing the industry an opportunity to address concerns and discuss relevant issues directly with SLCR staff. Specific

Missouri

MO CMP Funds Expended for Administrative Uses in CY 2025: $0.00
MO CMP Funds Expended for Emergency Uses in CY 2025: $0.00
MO Active CMP Funded Projects in CY 2025: 4

training topics will include Medical Director Support During the Survey Process, Person Directed Care, the Role of Pharmacies in Supporting Long Term Care Facilities, and Quality Assurance/Performance Improvement (QAPI) Sustainability Plans. All attendees will be encouraged to complete an evaluation at the conclusion of the meeting. Based on calculations from previous years, a goal of 45% of attendees will complete evaluations to determine if the information provided was meaningful and applicable to providers and surveyors. When completing the evaluations, attendees will rate speakers and topics on a scale as follows, with the goal of an average rating of 4: 5 = Excellent, 4 = Good, 3 = Average, 2 = Fair, 1 = Poor. Evaluation questions include: Was the speaker able to relate his/her expertise to the concerns/issues of LTC staff? Was the topic covered useful and relevant to the audience? How do you rate the usefulness of the knowledge/skills acquired here today? Taking everything into account, how would you rate the overall value of this seminar today?

c) The meetings will improve the overall quality of care for residents by updating providers on relevant issues facing the long-term care industry, providing training in identified areas, and providing opportunities for industry representatives to work with regulators to identify best practices related to the care of nursing home residents.

d) The meetings will improve the overall quality of care for residents by updating providers on relevant issues facing the long-term care industry, providing training in identified areas, and providing opportunities for industry representatives to work with regulators to identify best practices related to the care of nursing home residents.

e) SLCR surveyors, supervisors, and management staff.

Funded Entity(ies):

Missouri Section for Long-Term Care Regulation (SLCR)

Results of the Project:

There was a total of 1,299 attendees at the seven meetings held throughout the state. The average evaluation score was 4.57.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

State Civil Money Penalty Reinvestment Projects Funded in Calendar Year (CY) 2025
Kansas City Long-Term Care Location

Nebraska

NE CMP Funds Expended for Administrative Uses in CY 2025: $0.00
NE CMP Funds Expended for Emergency Uses in CY 2025: $0.00
NE Active CMP Funded Projects in CY 2025: 0

The state had no CMP-funded projects in calendar year 2025.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

State Civil Money Penalty Reinvestment Projects Funded in Calendar Year (CY) 2025
Denver Long-Term Care Location

Colorado

CO CMP Funds Expended for Administrative Uses in CY 2025: $163,266.57

CO CMP Funds Expended for Emergency Uses in CY 2025: $0.00

CO Active CMP Funded Projects in CY 2025: 4

Project Title: SNFClinic

Unique Identifier: CO-1121-LTCC-881

Project Duration: 08/01/2022 to 07/31/2025

Total Amount of CMP Funds Approved for this Project: $715,000.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $121,600.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The *SNFClinic* project will provide 25 one-, two-, and three-star skilled nursing facilities (SNFs) with centralized technology-based systems for training, staff management, and resident care resources to improve the level of care for residents through staff training. The project aims to reduce survey deficiencies and improve Minimum Data Set (MDS) quality measures (QM), thereby improving the overall quality of care in skilled nursing facilities. Outcomes will be tracked using survey and inspection scores, MDS QMs, and POCs.

b) Project success will be evidenced by: Goal 1: Reduction in recertification survey deficiencies, and improvement in scope and severity of recertification survey tags. Goal 2: Improvement in defined Minimum Data Set (MDS) quality measures (QMs). Goal 3: Improvement in compliance.

c) The project will improve residents' care levels through staff training.

d) The project will aid nursing homes by reducing survey deficiencies, improving MDS QM performance, and successfully submitting a plan of correction (POC).

e) Nursing home staff.

Funded Entity(ies):

Long-Term Care Consultants, LLC

Results of the Project:

The *SNFClinic* project provided centralized technology-based systems for training, staff management, and resident care resources to improve the level of care for residents through staff training. Twenty-five (25) 1, 2, and 3-star skilled nursing homes participated in the project. The 25 nursing homes were provided with 24/7 access to SNFClinic. Facility-specific SNFClinic accounts were created for all participating nursing

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Colorado

CO CMP Funds Expended for Administrative Uses in CY 2025: $163,266.57
CO CMP Funds Expended for Emergency Uses in CY 2025: $0.00
CO Active CMP Funded Projects in CY 2025: 4

homes. Over the course of the project, the nursing homes used SNFClinic to assign and complete over 6,000 education and training modules. The facilities' overall average completion rate was 87.38%. b) Goal 1: Reduction in recertification survey deficiencies, and improvement in scope and severity of recertification survey tags. Measurement: Improvement in nursing home recertification health survey scores, and improvement in nursing home health inspection scores. Outcomes: Recertification: The average baseline deficiency survey count was 10.08 tags. The average final deficiency survey count was 7.94 tags, an average reduction of 2.14 tags. The participating nursing homes outperformed the U.S. average by 1.56 tags and the Colorado average by 0.66 tags. Health inspection score: The average baseline Health Inspection Score was 84.68. The average final Health Inspection Score was 57, an average reduction (i.e., improvement) of 27.68 points. This represents an average reduction in Health Inspection Score of 32.69%. Goal 2: Improvement in defined Minimum Data Set (MDS) quality measures (QMs). Measurement: Improvement in MDS QM scores published by CMS. Outcome: All (100%) of the nursing homes improved in their overall QMs. The average nursing home outperformed the Colorado statewide averages in 3.72 (41.33%) of the measured QM categories. Goal 3: Improvement in compliance. Measurement: Improvement in compliance is measured by the nursing homes' ability to successfully develop Plans of Corrections ("POCs") that meet the requirements of the Department of Health and the survey teams by improving the capability of the nursing homes to design and draft plans that quickly address survey shortfalls. Outcome: The average nursing home improved the time it took to successfully develop POCs in response to survey deficiencies by 7.44 days. c) Based on the data, nursing homes improved the level of care provided to residents in measurable ways which directly benefits residents. d) The project aided nursing homes by reducing survey deficiencies, improving MDS QM performance, and successfully submitting plans of correction. While not one of the project's expected outcomes, nursing homes Civil Money Penalties (CMPs) fell by $1,380,194.71 during the Project. This represents a reduction of 72.75%. Also, 13 of the 25 facilities (52%) improved their overall star rating. The average facility improved by one star. e) SNFClinic received positive feedback from the nursing homes regarding customer service and support, ease of use, and ensuring compliance with the training requirements. All but one of the facilities has decided to continue using SNFClinic post-project which demonstrates the benefits nursing homes feel they received from using SNFClinic.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Colorado

CO CMP Funds Expended for Administrative Uses in CY 2025: $163,266.57

CO CMP Funds Expended for Emergency Uses in CY 2025: $0.00

CO Active CMP Funded Projects in CY 2025: 4

Project Title: SPARKing Conversation, Connection, and FUN! During COVID-19 and Beyond

Unique Identifier: CO-0624-SCA-1175

Project Duration: 09/01/2024 to 08/30/2025

Total Amount of CMP Funds Approved for this Project: $109,260.12

Total Amount of CMP Funds Expended During CY 2025 for this Project: $26,008.01

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) SilverKite Community Arts will provide skilled nursing facility (SNF) residents in 29 Colorado communities with SPARK Arts Activity Boxes and community-wide access to live online art workshops 40 times (approximately once a week) during the program time frame.

b) The quantifiable goals of the project are 30% participation rate as the program is rolled out with the expectation that it will grow with the support of the online tools; 100% of recipients believe that the boxes are easy to use; 90% of residents engaging with the boxes can note a benefit to mood and/or energy level. Silverkite anticipates an 85% active or passive use rate over time; 40-50% of the participant communities attending the online workshops; 90% of the residents will report a positive impact of participation in the workshops on their moods or energy levels; and an average 75 - 100% resident engagement during the workshops.

c) Studies have shown that engagement in the arts can help relieve stress, strengthen communication skills, and boost self-esteem. SPARK Boxes are designed for individual resident use and can provide stimulation and engagement during periods of quarantine, isolation, or illness. While participating in art workshops, residents will increase interaction with others, practice fine motor skills, express emotions, and learn new skills which can decrease social isolation, reduce cognitive decline, boost confidence, and decrease depression.

d) Staff members can use videos and online classes to learn new skills to replicate these arts programs in the future.

e) Nursing home (NH) residents and staff

Colorado

CO CMP Funds Expended for Administrative Uses in CY 2025: $163,266.57

CO CMP Funds Expended for Emergency Uses in CY 2025: $0.00

CO Active CMP Funded Projects in CY 2025: 4

Funded Entity(ies):

SilverKite Community Arts

Results of the Project:

The goal of the project was to enhance skilled nursing facility (SNF) life enrichment programming with arts engagement tools. Residents of 29 Colorado communities received SPARK Arts Activity Boxes and community-wide access to 40 live, online art workshops. Nursing homes used the boxes as a 1:1 caregiving tool between staff and resident, as engagement tools for the residents to use on their own, or as part of a group activity. Outcomes: Goal: 100% of recipients believe that the boxes are easy to use. Final result: 100% said boxes were easy to use. Goal: 40-50% of the participant communities attending the online workshops. Final result: 45% of communities participated in the live online workshop experiences. Goal: 90% of residents engaging with the boxes can note a benefit to mood and/or energy level. Final result: 100% indicated that engaging with the SPARK Boxes had a positive effect on the mood and/or energy levels of the residents. Goal: 90% of the residents report a positive impact of participation in the workshops on their moods and /or energy levels. Final result: 100% of respondents indicated the workshops had a positive impact on the residents. Goal: an average 75 - 100% resident engagement during the workshops. Final result: 83.3% reported that residents were smiling and laughing while engaging with the boxes. Goal: 90% of workshop attendees were engaged in the workshops at least 75% of the time, with 50% of these indicating the residents were engaged 100% of the time. Final result: 90% of workshop attendees were engaged in the workshops at least 75% of the time, with 50% of this indicating the residents were engaged 100% of the time. Staff turnover made connecting with nursing home staff a challenge at times. SilverKite reconnected with the communities and trained new staff to use the program. State reporting requirements were also a challenge as Colorado requires more reporting than other states. Recognizing that it can be difficult to find time for nursing homes to participate in the live workshops, SilverKite sent an informational survey to nursing homes to gain a better understanding about their residents and when to schedule the online workshops. In addition, all live workshops were recorded and made available via a participant webpage, as well as a webpage available to all Colorado skilled nursing communities.

Colorado

CO CMP Funds Expended for Administrative Uses in CY 2025: $163,266.57

CO CMP Funds Expended for Emergency Uses in CY 2025: $0.00

CO Active CMP Funded Projects in CY 2025: 4

Project Title: SNFClinic

Unique Identifier: CO-0924-LTCC-1212

Project Duration: 01/01/2025 to 12/31/2027

Total Amount of CMP Funds Approved for this Project: $657,360.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $209,494.84

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The *SNFClinic* project will provide computer-based training and management resources to 44 nursing homes across Colorado to support staff education and training to help mitigate workforce stress and improve the quality of care for residents. The project will cover 16.7% of the total licensed beds in Colorado, and 41.7% of the licensed beds in rural or frontier counties.

b) The project will provide forty-four (44) nursing facilities with SNFClinic technology. Goal 1 - On average, a 30% improvement across all participating nursing homes in Quality Measures (QMs) used to calculate QM star rating. Project performance will be measured against the baselines established at the beginning of the project. Goal 2 - 50% of participating nursing homes individual QM star ratings will improve. Project performance will be measured against the baseline QM ratings at the beginning of the project.

c) Efforts to improve nursing home QMs are related to improvements in overall quality of care provided to residents.

d) SNFClinic contains all of the training and resources necessary for nursing homes to improve quality of care provided to residents.

e) Nursing home staff

Funded Entity(ies):

Long-Term Care Consultants, LLC

Results of the Project:

Interim project results Year 1: The goal of the three-year SNFClinic project is to provide computer-based training and management resources to 43 nursing homes across Colorado to support staff education and

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Colorado

CO CMP Funds Expended for Administrative Uses in CY 2025: $163,266.57

CO CMP Funds Expended for Emergency Uses in CY 2025: $0.00

CO Active CMP Funded Projects in CY 2025: 4

training to help mitigate workforce stress and improve the quality of care for residents. Goal 1 - On average, a 30% improvement across all participating nursing homes in Quality Measures (QMs) used to calculate QM star rating. Project performance will be measured against the baselines established at the beginning of the project. Progress: Forty-one of the 43 participating facilities (95%) improved in their overall Minimum Data Set (MDS) QM scores. The average improvement was 41.2%. Goal 2 - 50% of participating nursing homes individual QM star ratings will improve. Project performance will be measured against the baseline QM ratings at the beginning of the project. Progress: Eleven of the participating facilities (26%) improved their QM star ratings. Six of the participating facilities (14%) had a decline in their QM star ratings. The remaining 26 participating facilities (60%) remained the same. Efforts to improve nursing home QMs are related to improvements in overall quality of care provided to residents. Feedback from nursing homes has been universally positive.

Project Title: SilverKite MOREArts ArtKits

Unique Identifier: CO-0825-SCA-1385

Project Duration: 11/01/2025 to 10/31/2028

Total Amount of CMP Funds Approved for this Project: $517,991.08

Total Amount of CMP Funds Expended During CY 2025 for this Project: $4,750.15

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The project seeks to provide skilled nursing facility residents with meaningful art activities to promote joy, well-being, and mood improvement. Nursing homes will receive seasonal, customized, classroom-sized activity box with curriculum and arts supplies in a range of art forms (dance, writing, visual arts, reminiscence) on a quarterly basis. This project also includes professional development workshops for nursing facility staff to ensure engagement and proper facilitation of the arts program; quarterly individual coaching sessions; and technical support for nursing home staff.

b) Surveys will evaluate how the kits are working and their impact on the residents and will include both qualitative and quantitative responses. These surveys will measure: Usage. Goals: 85% of communities use the tools in the kits (at least two times per month) in arts programming and activities and 100% of communities find the kits easy to use. Engagement: Goals: 75% of communities have an average of seven residents engaging with the materials during each arts

Colorado

CO CMP Funds Expended for Administrative Uses in CY 2025: $163,266.57
CO CMP Funds Expended for Emergency Uses in CY 2025: $0.00
CO Active CMP Funded Projects in CY 2025: 4

activity program offered using the ArtKits and 90% rate of engagement (active participation) during the programs. Effect of engagement: Goals: 90% of the residents attending each arts workshop enjoyed the experience, 75% indicate a change in their mood or energy level as a result of their participation.

c) By participating in this project, residents will benefit by increased resident arts engagement in the communities to promote joy, well-being, and improve moods; and assistance to helping residents to reconnect with each other through engaging and fun activities.

d) By participating in this project, the nursing home will benefit by providing staff with training, tools, and support to help them develop skills to continue arts engagement programming into the future.

e) Nursing home residents and staff

Funded Entity(ies):

Silver Kite Community Arts Consulting, LLC

Results of the Project:

Interim results are not yet available.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Montana

MT CMP Funds Expended for Administrative Uses in CY 2025: $4,922.25

MT CMP Funds Expended for Emergency Uses in CY 2025: $0.00

MT Active CMP Funded Projects in CY 2025: 7

Project Title: The Life Enrichment Project

Unique Identifier: MT-0424-CCR-1133

Project Duration: 11/01/2024 to 10/31/2025

Total Amount of CMP Funds Approved for this Project: $4,613.44

Total Amount of CMP Funds Expended During CY 2025 for this Project: $117.85

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The objective of the project is to identify and meet the sensory and dietary needs of residents living with dementia or cognitive impairments and address sensory challenges for residents by creating tailored sensory experiences and mindful techniques based on each resident's needs and ability.

b) The unit will have 80% participation by patients for a minimum of one to two days per week (or more) to engage in structured sensory stimulation activity within eight weeks of program inception. Unit residents will have individualized sensory stimulation routines within 10 weeks of program inception or within four weeks of admission. Residents will demonstrate improved response in at least one of 10 focus areas as identified and tracked on the sensory stimulation group individualized evaluation form by week four of the initiating participation in sensory stimulation group activities.

c) Occupational Therapy will conduct a comprehensive evaluation of each resident to determine which intervention will be best for each resident.

d) Reports will be completed and therapists will review them quarterly to determine if adjustments are needed, and it will alleviate symptoms and enhance long term well-being.

e) Not applicable

Funded Entity(ies):

Continental Care and Rehabilitation

Results of the Project:

Final results: Due to staff turnover including the employee leading this project, the project was unable to be completed. The facility only used $117.85 of the awarded grant funds to purchase four sensory items. Though the purchase was small, these items have still been utilized to enrich the lives of the care residents

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Montana

MT CMP Funds Expended for Administrative Uses in CY 2025: $4,922.25
MT CMP Funds Expended for Emergency Uses in CY 2025: $0.00
MT Active CMP Funded Projects in CY 2025: 7

at the facility. Nursing, therapy, and activities staff members have used them to promote activities the residents enjoy, while also providing physical and cognitive engagement, and relaxation. By meeting the sensory needs of residents, the facility can reduce the amount of anxiety, agitation, depression, and insecurity that residents in the memory care unit are often faced with. Due to the facility's success with these items, they have gone on to develop two additional distinct sensory rooms in the therapy department as well by using facility's funds. Being able to meet these additional needs of the residents has allowed facility to deliver better care at the facility.

Project Title: Going for the Gold – Enhancing Care Through Collaboration and Simulation

Unique Identifier: MT-0424-SIM-1134

Project Duration: 11/01/2024 to 10/31/2025

Total Amount of CMP Funds Approved for this Project: $19,900.86

Total Amount of CMP Funds Expended During CY 2025 for this Project: $19,900.86

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of this project is to create a network of contacts within and between facilities across Montana, providing resources and support to implement a change in culture.

b) The objective of this project is to improve patient outcomes by using simulation training to identify gaps in caregivers' knowledge, skills, support, and beliefs. The goal of this project is to change the culture for residents and staff and improve the quality of life. The project will secure pre- and post-surveys from participants to capture a number of metrics. These annual metrics will include at least 75% of total learners will indicate increased confidence in skills associated with de-escalation of altered mental status residents. At least 80% of total learners will report refreshed skills in recognition of when EMS (Emergency Medical Services) should be activated in stroke situations. At least 70% of learners will report recognition of empowerment resulting in a higher level of care. At least 80% of learners will report an increase in empathy towards patients receiving their care.

c) This project is to improve patient outcomes by using simulation training to identify gaps in caregivers' knowledge, skills, support, and beliefs.

Montana

MT CMP Funds Expended for Administrative Uses in CY 2025: $4,922.25

MT CMP Funds Expended for Emergency Uses in CY 2025: $0.00

MT Active CMP Funded Projects in CY 2025: 7

d) Pre- and post-surveys from participants will capture metrics as increased confidence in skills associated with de-escalation of altered mental status residents, refresh skills in recognition of when EMS should be called, recognition of empowerment resulting in higher level of care, and increase in empathy towards patients receiving their care.

e) Not applicable

Funded Entity(ies):

Simulation in Motion - Montana

Results of the Project:

Final results: Four skilled nursing facilities participated in the SimMT (Simulation in Motion - Montana) project from November 1, 2024, to October 31, 2025, with 40 total participants. The following results were provided upon completion of the project: 95-100% of learners reported increased confidence in skills associated with de-escalation or altered mental status residents; 95-100% of learners reported refreshed skills in recognition of when Emergency Medical Services (EMS) should be activated in stroke situations; 95-100% of learners reported recognition of empowerment resulting in a higher level of care; and 95-100% of learners reported an increase in empathy toward patients receiving their care.

Project Title: SPARKing Conversation, Connection, and Fun! During COVID-19 and Beyond

Unique Identifier: MT-0424-SCA-1135

Project Duration: 11/01/2024 to 10/31/2025

Total Amount of CMP Funds Approved for this Project: $95,584.94

Total Amount of CMP Funds Expended During CY 2025 for this Project: $95,584.94

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The project will provide 1,968 residents in skilled nursing facilities with SPARK Box art activity toolkits. The kits contain washable watercolor paints and brush, five washable markers, leaf stencils, a 40-page mixed media journal, mechanical pencil, egg shaker musical instrument, 16-page

Montana

MT CMP Funds Expended for Administrative Uses in CY 2025: $4,922.25
MT CMP Funds Expended for Emergency Uses in CY 2025: $0.00
MT Active CMP Funded Projects in CY 2025: 7

instruction booklet with activities designed by SilverKite artists, and a beautiful box designed as a coloring page outside with a museum quality watercolor painting of a hummingbird on the inside.

b) Goal 1: Ensure that arts engagement resources are accessible, usable, and supportive of staff capacity. This aligns with the expectation that 95% of staff will report that SPARK Boxes are easy to use and require minimal facilitation, supporting consistent activity delivery even with limited staffing. Goal 2: Improve resident mood, energy, and overall well-being through regular arts engagement. This goal aligns with later measures indicating that at least 75% of participating communities report positive impacts on resident mood and energy levels after using the SPARK Boxes. Goal 3: Increase opportunities for meaningful social connection through live, interactive arts programming. This goal corresponds with project metrics showing that 30% of participating communities will attend engage with the online workshops, demonstrating expanded access to shared, creative experiences. Goal 4: Strengthen resident engagement and participation during structured arts activities. This aligns with the anticipated workshop outcome in which facilitators report 75% positive resident engagement among workshop attendees, indicating strong involvement and positive response to the activities.

c) Increase engagement with art for residents in the communities and to promote well-being and improve moods.

d) Provide staff with skills to help develop art engagement programming with facility residents.

e) Not applicable

Funded Entity(ies):

Silver Kite Community Arts Consulting, LLC

Results of the Project:

Final results: The *SPARKing Conversation* project was implemented November 1, 2024, through October 31, 2025. During the program, SilverKite shipped 1,683 SPARK Boxes to the 21 skilled nursing facilities (SNFs) involved in this program. SilverKite offered live online arts workshops for participating SNFs. The workshops were offered on Tuesdays at 10:30a.m., with occasional offerings on Fridays at the same time. During the program 17 recordings of program videos were downloaded and viewed by participating communities in Montana. At the end of each online workshop, attending communities were sent an online survey to evaluate the workshop. Questions about the workshops were also included in each quarterly evaluation survey and the final evaluation survey. SilverKite Community Arts reached its qualitative and quantitative goals for this program. Goal 1: Participating community survey respondents indicated that the

Montana

MT CMP Funds Expended for Administrative Uses in CY 2025: $4,922.25

MT CMP Funds Expended for Emergency Uses in CY 2025: $0.00

MT Active CMP Funded Projects in CY 2025: 7

SPARK Boxes were easy to use (100%). Goal 2: SPARK Box engagement had a positive impact on residents, 87.5% of final survey respondents indicated engaging with the SPARK Boxes had a positive effect on the mood or energy levels of the residents, with 50% reporting residents were smiling and laughing while engaging with the boxes. Goal 3: Participant communities engaged in online arts workshops. The "live" online workshops were attended by 28.5% of the participating communities, with other communities engaging in the workshops by downloading and viewing the videos 17 times over the course of the project. Goal 4: Online workshop engagement had a positive impact on the residents, 92.4% of survey respondents who attended the live workshops or watched the recordings indicated that engaging with the online workshops had a positive impact on resident mood and energy levels.

Project Title: The Java Project: Addressing Loneliness and Social Isolation

Unique Identifier: MT-0424-VHR-1136

Project Duration: 11/01/2024 to 10/31/2027

Total Amount of CMP Funds Approved for this Project: $15,000.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $5,000.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The *Java Project* offers weekly resident peer support and mentoring programs facilitated by nursing home staff. The three programs included in the *Java Project* are: the *Java Music Club*, a resident peer support program, *Java Memory*, peer support for residents living with dementia, and *Java Mentorship* which engages residents to support fellow residents who do not normally go to programs. All three programs are implemented by existing staff using live webinars, short training videos, and the step-by-step guides provided. Program materials are extensive and high quality, and the step-by-step guides are laminated for continued use and disinfecting.

b) The goal of the *Java Project* is to improve quality of life of residents in nursing facilities by decreasing loneliness and social isolation through the implementation of three evidence based, standardized peer support activity programs developed by Dr. Kristine Theurer, founder of *Java Group Programs*. At least 50% of residents participating will be observed and assessed before and then again during a *Java Music* group once using the Java Scale in the first year. The target goal is an average minimum 10% reduction in observed rates of social isolation and loneliness and an

Montana

MT CMP Funds Expended for Administrative Uses in CY 2025: $4,922.25
MT CMP Funds Expended for Emergency Uses in CY 2025: $0.00
MT Active CMP Funded Projects in CY 2025: 7

average minimum 10% improvement in observed rates of happiness among the participants. At least 50% of residents participating will be observed and assessed before and then again during a *Java Memory* group once using the Java Scale in the second year. The target goal is an average minimum 10% reduction in observed rates of social isolation and loneliness and an average minimum 10% improvement in observed rates of happiness among the participants. At least 50% of residents being visited by mentors will be observed and assessed before and then again during a visit using the Java Scale for the *Java Mentorship* program in the third year. The target goal is an average minimum 10% reduction in observed rates of social isolation and loneliness and an average minimum 10% improvement in observed rates of happiness among those visited. The *Java Project* involves an innovative approach based on residents helping each another to specifically target loneliness and social isolation.

c) Nursing facility residents will benefit from the *Java* programs by developing stronger social and emotional bonds with each other. Through sharing grief, sorrow and happiness in the *Java* groups, empathetic connections are built, and these social relationships carry over to other activities and nursing home life.

d) The nursing home will benefit by improving the quality of life for its residents.

e) Not applicable

Funded Entity(ies):

The Village Health and Rehabilitation

Results of the Project:

Interim results: Ten sessions have been held, and nine residents attended different sessions. Residents reported enjoyment of the sessions and are engaging well with each other and creating connections that carry over to other activities.

Montana

MT CMP Funds Expended for Administrative Uses in CY 2025: $4,922.25

MT CMP Funds Expended for Emergency Uses in CY 2025: $0.00

MT Active CMP Funded Projects in CY 2025: 7

Project Title: ALZPro: Workforce Training and Support for Sustainable, Person-Centered Dementia Care

Unique Identifier: MT-0424-AZS-1137

Project Duration: 01/01/2025 to 12/31/2026

Total Amount of CMP Funds Approved for this Project: $102,179.31

Total Amount of CMP Funds Expended During CY 2025 for this Project: $28,166.74

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of this project is to create a network of connection, engagement, education, and support for professional care providers of individuals living with dementia and resident's families, to positively impact person-centered care delivery and outcomes for residents. The Alzheimer's Association's *Dementia Care Practice Recommendations (DCPR)* provides evidence-based recommendations in person-centered dementia care practice that will be implemented in each participating skilled nursing community through this multi-component approach for system change.

b) The project objectives are as follows: 1. Provide training through online person-centered training and certification program for frontline staff. 2. *Provide ECHO (Extension for Community Healthcare Outcomes)* sessions for connection, engagement, and support for participating skilled nursing facility leadership to deepen their knowledge and application of person-centered care through video-based case study discussions. 3. Provide virtual education and support programs in communities to support interactions with their resident. 4. Increase person-centered care and engagement for residents living with dementia. The quantifiable objective goals are as follows: Seventy percent (70%) redemption rate of the care provider training; 85% satisfaction with professional training program; 80% pass rate for the *essentiALZ* certification; 20% increase in professional provider knowledge; 20% increase in professional provider confidence; and 85% satisfaction with the family caregiver education.

c) Residents receive the highest level of quality care.

d) Nursing facilities will be able to implement the latest evidence based person-centered care practices for individuals living with dementia.

e) Not applicable

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Montana

MT CMP Funds Expended for Administrative Uses in CY 2025: $4,922.25
MT CMP Funds Expended for Emergency Uses in CY 2025: $0.00
MT Active CMP Funded Projects in CY 2025: 7

Funded Entity(ies):

Alzheimer's Association

Results of the Project:

Interim results: The first year of this project began January 1, 2025, and was completed on December 31, 2025. The first year focused on orienting participating facility staff with the project, introducing them to the components, and helping them strategize on how to utilize them to maximize system-change for their staff and residents. The project reported relatively high rate of utilization of the project components even as the partner communities became oriented to the project and navigated external demands. The project reported increases in both knowledge and confidence being seen for the *essentiALZ* program, as well as a high degree of participant satisfaction in both *essentiALZ* and family programs. The project is extremely pleased with its degree of interest in the *Project ECHO (Extension for Community Healthcare Outcomes)* series. This upcoming (and final) year of the project will focus on continuing to grow the rate of *essentiALZ* utilization and implementation of three *Project ECHO* series.

Project Title: SNFClinic

Unique Identifier: MT-0424-LTCC-1141

Project Duration: 11/01/2024 to 10/31/2027

Total Amount of CMP Funds Approved for this Project: $104,580.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $27,390.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of this project is to address the need for care-focused training and resources by providing the following: 1. Basic, Intermediate, and Advanced Clinical Nursing Skills Training. 2. In-Service Training. 3. Nursing and Administrator continuing education units (CEUs). 4. Assessments and Care Plans Database. 5. Quality Assurance and Performance Improvement (QAPI) Tool. 6. "What If?" Checklists 7. Policies and Procedures Storage, Assignment, and Tracking Tools. 8. Course Bundles, Surveys, and Employee Management Tools. 9. Training Progress Reports.

b) Goal 1: On average, a 30% improvement across all participating nursing homes in the Quality Measures (QM) used by CMS (Centers of Medicare and Medicaid) to calculate the QM star rating

Montana

MT CMP Funds Expended for Administrative Uses in CY 2025: $4,922.25
MT CMP Funds Expended for Emergency Uses in CY 2025: $0.00
MT Active CMP Funded Projects in CY 2025: 7

published on the CMS Care Compare website. Goal 2: Fifty percent (50%) of the participating nursing homes' QM star ratings will improve. 2. What data will Long Term Care Consultants (LTCC) use to measure goals 1 and 2? Goal 1: QM data is published by CMS on a quarterly basis. Project performance will be measured against baselines established upon commencement of the project. Goal 2: Changes in the participating nursing homes' QM star ratings on the CMS Care Compare website. Project performance will be measured against the baseline QM star rating established upon commencement of the project.

c) The project will provide staff training and resources that will enhance the quality of care delivered to residents.

d) Nursing homes will benefit from the training and resources provided.

e) Not applicable

Funded Entity(ies):

Long Term Care Consultants, LLC

Results of the Project:

Interim results: Six sites participated in the *SNFClinic* project. Data showing the participating facilities' project performance during this reporting period is unavailable. On August 15, 2025, CMS announced that it was freezing its publication of nursing home performance data to ensure data accuracy after behind-the-scenes technical changes to its Care Compare website. As a result of this freeze, project data is only available as of March 31, 2025.

Project Title: Live Therapeutic Harp Music Program

Unique Identifier: MT-1024-SUH-1226

Project Duration: 03/01/2025 to 02/28/2028

Total Amount of CMP Funds Approved for this Project: $14,900.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $2,460.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Montana

MT CMP Funds Expended for Administrative Uses in CY 2025: $4,922.25
MT CMP Funds Expended for Emergency Uses in CY 2025: $0.00
MT Active CMP Funded Projects in CY 2025: 7

a) The purpose of this project is to improve the quality of life by reducing stress on both patients and staff. There are a loneliness and ever-present need for nursing home residents to receive more one-on-one attention, human contact, and simple comfort. Therapeutic harp music provided by a caring person brings beauty to each recipient's life. The effects of the music last long after the musician has left and the memory is a sweet comfort, as well. The constant understaffing is also evident in the continual hiring and constant turnover.

b) The training is to provide different types of music effective in obtaining specific outcomes. Through this music it may be able to lower blood pressure, stabilize breathing, calm the agitated, induce sleep in the exhausted, and comfort the fearful and discouraged. It is likely to reduce stress, loneliness, discouragement as well as to increase positive feelings and increase happier moods in those listening. It's possible to be able to relax or stimulate the recipients as needed. There will be an assessment of the needs at the beginning of each session and assessment of any changes at the end. A short survey given at the end of each session will be charted and recorded. A plan for virtual sessions is in place in the event this becomes necessary due to a contagion breakout. By the end of year one, a minimum of 20 residents will have experienced the therapeutic harp music. Of that, 75% should show positive improvement as measured by improved loneliness, stress, anxiety, pain, sadness, and blood pressure.

c) Improve the quality of life of residents.

d) Reduce stress for staff.

e) Not applicable

Funded Entity(ies):

Suzanne Harris

Results of the Project:

Interim results: One site participated with this project to provide music therapy to residents. Surveys are completed after each session to measure loneliness, stress, anxiety, pain, sadness, and blood pressure. Final results are pending.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

North Dakota

ND CMP Funds Expended for Administrative Uses in CY 2025: $0.00

ND CMP Funds Expended for Emergency Uses in CY 2025: $0.00

ND Active CMP Funded Projects in CY 2025: 8

Project Title: Improving Dementia Capability with CARES® Dementia 5-Step Method

Unique Identifier: ND-1224-STR-1253

Project Duration: 06/01/2025 to 05/31/2028

Total Amount of CMP Funds Approved for this Project: $14,994.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $14,994.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of the project is to improve dementia capability with an evidence-based method to dementia care and to reduce resident behaviors by having staff incorporate this method into all resident interactions.

b) The goal is to improve quality of care delivered to residents, especially those living with Alzheimer's Disease and related dementias. Objectives include training and certifying a minimum of 15% of direct-care staff in the *CARES Dementia 5-Step Method, Dementia Safety Topics, and Dementia Related Behavior.*

c) This project will benefit residents through improved care delivery by teaching staff the *CARES Dementia 5-Step Method*, teaching staff non-escalation and de-escalation techniques that can lead to improved quality of care and decreased use of antipsychotic medication and improving staff engagement with residents focusing on connecting with the resident in a deep and meaningful way.

d) This will benefit the nursing home by creating a more skilled, empathetic, and communicative team.

e) Target audience is nursing home staff.

Funded Entity(ies):

SMP Health - St. Raphael

Results of the Project:

CARES Dementia 5-Step Method training was completed in November 2025 with 10% of staff completed the training. The next training is scheduled for April 2026.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

North Dakota

ND CMP Funds Expended for Administrative Uses in CY 2025: $0.00
ND CMP Funds Expended for Emergency Uses in CY 2025: $0.00
ND Active CMP Funded Projects in CY 2025: 8

Project Title: Improving Dementia Capability with CARES® Dementia 5-Step Method

Unique Identifier: ND-1224-KRC-1254

Project Duration: 06/01/2025 to 05/31/2028

Total Amount of CMP Funds Approved for this Project: $14,994.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $14,994.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of the project is to improve dementia capability with an evidence-based method to dementia care and to reduce resident behaviors by having staff incorporate this method into all resident interactions.

b) The goal is to improve quality of care delivered to residents, especially those living with Alzheimer's Disease and related dementias. Objectives include training and certifying a minimum of 15% of direct-care staff in the *CARES Dementia 5-Step Method, Dementia Safety Topics*, and *Dementia Related Behavior.*

c) This project will benefit residents through improved care delivery by teaching staff the *CARES Dementia 5-Step Method,* teaching staff non-escalation and de-escalation techniques that can lead to improved quality of care and decreased use of antipsychotic medication and improving staff engagement with residents focusing on connecting with the resident in a deep and meaningful way.

d) This will benefit the nursing home by creating a more skilled, empathetic, and communicative team.

e) Target audience is nursing home staff.

Funded Entity(ies):

Knife River Care Center

Results of the Project:

CARES Dementia 5-Step Method - 80% of staff have completed this training. *CARES Dementia Safety Topics* - 50% of staff have completed this training. *CARES Dementia-Related Behavior* - this training has just begun. Certified Nursing Assistants (CNAs) seem more knowledgeable on how to manage certain situations and behaviors more appropriately. Staff members who are not CNAs or direct caregiving staff

North Dakota

ND CMP Funds Expended for Administrative Uses in CY 2025: $0.00
ND CMP Funds Expended for Emergency Uses in CY 2025: $0.00
ND Active CMP Funded Projects in CY 2025: 8

(housekeeping, dietary, et cetera.) have been helpful with certain residents who have wandering or certain behaviors. They seem more knowledgeable with redirection and how to approach a situation.

Project Title: Improving Dementia Capability with CARES® Dementia 5-Step Method

Unique Identifier: ND-1224-MRH-1258

Project Duration: 06/01/2025 to 05/31/2028

Total Amount of CMP Funds Approved for this Project: $14,994.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $14,994.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of the project is to improve dementia capability with an evidence-based method to dementia care and to reduce resident behaviors by having staff incorporate this method into all resident interactions.

b) The goal is to improve quality of care delivered to residents, especially those living with Alzheimer's Disease and related dementias. Objectives include training and certifying a minimum of 15% of direct-care staff in the *CARES Dementia 5-Step Method, Dementia Safety Topics*, and *Dementia Related Behavior.*

c) This project will benefit nursing home (NH) residents through improved care delivery by teaching staff the 5-step method, teaching staff non-escalation and de-escalation techniques that can lead to improved quality of care and decreased use of antipsychotic medication and improving staff engagement with residents focusing on connecting with the resident in a deep and meaningful way.

d) This will benefit the NH by creating a more skilled, empathetic, and communicative team.

e) Target audience is nursing home staff.

Funded Entity(ies):

SMP Health Maryhill

North Dakota

ND CMP Funds Expended for Administrative Uses in CY 2025: $0.00

ND CMP Funds Expended for Emergency Uses in CY 2025: $0.00

ND Active CMP Funded Projects in CY 2025: 8

Results of the Project:

CARES Dementia 5-Step Method - 37% of staff have completed the training and 24% have started. *CARES Dementia Safety Topics* - 22% of staff have completed the training and 12% have started. *CARES Dementia-Related Behavior* - 31% of staff have completed the training and 4% have started.

Project Title: Improving Dementia Capability with CARES® Dementia 5-Step Method

Unique Identifier: ND-1224-SAL-1259

Project Duration: 06/01/2025 to 05/31/2028

Total Amount of CMP Funds Approved for this Project: $14,994.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $14,994.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of the project is to improve dementia capability with an evidence-based method to dementia care and to reduce resident behaviors by having staff incorporate this method into all resident interactions.

b) The goal is to improve quality of care delivered to residents, especially those living with Alzheimer's Disease and related dementias. Objectives include training and certifying a minimum of 15% of direct-care staff in the *CARES Dementia 5-Step Method, Dementia Safety Topics, and Dementia Related Behavior.*

c) This project will benefit nursing home (NH) residents through improved care delivery by teaching staff the *CARES Dementia 5-Step Method*, teaching staff non-escalation and de-escalation techniques that can lead to improved quality of care and decreased use of antipsychotic medication and improving staff engagement with residents focusing on connecting with the resident in a deep and meaningful way.

d) This will benefit the NH by creating a more skilled, empathetic, and communicative team.

e) Target audience is nursing home staff.

North Dakota

ND CMP Funds Expended for Administrative Uses in CY 2025: $0.00
ND CMP Funds Expended for Emergency Uses in CY 2025: $0.00
ND Active CMP Funded Projects in CY 2025: 8

Funded Entity(ies):

SMP Health St. Aloisius

Results of the Project:

CARES Dementia 5-Step Method - Total staff started is 43, which is 54%; 18 have started but not completed the training; 25 have completed the course and exam for 36% of all staff. *CARES Dementia Related Behavior* - Total staff started 21 - 30% of staff; eight have started but did not complete the course, and 13 have completed the course and exam for 62%. *CARES Dementia Safety Topics* - Total staff started 13 - 19% of staff; seven have started but the course was not completed; six have completed the course and exam for 9%; 13 staff completed the program and dementia care certification for 19% of staff.

Project Title: Improving Dementia Capability with CARES® Dementia 5-Step Method

Unique Identifier: ND-1224-AVM-1260

Project Duration: 06/01/2025 to 05/31/2028

Total Amount of CMP Funds Approved for this Project: $14,994.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $14,994.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of the project is to improve dementia capability with an evidence-based method to dementia care and to reduce resident behaviors by having staff incorporate this method into all resident interactions.

b) The goal is to improve quality of care delivered to residents, especially those living with Alzheimer's Disease and related dementias. Objectives include training and certifying a minimum of 15% of direct-care staff in the *CARES Dementia 5-Step Method, Dementia Safety Topics*, and *Dementia Related Behavior.*

c) This project will benefit nursing home (NH) residents through improved care delivery by teaching staff the *CARES Dementia 5-Step Method*, teaching staff non-escalation and de-escalation techniques that can lead to improved quality of care and decreased use of antipsychotic medication and improving staff engagement with residents focusing on connecting with the resident in a deep and meaningful way.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

North Dakota

ND CMP Funds Expended for Administrative Uses in CY 2025: $0.00
ND CMP Funds Expended for Emergency Uses in CY 2025: $0.00
ND Active CMP Funded Projects in CY 2025: 8

d) This will benefit the NH by creating a more skilled, empathetic, and communicative team.

e) Target audience is nursing home staff.

Funded Entity(ies):

SMP Health Ave Maria

Results of the Project:

CARES Dementia 5-Step Method - 8% of staff have completed this training. *CARES Dementia Safety Topics* - 1% of staff have completed this training. *CARES Dementia-Related Behavior* - training has not begun.

Project Title: Improving Dementia Capability with CARES® Dementia 5-Step Method

Unique Identifier: ND-1224-LUT-1261

Project Duration: 06/01/2025 to 05/31/2028

Total Amount of CMP Funds Approved for this Project: $14,994.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $14,994.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of the project is to improve dementia capability with an evidence-based method to dementia care and to reduce resident behaviors by having staff incorporate this method into all resident interactions.

b) The goal is to improve quality of care delivered to residents, especially those living with Alzheimer's Disease and related dementias. Objectives include training and certifying a minimum of 15% of direct-care staff in the *CARES Dementia 5-Step Method, Dementia Safety Topics,* and *Dementia Related Behavior.*

c) This project will benefit residents through improved care delivery by teaching staff the *CARES Dementia 5-Step Method*, teaching staff non-escalation and de-escalation techniques that can lead to improved quality of care and decreased use of antipsychotic medication and improving staff engagement with residents focusing on connecting with the resident in a deep and meaningful way.

North Dakota

ND CMP Funds Expended for Administrative Uses in CY 2025: $0.00
ND CMP Funds Expended for Emergency Uses in CY 2025: $0.00
ND Active CMP Funded Projects in CY 2025: 8

d) This will benefit the nursing home (NH) by creating a more skilled, empathetic, and communicative team.

e) Target audience is nursing home staff.

Funded Entity(ies):

Lutheran Home of the Good Shepherd

Results of the Project:

Current completion of staff training is 39%. Changes in staffing on an administrative level made it difficult to roll out the project in the first few months of receiving grant approval; however, the facility is currently practicing what they have learned through this project thus far. Resident Benefit Documentation: Improved resident initial interaction as well as improve engagement with a resident who is having a behavioral concern. My Top 3 Personal Interests Cards have been completed for all residents and placed inside or outside of their room that is visible for staff and visitors to improve overall communication with residents. *CARES* cards have been placed in residential care areas as well as given to staff members.

Project Title: Improving Dementia Capability with CARES® Dementia 5-Step Method

Unique Identifier: ND-0225-LMH-1293

Project Duration: 06/01/2025 to 05/31/2028

Total Amount of CMP Funds Approved for this Project: $14,994.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $14,994.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of the project is to improve dementia capability with an evidence-based method to dementia care and to reduce resident behaviors by having staff incorporate this method into all resident interactions.

b) The goal is to improve quality of care delivered to residents, especially those living with Alzheimer's Disease and related dementias. Objectives include training and certifying a minimum of 15% of

North Dakota

ND CMP Funds Expended for Administrative Uses in CY 2025: $0.00
ND CMP Funds Expended for Emergency Uses in CY 2025: $0.00
ND Active CMP Funded Projects in CY 2025: 8

direct-care staff in the *CARES Dementia 5-Step Method, Dementia Safety Topics*, and *Dementia Related Behavior.*

c) This project will benefit residents through improved care delivery by teaching staff the *CARES Dementia 5-Step Method*, teaching staff non-escalation and de-escalation techniques that can lead to improved quality of care and decreased use of antipsychotic medication and improving staff engagement with residents focusing on connecting with the resident in a deep and meaningful way.

d) This will benefit the nursing home (NH) by creating a more skilled, empathetic, and communicative team.

e) Target audience is nursing home staff.

Funded Entity(ies):

Luther Memorial Home

Results of the Project:

CARES Dementia 5-Step Method - 80% of staff have completed this training and 5% have started it. The training was due in December 2025. *CARES Dementia Safety Topics* - 41% of staff have completed the training and 14% have started it. The training is due April 1, 2026. *CARES Dementia-Related Behavior* - 23% of staff have completed this training and 12% have started it. The training is due June 1, 2026.

Project Title: Improving Dementia Capability with CARES® Dementia 5-Step Method

Unique Identifier: ND-0625-ELGS-1353

Project Duration: 08/01/2025 to 07/31/2028

Total Amount of CMP Funds Approved for this Project: $14,994.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $14,994.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of the project is to improve dementia capability with an evidence-based method to dementia care and to reduce resident behaviors by having staff incorporate this method into all resident interactions.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

North Dakota

ND CMP Funds Expended for Administrative Uses in CY 2025: $0.00
ND CMP Funds Expended for Emergency Uses in CY 2025: $0.00
ND Active CMP Funded Projects in CY 2025: 8

b) The goal is to improve quality of care delivered to residents, especially those living with Alzheimer's Disease and related dementias. Objectives include training and certifying a minimum of 15% of direct-care staff in the *CARES Dementia 5-Step Method, Dementia Safety Topics,* and *Dementia Related Behavior.*

c) This project will benefit residents through improved care delivery by teaching staff the *CARES Dementia 5-Step Method*, teaching staff non-escalation and de-escalation techniques that can lead to improved quality of care and decreased use of antipsychotic medication and improving staff engagement with residents focusing on connecting with the resident in a deep and meaningful way.

d) This will benefit the nursing home (NH) by creating a more skilled, empathetic, and communicative team.

e) Target audience is nursing home staff.

Funded Entity(ies):

Evangelical Lutheran Good Samaritan Society

Results of the Project:

The nursing home did not report project data by the submission deadline as the administrative staff were unavailable or staff were not aware the training had begun.

South Dakota

SD CMP Funds Expended for Administrative Uses in CY 2025: $0.00

SD CMP Funds Expended for Emergency Uses in CY 2025: $0.00

SD Active CMP Funded Projects in CY 2025: 1

Project Title: SNFClinic

Unique Identifier: SD-0424-LTCC-1143

Project Duration: 09/01/2024 to 08/31/2027

Total Amount of CMP Funds Approved for this Project: $89,640.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $32,370.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The *SNFClinic* project is an online electronic learning management system (eLMS) that provides clinical and Inservice staff training, as well as resident care resources, designed to directly improve the quality of care provided at skilled nursing facilities. SNFClinic addresses the need for care-focused training and resources by providing basic, intermediate, and advanced clinical nursing skills training, nursing and administrator continuing education units (CEUs), quality assurance, and performance improvement tools, "what if?" checklists, policies, procedures storage and an assignment tracking tool, course bundles, surveys, and employee management, and training reports. The project will be implemented within six South Dakota skilled nursing facilities (SNFs): Fire Steel Healthcare Center, Fountain Springs Healthcare Center, Palisades Healthcare Center, Prairie View Healthcare Center, Riverview Healthcare Center, and Wheatcrest Hills Healthcare Center.

b) The project will achieve the following goals: 1. On average, a 30% improvement across all participating nursing homes in the quality measures (QM) used by CMS to calculate the QM star rating published on the Care Compare website. CMS publishes QM data quarterly. Project performance will be measured against baselines established at the project's commencement. SNFClinic will provide training and resources related to improving the quality of care and aligning with CMS's stated goals for the Civil Money Penalty (CMP) grant program. Throughout the project, progress will be tracked every quarter, and final performance will be measured at the end of the project period. 2. Fifty percent (50%) of the participating nursing homes' QM star ratings will improve. This will be measured by reviewing the changes to the participating nursing homes' QM star rating on the Care Compare website. Project performance will be measured against the baseline QM star rating at the project's inception. SNFClinic will provide training and resources related to improving the quality of care and aligning with CMS's stated goals for the Civil Money Penalty (CMP) grant program. The following Quality Measures (QMs) will be tracked and utilized to describe the impact on the nursing home resident and the overall care provided by the nursing home. The project intends

South Dakota

SD CMP Funds Expended for Administrative Uses in CY 2025: $0.00
SD CMP Funds Expended for Emergency Uses in CY 2025: $0.00
SD Active CMP Funded Projects in CY 2025: 1

to see potential improvement in the QM measures below, impacting the quality of care and life of residents and services provided in the nursing homes: Percentage of residents whose ability to move independently worsened. Percentage of residents whose need for help with daily activities has increased. Percentage of high-risk residents with pressure ulcers. Percentage of residents who have/had a catheter inserted and left in the bladder. Percentage of residents with a urinary tract infection. Percentage of residents experiencing one or more falls with major injury. Percentage of residents who got antipsychotic medication. Number of hospitalizations per 1,000 resident days. Number of outpatient emergency (ED) visits per 1,000 resident days. Percentage of residents who improved in their ability to move around on their own. Percentage of SNF residents with pressure ulcers/pressure injuries that are new or worsened. Percentage of residents received antipsychotic medication for the first time. Percentage of short-stay residents who were re-hospitalized after a nursing home admission. Percentage of short-stay residents who have had an outpatient emergency department (ED) visit. Rate of successful return to home and community from a SNF.

c) The project aims to provide staff training and resident care resources that will enhance the quality of care delivered to residents.

d) The nursing homes will benefit from the training and resources provided.

e) Not applicable

Funded Entity(ies):

Long-Term Care Consultants, LLC

Results of the Project:

Interim project results: Two of the six (33%) participating facilities increased their quality measure (QM) star rating. Two of the six (33%) QM star ratings went down. The remaining two (33%) QM star ratings were unchanged. The facility's average QM star rating remained the same. All of the facilities improved in at least one Minimum Data Set (MDS) QM category. On average, the facilities improved in 44% of the measured MDS QM categories.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Utah

UT CMP Funds Expended for Administrative Uses in CY 2025: $0.00

UT CMP Funds Expended for Emergency Uses in CY 2025: $0.00

UT Active CMP Funded Projects in CY 2025: 1

Project Title: SPARKing Conversation, Connection, and Fun! During COVID-19 and Beyond

Unique Identifier: UT-0825-SCA-1389

Project Duration: 10/01/2025 to 09/30/2026

Total Amount of CMP Funds Approved for this Project: $110,000.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $0.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The *SPARKing Conversation, Connection, and Fun!* project will provide arts and crafts activities in 22 skilled nursing facilities (SNFs).

b) The project improves quality of life and quality of care for residents by reducing resident stress, improving relationships with resident families, strengthening communication skills, and boosting self-esteem. It will be measured by post-exit surveys given to participants in the program. They also have online workshop evaluation forms. The vendor collects objective feedback from residents and provides quarterly reports to the state.

c) Improves quality of life and quality of care for residents by reducing resident stress, strengthening communication skills, and boosting self-esteem.

d) Provides access to additional resources to the nursing home to improve the quality of care for residents.

e) Helps residents connect with their families.

Funded Entity(ies):

Silver Kite Community Arts Consulting, LLC

Results of the Project:

Interim results are not yet available. The project has been implemented for less than six months.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Wyoming

WY CMP Funds Expended for Administrative Uses in CY 2025: $0.00
WY CMP Funds Expended for Emergency Uses in CY 2025: $0.00
WY Active CMP Funded Projects in CY 2025: 1

Project Title: SNFClinic

Unique Identifier: WY-0324-LTCC-1139

Project Duration: 12/30/2025 to 12/15/2028

Total Amount of CMP Funds Approved for this Project: $89,640.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $0.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The *SNFClinic* project provides clinical and in-service staff training and resident care resources designed to directly improve the quality of care provided at skilled nursing home facilities.

b) The goal is to improve quality measures and star ratings for participating nursing facilities and improve overall quality of care provided to residents.

c) Improved quality of care to residents.

d) *SNFClinic* provides tools and resources to nursing home facilities that relate directly to the quality of care provided to residents to improve facility Quality Measures and star ratings.

e) Not applicable

Funded Entity(ies):

Long-Term Care Consultants, LLC

Results of the Project:

No interim results are available since the project has been implemented for less than six months.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Arizona

AZ CMP Funds Expended for Administrative Uses in CY 2025: $0.00

AZ CMP Funds Expended for Emergency Uses in CY 2025: $0.00

AZ Active CMP Funded Projects in CY 2025: 2

Project Title: SPARKing Conversation, Connection, and Fun! During COVID-19 and Beyond

Unique Identifier: AZ-1224-SCA-1239

Project Duration: 01/21/2025 to 01/20/2026

Total Amount of CMP Funds Approved for this Project: $100,000.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $80,440.71

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of the project is to provide 20 skilled nursing facilities (SNFs) with art activities to reduce resident stress, strengthen communication skills, and boost self-esteem, resulting in a direct improvement to the residents' quality of life.

b) Contained high-quality arts supplies, instructions, and ideas to SPARK conversation, connection, and fun!

c) Silver Kite Community Arts will provide individual art engagement kits to all residents. The project will include online art programs and live arts workshops for residents in participating communities, with a total of 40 arts workshops scheduled during the program period, approximately once a week. These workshops will be recorded and made available for participant communities to view at any time, as well as for SNF communities not participating in the grant, to view as well.

d) Aligns well with the goal of the Civil Money Penalty Reinvestment Program (CMPRP) to reduce adverse events and improve the quality of care and the quality of life for nursing home residents.

e) Not applicable

Funded Entity(ies):

SPARKing Conversation, Connection, and Fun! During COVID-19 and Beyond

Results of the Project:

SilverKite Community Arts sourced, ordered, and purchased the supplies needed to assemble 1,746 SPARK Boxes. By May 15, SilverKite completed this deliverable; all 1,746 SPARK Boxes were assembled and shipped to the 20 Arizona participant communities participating in this program. Evaluations forms

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Arizona

AZ CMP Funds Expended for Administrative Uses in CY 2025: $0.00
AZ CMP Funds Expended for Emergency Uses in CY 2025: $0.00
AZ Active CMP Funded Projects in CY 2025: 2

were sent to communities in mid-May to gauge how they were using the boxes and their impact on residents. SilverKite sent an informational survey to all 20 participating skilled nursing facilities (SNFs) at the beginning of the grant program. The survey asked the communities to share a little more about their residents' interests, what arts workshops have been successful in their communities, and to share a day of the week and time that it would be most convenient for residents and staff to attend the live experiences. Based on the participants' feedback, SilverKite began scheduling online arts workshops for this program; and began offering workshops on April 17th and have offered seven workshops to program participants as of the end of May. Communities participating in this program are receiving weekly emails which contain registration links for the workshops and a schedule of upcoming workshops. SilverKite updated their website to include a webpage specifically for this program. This website can be used for participating SNFs to register for the online workshops, download a schedule of workshops, and view recordings of workshops. Online evaluation forms were emailed to participating communities at the end of each workshop. As the workshops continued, they saw a gradual growth in the number of attendees during the live workshops, and communities were attending multiple times. There was a total of 22 communities who downloaded and viewed recordings of the workshops. Unfortunately, Silverkite was unable to capture data on which communities downloaded the recordings, but they assumed that these are communities that were unable to participate in the live experiences are replaying them for their residents. Comments from survey respondents indicated that the Spark boxes were more engaging for residents than the workshops. Residents appeared highly engaged and appreciative of the Spark Boxes, showing increased alertness. Many especially enjoyed the painting activities, which contributed to their overall happiness.

Project Title: SNFClinic

Unique Identifier: AZ-1224-LTCC-1244

Project Duration: 07/01/2025 to 06/30/2028

Total Amount of CMP Funds Approved for this Project: $14,940.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $0.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of this project is to provide nursing facility staff with comprehensive training through a centralized, technology-based system. It will focus on facilities with high staff turnover and offer tools for training, staff management, and resident care resources in one place.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Arizona

AZ CMP Funds Expended for Administrative Uses in CY 2025: $0.00
AZ CMP Funds Expended for Emergency Uses in CY 2025: $0.00
AZ Active CMP Funded Projects in CY 2025: 2

b) The program aims to help reduce survey deficiencies, improve compliance and quality ratings, strengthen overall quality of care, decrease the number of high-risk long-stay residents with pressure ulcers, and increase the number of short-stay residents who improve their functional abilities.

c) The facilities will provide input with respect to the customization of the individual SNFClinic accounts for the facilities on issues such as, without limitation, (1) monthly training calendars, (2) new employee onboarding training services, and (3) development of any facility-specific training modules. All project deliverables will be fulfilled by Long Term Care Consultants electronically via their website.

d) Trained staff should result in improved resident care.

e) Not applicable

Funded Entity(ies):

Long-Term Care Consultants, LLC

Results of the Project:

Interim results are not yet available.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

California

CA CMP Funds Expended for Administrative Uses in CY 2025: $502,019.60

CA CMP Funds Expended for Emergency Uses in CY 2025: $0.00

CA Active CMP Funded Projects in CY 2025: 4

Project Title: The Java Project: Addressing Social Isolation and Loneliness, COVID-19 and Beyond

Unique Identifier: CA-1020-LAC-680 / CA-0821-LAC-835

Project Duration: 05/01/2022 to 04/30/2025

Total Amount of CMP Funds Approved for this Project: $1,944,076.40

Total Amount of CMP Funds Expended During CY 2025 for this Project: $123,352.93

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The *Java Project* will introduce peer-centric mentoring and inclusiveness activities to 100 skilled nursing homes in California. The *Java Project* comprises three programs —*Java Music Club*, *Java Memory Care*, and *Java Mentorship* —designed to enhance the quality of life for nursing home residents by addressing social isolation and loneliness. The *Java Project* aims to engage residents in activities, expand activities for dementia residents, and foster relationships between residents via mentorship. New structured opportunities for engagement will be created, allowing residents to participate in discussions and foster relationships with one another.

b) The three *Java* programs will address resident isolation and give residents a sense of purpose. Objectives: implement a structured approach to emotional and social support between residents through the *Java* programs and to assess program participation from the perspective of the resident, volunteer, and staff participants.

c) Residents will benefit from receiving mentoring activities in the three programs to be implemented in the facilities: *Java Music Club* creates a safe group where residents can share emotionally about the issues and trauma they have been experiencing; *Java Memory Care* is a structured emotional support program designed for residents living with more advanced dementia; and *Java Mentorship* provides team training and support for residents to reach out and engage with at-risk residents who do not normally participate. The programs will address resident isolation and foster a sense of purpose. Residents will be assessed using the Java Scale before and after participating in the three programs. The intended outcomes are an observed reduction in indicators of loneliness and social isolation, as well as improvements in participants' happiness.

d) Nursing homes will benefit from The *Java Project* because residents will have an improved quality of life, and social isolation and loneliness will be addressed. The *Java Project* aims to engage residents

California

CA CMP Funds Expended for Administrative Uses in CY 2025: $502,019.60
CA CMP Funds Expended for Emergency Uses in CY 2025: $0.00
CA Active CMP Funded Projects in CY 2025: 4

in activities, expand activities for dementia residents, and foster relationships between residents via mentorship. New structured opportunities for engagement will be created, allowing residents to participate in discussions and build relationships with one another.

e) Not applicable

Funded Entity(ies):

LeadingAge California Foundation

Results of the Project:

1. Project Results: The *Java Project* successfully improved resident quality of life in skilled nursing facilities by reducing loneliness and social isolation. Through three evidence-based programs—*Java Music Club, Java Memory Care (Java Time),* and *Java Mentorship*—residents experienced measurable gains in social engagement, emotional connection, and happiness. Across all programs, residents showed 13–23% improvements in participation, emotional connection, and happiness scores. Staff observed residents becoming more socially active, expressing joy, and forming new relationships, which directly enhanced resident well-being. 2. Goals and Objectives: Original Goals: Implement *Java* programs in 100 skilled nursing facilities. Reduce loneliness and isolation, increase engagement, and improve emotional well-being. Evaluation of Outcomes: Goal achieved: 100 facilities enrolled. Measurable improvements exceeded the 10% target in most quarters. This included increases in resident participation, deeper emotional connections, and increasing resident overall happiness. Gaps and Impact: Some facilities struggled due to staffing shortages, illness outbreaks, and space limitations. These gaps occasionally delayed program implementation but did not prevent overall success in improving resident care. 3. Outcomes, Deliverables, and Successes: Deliverables: Recruitment of 100 facilities, stakeholder group formation, monthly meetings, and quarterly reports. Training webinars for all three programs, program guides, and materials distributed. Quantified Outcomes: *Java Music Club*: Participation ↑13–14%, Emotional Connection ↑14–16%, Happiness ↑16–17%. *Java Memory Care*: Participation ↑16–18%, Emotional Connection ↑15–19%, Happiness ↑18–23%. *Java Mentorship*: Participation ↑13–16%, Emotional Connection ↑13–16%, Happiness ↑13–16%. Breakthrough Moments: Residents who were previously withdrawn began smiling, talking, and engaging. Mentorship sessions fostered deep emotional bonds, even among residents with dementia. Replication Plan: Continued free virtual training webinars for staff. Ongoing support from *Java* for troubleshooting and best practices. 4. Challenges and Lessons Learned: Challenges: Staffing shortages, high turnover, illness outbreaks (COVID-19, flu, RSV), and facility closures. Limited space and inconsistent resident participation due to health conditions. Solutions: Flexible scheduling, team-based facilitation,

California

CA CMP Funds Expended for Administrative Uses in CY 2025: $502,019.60

CA CMP Funds Expended for Emergency Uses in CY 2025: $0.00

CA Active CMP Funded Projects in CY 2025: 4

virtual support, and individualized troubleshooting. Lessons Learned: Programs that are structured yet adaptable thrive even during staffing constraints. Early engagement and ongoing support are critical for sustainability. *Java Music Club* was the easiest to implement and most popular; *Java Mentorship* required more effort but delivered strong benefits when embraced.

Project Title: Enlightenment

Unique Identifier: CA-1221-LAC-883

Project Duration: 01/01/2023 to 12/31/2025

Total Amount of CMP Funds Approved for this Project: $1,430,210.45

Total Amount of CMP Funds Expended During CY 2025 for this Project: $175,235.31

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) This *Enlightenment* program will provide 50 nursing homes with programs, exercises, and games through EyeClick (produced by Obie). These activities will help alleviate issues for the nursing home resident surrounding social isolation, loneliness, reduced mobility, and cognitive decline caused by COVID-19. Utilizing Obie technology and programs, activities will stimulate cognitive, motor, and social interaction.

b) Objectives include 1) Install and implement Obie standardized programs within each skilled nursing facility (SNF), provide staff training on Obie navigation and program utilization, 2) developed Obie-based reporting and analytics with a projected outcome of 10% increase in resident cumulative Obie Measurement Index score, and 3) minimum of 50% of participating residents per nursing home for changes in loneliness, social isolation, and happiness.

c) Obie technology will enable residents to interact with a virtual image, providing the environment with enhanced infection control and unique engagement opportunities without requiring direct staff interaction. The Enlightenment Project aims to engage residents in activities, expand activities for dementia residents, and foster relationships between residents. Fifty nursing homes in California will benefit from this program.

d) The Enlightenment Project will help facilities measure resident social isolation, loneliness, and happiness (quality of life).

California

CA CMP Funds Expended for Administrative Uses in CY 2025: $502,019.60
CA CMP Funds Expended for Emergency Uses in CY 2025: $0.00
CA Active CMP Funded Projects in CY 2025: 4

e) Not applicable.

Funded Entity(ies):

LeadingAge California Foundation

Results of the Project:

1. Project Results: Connection to Resident Care Outcomes: The project aimed to improve resident health, safety, and well-being by addressing social isolation, loneliness, enhancing mobility, and stimulating cognitive function. Using the Obie interactive projector, residents engaged in games and activities that promoted movement, memory, and social interaction. Impact: Increased engagement and enjoyment among residents, including those with dementia. Positive emotional outcomes: reduced loneliness, improved mood, and stronger social connections. Integration into physical therapy programs supported mobility and flexibility. 2. Goals and Objectives: Original Goals: Install Obie systems in 50 skilled nursing facilities (SNFs). Train staff on Obie usage. Achieve a 10% increase in Obie Measurement Index (OMI) scores (movement, engagement, memory, distraction). Measure at least 50% of residents for changes in loneliness, isolation, and happiness. Results versus. Goals: Installations and Training: Completed in all 50 SNFs by April 2023. Resident OMI Scores did not meet the cumulative 10% increase but were achieved twice during the project (25% increase in Q8 and 10% in Q9 after targeted campaigns). Resident Engagement: Met 50% benchmark in early quarters one and two and maintained high 40% engagement in later quarters. Gaps: Technical issues (broken projectors, Wi-Fi problems) and staff turnover affected consistency. Limited analytics (only 10 games tracked) reduced measurable data breadth. Impact of Variances: Despite data challenges, qualitative feedback confirmed improved quality of life and emotional well-being. 3. Outcomes, Deliverables, and Successes: Key Deliverables: Installed Obie projectors and trained staff in 50 SNFs. Developed Obie Games Guide and quarterly updates to expand game options. Created analytics reports and resident engagement surveys. Quantified Outcomes: 50 SNFs engaged. Engagement reached 50% in the second quarter, mid 30-40% in quarters four through seven, and remained near 48–49% in quarters eight through eleven. OMI score spikes in the eighth quarter (+25%) and ninth quarter (+10%) after awareness campaign. Breakthroughs: Integration of Obie into physical therapy programs. Positive feedback from residents and families, including dementia and visually impaired residents. Replication Plan: Obie projectors retain 60+ games permanently, minimizing ongoing costs. Facilities can opt for paid subscriptions for updates and support. Continued use is supported by intuitive design and versatility across activities and therapy. 4. Challenges and Lessons Learned: Challenges: Technical issues (broken bulbs, poor Wi-Fi, equipment failures). Staff turnover requiring repeated training. Limited analytics scope (only 10 games tracked). Facility closure required equipment relocation. Solutions:

California

CA CMP Funds Expended for Administrative Uses in CY 2025: $502,019.60

CA CMP Funds Expended for Emergency Uses in CY 2025: $0.00

CA Active CMP Funded Projects in CY 2025: 4

Backup components provided; “Do Not Unplug” stickers created to prevent damage. Ongoing webinars and in-person orientations for new staff. Quarterly surveys supplemented analytics gaps. Lessons Learned: Need for adaptable, person-centered programming for diverse resident abilities. Importance of strong communication and monitoring to maintain engagement. Future projects should include broader analytics and contingency plans for technology failures. Sustainability: The project demonstrated strong potential for long-term success: Minimal ongoing costs due to preloaded games. Versatile use in both group and individual settings. Supports physical, cognitive, and social engagement, making it a sustainable quality-of-life tool.

Project Title: Creativity Never Gets Old

Unique Identifier: CA-0222-COF-912

Project Duration: 01/01/2023 to 12/31/2025

Total Amount of CMP Funds Approved for this Project: $444,032.37

Total Amount of CMP Funds Expended During CY 2025 for this Project: $122,926.81

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) This project aims to improve skilled nursing facilities (SNFs) resident quality of life through the Creative Spark training and activity program suite (Well Connected, Well Connected Español, and Social Call). The focus will be on increasing wellbeing, reducing loneliness and depression, and increasing job satisfaction of nursing home staff responsible for residents’ quality of life.

b) Objectives include: 1) Execute Creative Spark's 6-week training to SNF direct service staff and administrators on the science, art and implementation of creative engagement programs in skilled nursing facilities (SNF), 2) Promote Creative Spark's training and deliver training to activity and wellness staff, 3) Develop and deliver Creative Spark's training to certified nursing assistants at all participating SNFs, 4) Develop and deliver online guide and video training resources to SNF staff, 5) Ensure SNF residents have access to creative connection program opportunities, 6) Demonstrate measurable impact to staff and residents through the creative connection programs, 7) Demonstrate improvements in quality of life experienced by residents through surveys and field observation, and 8) Assess future growth of the Creative Spark project.

California

CA CMP Funds Expended for Administrative Uses in CY 2025: $502,019.60
CA CMP Funds Expended for Emergency Uses in CY 2025: $0.00
CA Active CMP Funded Projects in CY 2025: 4

c) Residents will readily access one or more programs to create meaningful connections with new people beyond their residence in either one-on-one or group virtual support and learning activities.

d) Creative Spark will train SNF staff in customizing resident engagement methods using creative aging principles, resulting in more spontaneous and meaningful interactions with residents. This program also aims to increase staff job satisfaction. The Creative Spark aims to instill new knowledge, inspiration, energy, and fulfillment into the organization's workforce and their work. Staff will learn how to provide access to and engage residents in Covia's 290 free phone and online-based activities.

e) Not applicable

Funded Entity(ies):

Covia Foundation (Front Porch Communities Foundation)

Results of the Project:

1. Project Results: Connection to Resident Care Outcomes: The project aimed to improve skilled nursing facility resident quality of life through the Creative Spark training and activity Program suite (Well Connected, Well Connected Espanol, and Social Call). This was achieved by: Training 36 skilled nursing facility (SNF) administrators and 90 caregivers, leading to better creative engagement techniques. Ensuring 100% of residents participated in at least one creative connection program to create meaningful connections with new people in the five participating skilled nursing facilities. Post-intervention surveys showed: Ninety-four percent (94%) of trainees would recommend the training. Ninety-seven percent (97%) demonstrated new creative engagement skills. One hundred percent (100%) felt more confident and had more meaningful interactions with residents. Resident surveys indicated an 85.7% reduction in feelings of loneliness among those who reported “often” feeling lonely before the intervention. 2. Goals and Objectives: Original Goals: Adapt Creative Spark’s 6-week training course into an online e-learning course. Provide creative connection programs to at least 70% of residents in five SNFs. Demonstrate measurable positive outcomes for staff and residents. Assess potential to scale the project statewide. Evaluation: Goal 1: Achieved, e-learning version launched and beta evaluated. Goal 2: Exceeded, 100% resident participation in at least one connection program. Goal 3: Strong staff engagement and positive outcomes, 31% response rate on the final survey that evaluated if graduates would recommend the training and if they are having more meaningful interactions with residents: Ninety-four percent (94%) of trainees who responded would recommend training to others, 97% demonstrated knowledge of creative engagement techniques, 100% felt more creatively confident, and 100% experienced more meaningful interactions with

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

California

CA CMP Funds Expended for Administrative Uses in CY 2025: $502,019.60

CA CMP Funds Expended for Emergency Uses in CY 2025: $0.00

CA Active CMP Funded Projects in CY 2025: 4

their residents; sixty-one of ninety resident surveys were collected due to lack of budget for training. Goal 4: Thirteen of twenty-five needs assessment survey completed by targeted SNFs. Gaps and Impact: Resident survey shortfall due to staffing and budget limitations. Despite gaps, data still showed significant improvements in resident engagement and reduced loneliness. 3. Outcomes, Deliverables, and Successes: Deliverables: Online training course, virtual classes, catalogs, surveys, impact reports. Quantified Outcomes: Thirty-six (36) administrators and 90 caregivers were trained. Sixty-one (61) of 90 resident surveys collected. Ninety-four (94%) of trainees recommended training and 97% gained new skills. Breakthroughs: Successful transition to e-learning; strong engagement despite generational resistance to virtual programs. Replication Plan: Continue beta testing and focus groups in 2026. Budget for staff-led resident surveys to ensure consistency and reduce bias. 4. Challenges and Lessons Learned: Challenges: Resident resistance to virtual programming. Limited budget and staff capacity for resident surveys. Solutions: Staff actively participated in virtual sessions to encourage residents. Effectiveness: Engagement improved, but survey goals were partially unmet. Lessons Learned: Future projects should allocate resources for Creative Spark staff to conduct surveys. Address generational barriers to virtual engagement through hands-on support.

Project Title: GARDEN Project: Garden Access Responds to Diagnosis and Environmental Needs

Unique Identifier: CA-0222-LAC-914

Project Duration: 07/01/2023 to 12/31/2025

Total Amount of CMP Funds Approved for this Project: $3,996,224.72

Total Amount of CMP Funds Expended During CY 2025 for this Project: $378,330.83

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of the *Garden Access Responds to Diagnosis and Environmental Needs (GARDEN)* project at seventy-five (75) skilled nursing facilities (SNFs) to impact the problem of social isolation and loneliness caused by COVID-19. The program will bring nature indoors with mobile, indoor therapeutic sensory gardens, and Eldergrow Educators will teach therapeutic horticulture classes. Eldergrow's indoor therapeutic sensory garden, combined with the hands-on work of its educators in partnership with facility staff, helps alleviate behavioral issues and psychological symptoms of dementia, improving the quality of life for residents, staff, and families.

California

CA CMP Funds Expended for Administrative Uses in CY 2025: $502,019.60
CA CMP Funds Expended for Emergency Uses in CY 2025: $0.00
CA Active CMP Funded Projects in CY 2025: 4

b) Objectives include: 1) Partner with Eldergrow to deliver and install gardens into skilled nursing facilities and coordinate and administer program training, and 2) Administer therapeutic horticulture classes and garden maintenance.

c) Residents will benefit from reduced loneliness, meaningful and productive therapeutic activity, depression reduction, cognitive activity stimulation, and motor skills encouragement. The Eldergrow classes engage the residents' five senses, helping them become more engaged with their surroundings and opening the door to opportunities to socialize through the therapeutic horticulture garden program.

d) With LeadingAge California taking over all subcontractor duties, nursing homes would receive more streamlined services from one provider versus two (with the closure of Eldergrow). Nursing homes would also benefit from a decrease in behavioral issues and psychological symptoms of dementia, as well as an overall improvement in the quality of life for their residents, staff, and families. Nursing homes would also benefit from a decrease in behavioral issues and psychological symptoms of dementia, as well as an overall improvement in the quality of life for their residents, staff, and families.

e) Not applicable

Funded Entity(ies):

LeadingAge California

Results of the Project:

1. Project Results: The *GARDEN Project* aimed to impact the problem of social isolation and loneliness caused by COVID-19, as well as reduce depression, stimulate cognitive activity, and encourage motor skills through therapeutic horticulture classes and therapeutic sensory gardens. Despite major disruptions, including facility closures, COVID-19 outbreaks, and the loss of a key subcontractor, the project delivered 1,135 classes in the final two quarters. Residents showed strong engagement, with 97% meeting or partially meeting class goals and 92% demonstrating positive or improved progress, exceeding the original 80% success target. These outcomes reflect measurable benefits to sensory stimulation, cognitive engagement, socialization, and motor skills, directly enhancing quality of life. 2. Goals and Objectives: Original Goals: Implement the *GARDEN Project* into seventy-five skilled nursing facilities. Deliver 52 horticulture classes per garden across 150 gardens. Achieve 80% success in meeting class objectives and improving resident progress. Evaluation: While closures and delays reduced overall class numbers, the project rebounded strongly, delivering 1,135 classes after resumption. Meeting class objectives and

California

CA CMP Funds Expended for Administrative Uses in CY 2025: $502,019.60
CA CMP Funds Expended for Emergency Uses in CY 2025: $0.00
CA Active CMP Funded Projects in CY 2025: 4

improving resident progress had success rates that exceeded targets: success rate of 97% for meeting or partially meeting goals, and 92% for the remained positive and improved category. Gaps and Impact: A 10-month suspension caused loss of momentum, garden deterioration, and reduced engagement. Recovery efforts restored programming and rebuilt trust, mitigating long-term negative impacts on resident care. 3. Outcomes / Deliverables / Successes: Deliverables: Therapeutic horticulture classes resumed at scale. Gardens rehabilitated with safe plants, organic soil amendments, and passive watering systems. Quantified Outcomes: 1,135 classes delivered post-relaunch, in quarters 11 and 12. Thirty (30) of 41 educators returned, ensuring continuity and quality. Some educators expanded their caseloads to ensure rapid coverage across facilities. Key Achievements: Rapid recovery after subcontractor loss and funding delays. Inclusive programming with multilingual materials (Spanish, Tagalog) and updated lesson plans. At the end of the project, every participating garden was maintained to look healthy by having Winter Spruce-Up classes. Replication Plan: Strategies included updated lesson plans, multilingual resources, and refreshed training resources. 4. Challenges and Lessons Learned: Challenges: Facility closures, COVID-19 quarantines, subcontractor collapse, and funding delays. Solutions: LeadingAge absorbed subcontractor duties, secured funding, and reengaged educators. Flexible lesson delivery (small groups, room-to-room visits) maintained resident access. Lessons Learned: Build contingency plans for vendor failure and public health disruptions. Maintain strong communication and trust with facilities to prevent disengagement. Future projects should prioritize sustainability measures early (e.g., passive watering, staff training).

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State Civil Money Penalty Reinvestment Projects Funded in Calendar Year (CY) 2025
San Francisco Long-Term Care Location

Hawaii

HI CMP Funds Expended for Administrative Uses in CY 2025: $0.00
HI CMP Funds Expended for Emergency Uses in CY 2025: $0.00
HI Active CMP Funded Projects in CY 2025: 0

The state had no CMP-funded projects in calendar year 2025.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Nevada

NV CMP Funds Expended for Administrative Uses in CY 2025: $0.00

NV CMP Funds Expended for Emergency Uses in CY 2025: $0.00

NV Active CMP Funded Projects in CY 2025: 2

Project Title: SNFClinic

Unique Identifier: NV-0224-LTCC-1124

Project Duration: 05/13/2025 to 04/30/2028

Total Amount of CMP Funds Approved for this Project: $104,580.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $19,210.45

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The *SNFClinic* project aims to provide clinical and in-service staff training and resident care resources designed to directly improve the quality of care.

b) On average, the participating facilities will improve by thirty percent (30%) in their CMS Quality Measures and fifty percent (50%) of the participating facilities' Quality Measure star rating will improve.

c) Improve the quality of care provided by the skilled nursing home facilities.

d) Provides staff training and resident care resources to improve the quality of care provided to residents.

e) Not applicable.

Funded Entity(ies):

Long-Term Care Consultants, LLC

Results of the Project:

Interim results:
The *SNFClinic* project began implementation with all seven participating nursing homes. Baseline measures have been established for all seven nursing homes. As of November 4, 2025, the project reported that data showing facilities' performance from August 1 ,2025 to October 31, 2025, is unavailable due to CMS freezing its publication of nursing home performance data. It was noted that project data is only available through March 1, 2025. The report documentation came directly from the project subject matter expert from the clinic. The project was operational during the period but was unable to access the reports due to the CMS shutdown.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Nevada

NV CMP Funds Expended for Administrative Uses in CY 2025: $0.00

NV CMP Funds Expended for Emergency Uses in CY 2025: $0.00

NV Active CMP Funded Projects in CY 2025: 2

Project Title: SPARKing Conversation, Connection, and Fun! During COVID-19 and Beyond

Unique Identifier: NV-0624-SCA-1179

Project Duration: 05/13/2025 to 04/30/2026

Total Amount of CMP Funds Approved for this Project: $104,556.24

Total Amount of CMP Funds Expended During CY 2025 for this Project: $92,590.91

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The project will offer online live arts workshops and SPARK Box activity toolkits for residents.

b) The objective is to have 25% to 30% of participating communities attend the online workshops. Of those communities, the goal is to have: 75% report a positive impact of participation in the workshops on their moods and/or energy levels, an average of 75% of residents attending will show active engagement during the workshops and 95% of participating communities will rate the SPARK Box art activity toolkits as easy to use.

c) Improve moods and/or energy levels, communication, and social connectedness.

d) Improve communication between residents and staff.

e) Not applicable

Funded Entity(ies):

Silver Kite Community Arts Consulting, LLC

Results of the Project:

Interim results:
The project began implementation in participating nursing homes. Residents' moods and energy levels have improved with box use: 33.3%, 100% of residents showed active engagement in the workshop and 66.7% of the residents seem to like the box.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

State Civil Money Penalty Reinvestment Projects Funded in Calendar Year (CY) 2025
Seattle Long-Term Care Location

Alaska

AK CMP Funds Expended for Administrative Uses in CY 2025: $3,231.83

AK CMP Funds Expended for Emergency Uses in CY 2025: $0.00

AK Active CMP Funded Projects in CY 2025: 1

Project Title: SilverKite MOREArts ArtKits

Unique Identifier: AK-0325-SCA-1324

Project Duration: 03/01/2025 to 02/29/2028

Total Amount of CMP Funds Approved for this Project: $90,000.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $7,505.48

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The *SilverKite MOREArts ArtKits* project improves nursing home resident quality of life through structured arts engagement programming supported by standardized activity kits, staff training, and ongoing coaching. Participating Alaska skilled nursing facilities receive seasonal ArtKits containing supplies, step-by-step instructions, and instructional videos designed to support reminiscence, creativity, and social interaction among residents.

b) Project objectives include implementation of the ArtKit activities at least two times per month in participating facilities. Engagement of an average of six to 12 residents per activity session. At least 75% of participating residents will demonstrate improved mood or energy following participation. At least 85% of participating facilities regularly incorporating ArtKit materials into activity programming. Staff completion of professional development training and access to coaching to support sustained program delivery. Quarterly evaluation results will demonstrate consistent program utilization and achievement of objectives, with facilities reporting regular monthly use of ArtKit activities and 100% of survey respondents observing improved resident mood, enjoyment, and engagement during participation.

c) The project strengthens person-centered programming, increases meaningful activity opportunities, and builds facility staff capacity to sustain quality-of-life interventions for nursing home residents.

d) The nursing homes benefit from the additional activity offered to residents.

e) Not applicable.

Funded Entity(ies):

Silver Kite Community Arts Consulting, LLC

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

State Civil Money Penalty Reinvestment Projects Funded in Calendar Year (CY) 2025
Seattle Long-Term Care Location

Alaska

AK CMP Funds Expended for Administrative Uses in CY 2025: $3,231.83
AK CMP Funds Expended for Emergency Uses in CY 2025: $0.00
AK Active CMP Funded Projects in CY 2025: 1

Results of the Project:

During August 2025 through January 2026, the *SilverKite MOREArts ArtKit* project was implemented in six Alaska skilled nursing facilities. Seasonal ArtKits, staff training, online instructional resources, and coaching supported program delivery. Facilities used ArtKit activities multiple times per month, with average participation of eight to nine residents per session. Evaluation surveys and facility feedback showed positive outcomes, with 100% of respondents reporting improved resident mood, increased engagement, and enjoyment during activities. Project performance met established quantitative goals for utilization, participation, and psychosocial outcomes across both quarters. Results demonstrate sustained staff adoption and successful integration of structured arts programming as a quality-of-life intervention for nursing home residents. This project was implemented across geographically remote Alaska nursing homes where access to in-person enrichment programming and specialty activity providers was limited due to travel barriers, workforce shortages, and seasonal access constraints. The ArtKit delivery model allows standardized quality-of-life programming to reach rural and frontier facilities without requiring onsite consultants, supporting equitable resident engagement opportunities statewide. Quarterly reports confirm consistent implementation following initial staff training, with facilities reporting ease of use, minimal staff burden, and successful integration into existing activity calendars. Minor startup delays occurred in some facilities due to pre-scheduled activity calendars; however, utilization increased after implementation periods began. Evaluation outcomes continue to meet or exceed established quantitative goals, including regular monthly program use and universal reporting of improved resident mood and engagement. Coaching sessions provide ongoing technical assistance to support sustainability and adaptation to residents' needs. The project demonstrates a scalable and replicable model for improving psychosocial well-being and person-centered engagement in nursing homes, particularly in rural or resource-limited environments.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Idaho

ID CMP Funds Expended for Administrative Uses in CY 2025: $0.00

ID CMP Funds Expended for Emergency Uses in CY 2025: $0.00

ID Active CMP Funded Projects in CY 2025: 5

Project Title: ENGAGE Project (E-Enhance, N-Nurture, G-Grow, A-Accommodate, G-Gain, and E-Energize), also known as LifeLoop

Unique Identifier: ID-1022-VVCC-1024

Project Duration: 12/02/2022 to 11/30/2025

Total Amount of CMP Funds Approved for this Project: $195,386.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $0.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The *Engage (E-Enhance, N-Nurture, G-Grow, A-Accommodate, G-Gain, and E-Energize) Project, also known as LifeLoop*, will utilize It's Never Too Late (iN2L) equipment and subscriptions to support nursing home residents with behavioral challenges, thereby reducing negative behaviors and increasing positive social interactions. In addition, the Engage Project will facilitate positive interactions between residents and facility staff. Valley Vista Care Corporation operates two skilled nursing facilities in Idaho.

b) The project's primary goals are to 1) reduce social isolation by addressing the life enrichment needs and individual interests of the residents of the participating communities and 2) increase their activity engagement. Engagement and impact on residents will be measured through improved Quality of Life Survey and the iN2L monthly usage report.

c) The iN2L tool enables the facility to address each individual's needs and tailor the program accordingly. Some added benefits include witnessing other residents engaged in activities, experiencing joy, and forming connections; peer connections bring together those with similar and different interests; and connecting residents who may not have interacted outside the facility.

d) Staff engagement leads to benefits for residents.

e) Nursing home staff and resident family members

Funded Entity(ies):

Valley Vista Care Corporation

Idaho

ID CMP Funds Expended for Administrative Uses in CY 2025: $0.00
ID CMP Funds Expended for Emergency Uses in CY 2025: $0.00
ID Active CMP Funded Projects in CY 2025: 5

Results of the Project:

LifeLoop met its project goals by significantly improving resident quality of life through high engagement, stronger social connections, and enhanced emotional well-being. Residents reported greater joy, purpose, and daily interest, along with reduced loneliness and frustration, leading to more stable moods and fewer behavioral interventions. Engagement hours demonstrated sustained participation: Sandpoint reached a monthly high of 422.86 hours and a quarterly high of 1,139.99 hours, while St. Maries achieved a monthly high of 591.07 hours and a quarterly high of 1,839.86 hours. This consistent activity increased cognitive and physical stimulation, mobility, and early identification of health changes. Social connectedness also improved, reducing withdrawal behaviors and enhancing communication and oversight. In complex care settings, individualized digital content decreased agitation and unsafe behaviors, improving safety for residents and staff. The quarterly survey and review process strengthened system-level quality improvement by enabling real-time monitoring and program adjustments. The It's Never Too Late (iN2L) tool further supported personalized engagement and new peer connections. Overall, LifeLoop delivered measurable emotional, social, behavioral, and operational benefits across both facilities.

Project Title: The Java Project: Addressing Loneliness and Social Isolation

Unique Identifier: ID-1223-FCT-1104

Project Duration: 01/16/2024 to 01/15/2027

Total Amount of CMP Funds Approved for this Project: $15,000.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $5,000.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of the project is to improve quality of life and reduce isolation and loneliness among nursing home residents using the suite of three programs: *Java Music*, a peer support program; *Java Memory Care*, peer support designed for people living with moderate-advanced dementia; and *Java Mentorship*, which consists of a weekly team meeting made up of residents and volunteers who receive training and then visit in pairs with socially isolated residents.

b) The goal of the *Java Project* is to improve the quality of life of residents in nursing facilities by decreasing loneliness and social isolation through the implementation of three evidence-based, standardized peer support activity programs. The project's objectives are to implement weekly peer

Idaho

ID CMP Funds Expended for Administrative Uses in CY 2025: $0.00
ID CMP Funds Expended for Emergency Uses in CY 2025: $0.00
ID Active CMP Funded Projects in CY 2025: 5

support and mentoring groups utilizing *Java* materials and methods, with the aim of reducing loneliness and social isolation and increasing happiness among participants.

c) Nursing facility residents will benefit from the *Java* programs by developing stronger social and emotional bonds with each other. Through sharing grief, sorrow, and happiness in the *Java* groups, empathetic connections are built, and these social relationships carry over to other activities and nursing home life. Residents will directly benefit from new, close relationships and from having a meaningful purpose in helping their peers.

d) The nursing home will benefit from increasing opportunities for positive engagement and interaction between staff and residents, as well as among residents.

e) Nursing home staff and volunteers

Funded Entity(ies):

Franklin County Transitional Care

Results of the Project:

The *Java Memory* program, launched in February 2025, showed strong, steady growth, and became a core engagement initiative at Franklin County Transitional Care. Resident participation increased by 78%, and weekly music-based reminiscence sessions consistently improved emotional well-being, reduced social isolation, strengthened peer relationships, and enhanced cognitive engagement—even among residents with advanced dementia. The program effectively engaged previously withdrawn residents increased communal dining and activity participation and supported smoother daily operations through reduced behavioral stress and improved communication. Accessibility adaptations, along with ongoing training and integration with other *Java* programs, ensured inclusive participation and sustained therapeutic impact. Overall, the program delivered measurable improvements in resident mood, social connection, cognitive activation, and overall satisfaction throughout the year.

Project Title: The Java Project: Addressing Loneliness and Social Isolation

Unique Identifier: ID-0324-IHCA-1129

Project Duration: 04/03/2024 to 04/02/2027

Total Amount of CMP Funds Approved for this Project: $240,000.00

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State Civil Money Penalty Reinvestment Projects Funded in Calendar Year (CY) 2025
Seattle Long-Term Care Location

Idaho

ID CMP Funds Expended for Administrative Uses in CY 2025: $0.00

ID CMP Funds Expended for Emergency Uses in CY 2025: $0.00

ID Active CMP Funded Projects in CY 2025: 5

Total Amount of CMP Funds Expended During CY 2025 for this Project: $80,000.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The purpose of the project is to improve the quality of life and reduce social isolation and loneliness among nursing facility residents by engaging them in the *Java* program. The *Java* program consists of three parts: *Java Music*, *Java Memory*, and *Java Mentorship*.

b) The goal of the *Java Project* is to improve the quality of life of residents in nursing facilities by decreasing loneliness and social isolation through the implementation of three evidence-based, standardized peer support activity programs developed by Dr. Kristine Theurer, founder of *Java Group Programs*. The project's objectives are to implement weekly peer support and mentoring groups utilizing *Java* materials and methods, with the aim of reducing loneliness and social isolation and increasing happiness among participants

c) Nursing facility residents will benefit from the *Java* programs by developing stronger social and emotional bonds with each other. Through sharing grief, sorrow, and happiness in the *Java* groups, empathetic connections are built, and these social relationships carry over to other activities and nursing home life. Residents will directly benefit from new, close relationships and from having a meaningful purpose in helping their peers.

d) The nursing home will benefit from increasing opportunities for positive engagement and interaction between staff and residents, as well as among residents.

e) Nursing home staff

Funded Entity(ies):

Idaho Health Care Association (IHCA)

Results of the Project:

The *Java Project* produced measurable benefits for resident health and well-being, including nearly a 20% reduction in social isolation and loneliness and an 18% increase in reported happiness. Facilities documented improved emotional regulation, greater engagement among residents with advanced dementia, and increased participation in daily activities such as meals and group programs, all contributing to reduced behavioral escalation, lower fall risk, and preserved functional ability. Year-two expansion of *Java Memory* further supported cognitive stimulation and calming interventions for residents with dementia.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Idaho

ID CMP Funds Expended for Administrative Uses in CY 2025: $0.00

ID CMP Funds Expended for Emergency Uses in CY 2025: $0.00

ID Active CMP Funded Projects in CY 2025: 5

Sustained outcomes were reinforced through monthly facilitator support, technical assistance, and ongoing training, despite staffing turnover. Overall, the program strengthened emotional health, physical safety, behavioral stability, and quality of life across participating facilities, with more than 700 sessions and almost 700 documented resident engagements delivered during the reporting period.

Project Title: Continuous Quality Improvement

Unique Identifier: ID-0424-IHCA-1148

Project Duration: 06/03/2024 to 06/02/2027

Total Amount of CMP Funds Approved for this Project: $407,846.28

Total Amount of CMP Funds Expended During CY 2025 for this Project: $162,222.44

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The conference aims to enhance the lives of nursing home residents and provide solutions for high-quality care. The association assists providers in their quality improvement journey through training provided on continuous quality improvement. The project will train Idaho skilled nursing facility staff on the principles of continuous quality improvement using the Baldrige Framework, with a focus on processes such as root cause analysis. Idaho Health Care Agency (IHCA) will ensure facility engagement, review each facility's data, and help celebrate improvements. Idaho Health Care Association (IHCA) will hold an annual quality conference for the participating facilities. Topics include Baldridge Criteria for Performance Excellence, Root Cause Analysis, Setting Your Quality Goals, Getting Staff Buy-In and Leveraging Experts on Your Quality Journey, and a Quality Improvement Lunch Speaker.

b) Project progress toward goals will be measured by comparing baseline data against CMS Quality Measures.

c) The resident will benefit from improved quality of care.

d) The nursing home will benefit by improving CMS Quality Measures.

e) Not applicable

Idaho

ID CMP Funds Expended for Administrative Uses in CY 2025: $0.00

ID CMP Funds Expended for Emergency Uses in CY 2025: $0.00

ID Active CMP Funded Projects in CY 2025: 5

Funded Entity(ies):

Idaho Health Care Association (IHCA)

Results of the Project:

Idaho's long-term care facilities continue to show strong, data-driven improvement with measurable reductions in rehospitalizations, Emergency Department (ED) visits, urinary tract infections (UTIs), functional decline, antipsychotic use, and falls with major injury. Facilities achieved notable gains such as short-stay rehospitalization declines up to 16.15%, ED visit reductions as high as 58.59%, UTI decreases up to 53.85%, and complete elimination of major-injury falls in at least one facility. These outcomes were supported by targeted interventions including enhanced staff training, restorative program expansion, improved Minimum Data Set (MDS) documentation accuracy, strengthened Quality Assurance Performance Improvement (QAPI) processes, electronic health record (EHR) workflow optimization, and focused workforce recruitment and retention efforts. Despite these advances, challenges persist, particularly staffing instability in rural areas, limited engagement with consulting resources, persistent high antipsychotic use in select facilities, data gaps in key metrics, and leadership turnover affecting QAPI continuity. Overall, the project continues to drive measurable improvements in clinical quality and system performance statewide.

Project Title: SPARKing Conversation, Connection, and Fun! During COVID-19 and Beyond

Unique Identifier: ID-0224-SCA-1294

Project Duration: 07/01/2025 to 06/30/2026

Total Amount of CMP Funds Approved for this Project: $75,943.07

Total Amount of CMP Funds Expended During CY 2025 for this Project: $57,629.80

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) SilverKite Community Arts will provide skilled nursing facility (SNF) residents in 16 Idaho communities with SPARK Arts Activity Boxes and community-wide access to live online art workshops once a week during the program period.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Idaho

ID CMP Funds Expended for Administrative Uses in CY 2025: $0.00
ID CMP Funds Expended for Emergency Uses in CY 2025: $0.00
ID Active CMP Funded Projects in CY 2025: 5

b) The quantifiable goals of the project will be a 30% participation rate as the program is rolled out with the expectation that it will grow with the support of the online tools; 100% of recipients believe that the boxes are easy to use; 90% of residents engaging with the boxes can note a benefit to mood and/or energy level. Silverkite anticipates achieving the following goals: 85% active or passive use rate over time; 40-50% of the participant communities will attend the online workshops; 90% of the residents will report a positive impact of participation in workshops on their moods or energy levels; and an average 75 - 100% of resident will engage during the workshops.

c) Engagement in the arts can help relieve stress, strengthen communication skills, and boost self-esteem. SPARK Boxes are designed for individual resident use and can provide stimulation and engagement during quarantine, isolation, or illness. While participating in the art workshops, residents will increase their interaction with others, practice fine motor skills, express emotions, and learn new skills, which can help decrease social isolation, reduce cognitive decline, boost confidence, and alleviate depression.

d) Staff members can utilize the videos and online classes to acquire new skills that will enable them to replicate these arts programs in the future.

e) Nursing home staff

Funded Entity(ies):

Silver Kite Community Arts Consulting, LLC

Results of the Project:

SilverKite successfully delivered all 1,178 SPARK Boxes to 16 Idaho skilled nursing facilities (SNFs) ahead of schedule, with strong early uptake reflected in 40% of communities already distributed all boxes and 66.7% of remaining sites having only 10 boxes left. Engagement is high, with 60% of communities using at least 25% of their boxes and 20% reporting 75–100% active use. Staff report positive resident outcomes: 60% observe enjoyment, 20% note improved mood, and 20% report both improved mood and energy following SPARK Box use. Facilities also describe weekly anticipation, high-quality materials, and effective use of the boxes as non-pharmaceutical calming tools. SilverKite delivered eight live online workshops, with six SNFs attending and three recorded sessions viewed asynchronously, supported by a new program webpage and weekly reminders. Barriers include timing conflicts reported by 50% of non-attending communities. The project strengthened resident engagement, increased staff–resident interaction, expanded access through flexible workshop formats, and fostered consistent creative routines. Overall measurable benefits include: 1,178 boxes distributed, strong utilization across 16 SNFs, 60% positive

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Idaho

ID CMP Funds Expended for Administrative Uses in CY 2025: $0.00
ID CMP Funds Expended for Emergency Uses in CY 2025: $0.00
ID Active CMP Funded Projects in CY 2025: 5

resident reactions, 40% mood or energy improvements, eight live workshops delivered, three recordings viewed, and the establishment of predictable weekly creative-engagement routines across multiple facilities.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Oregon

OR CMP Funds Expended for Administrative Uses in CY 2025: $0.00

OR CMP Funds Expended for Emergency Uses in CY 2025: $0.00

OR Active CMP Funded Projects in CY 2025: 4

Project Title: Nursing Facility Behavioral Health and Pandemic Impact Project (NFBHPI)

Unique Identifier: OR-0921-OEN-842

Project Duration: 03/01/2022 to 12/31/2025

Total Amount of CMP Funds Approved for this Project: $508,983.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $150,983.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The Oregon *ECHO (Extension for Community Healthcare Outcomes)* Network implemented a post-COVID-19 series of the virtual program, *Nursing Facility Behavioral Health and Pandemic Impact ECHO Program*. The project will establish a post-pandemic COVID-19 cohort within the *Nursing Facility Behavioral Health ECHO (NFBH)* program, addressing topics that impact nursing facilities and their residents. The Oregon ECHO Network uses the *Project ECHO©* methodology to deliver its project. Initially developed at the University of New Mexico in 2003, Project ECHO© is a telementoring program that builds the capacity of participants to manage common conditions that they typically refer to specialists outside of their setting. Using simple webcam and basic technology, learners connect through an internet platform to collectively interact with an interdisciplinary team of experts. The sessions last 60 minutes, and include a 20-minute practical, process-oriented expert presentation by a specialist, and discussion of one case with specialists and participants. All cases are de-identified, and the healthcare learners maintain responsibility for care of any patients that are discussed.

b) *ECHO* is a 24-session group tele-mentoring format that builds the capacity of participants to manage common conditions typically referred to a specialist outside their setting. The project aims to develop more knowledgeable and skilled nursing facility (SNF) staff who are better equipped to deliver person-centered care that addresses their residents' mental health concerns and behavioral issues in the post-COVID era. Topics address issues that the group is navigating in the post-COVID era and beyond. Each session lasts approximately 60 minutes and includes a 20-minute, process-oriented expert presentation by a specialist, followed by a discussion of one case with specialists and caregiver participants. The project consists of three 12-session *ECHO* virtual programs that meet bi-weekly and will launch a new series annually through 2025. Project goals: recruit, engage, and retain 12 to 15 nursing facilities to participate; develop and deliver a series of three 12-session

Oregon

OR CMP Funds Expended for Administrative Uses in CY 2025: $0.00
OR CMP Funds Expended for Emergency Uses in CY 2025: $0.00
OR Active CMP Funded Projects in CY 2025: 4

events; and provide a forum for peer-to-peer contact and didactic review of deidentified cases with expert advice on providing care to challenging residents. OBJECTIVES: Intersection of serious, persistent mental illness and SUD in nursing home residents; Intersection of neurocognitive disorders and SUD in nursing home residents; person centered language and care planning for nursing homes and SUD; medications to manage SUD in long-term care (LTC); ethical decision making and competency for decision making in LTC; and facilitating activities and occupations.

c) The program has targeted 15 skilled nursing facilities in Oregon. It will provide remote access to specialized training and geriatric mental health expertise, allowing staff to share information and connect with available community resources without needing to leave their facility. The program aims to develop more knowledgeable, skilled, and confident nursing facility staff, better equipped to deliver person-centered care to address their residents' mental health concerns and behavioral issues.

d) Staff can connect with other facility staff for peer support or share strategies that have benefited similar residents with similar challenges. Nursing facility staff and residents continue to benefit from these sessions by learning about available skills and resources, hearing different strategies, and considering new approaches they have learned.

e) Not applicable

Funded Entity(ies):

Oregon ECHO Network, Oregon Rural Practice-based Research Network

Results of the Project:

Substance Use Disorders (SUD) ECHO program partially met its objectives of equipping nursing facility staff with the knowledge and skills to provide person-centered care to residents with substance use disorders. While participants reported meaningful knowledge gains and practice changes, 73% indicated they planned to make changes in their practice, overall engagement was limited. Only 12 of the 23 registered participants (52%) attended at least one session, and the average attendance per session was six. Despite this, session ratings were strong, averaging 4.3 out of five, and participants consistently praised the relevance of the content and the value of case-based discussions. Opportunities for future cohorts: 1. Increase participant recruitment and retention. Despite past cohort participants asking for more substance use disorder content and corporate leaders confirming the need for education on substance use disorders, recruitment and attendance was lower than anticipated. Future iterations should consider enhanced outreach strategies. 2. Enhance peer learning through broader participation. Participants noted

Oregon

OR CMP Funds Expended for Administrative Uses in CY 2025: $0.00
OR CMP Funds Expended for Emergency Uses in CY 2025: $0.00
OR Active CMP Funded Projects in CY 2025: 4

that limited attendance reduced the diversity of perspectives during case discussions. Expanding the participant pool would enrich dialogue, foster peer learning, and improve the overall experience. The purpose of the Nursing Facility Behavioral Health: *Substance Use Disorders (SUD) ECHO* program was to develop more knowledgeable, skilled, and confident nursing facility staff who are better equipped to deliver person-centered care to residents living with substance use disorders. METHODS: Participant demographics were collected during registration, including race, gender, organization, and location. To measure program effectiveness, a retrospective program survey was created and analyzed based on program objectives and the perceived practice changes and knowledge gained. For process monitoring, a post-session survey was distributed and analyzed seven days after each session to understand participant's needs; results were shared with the expert team prior to the following session. The post-session survey captured details regarding objectives, atmosphere, pace, and satisfaction. Both surveys included fixed response questions and open response items and were administered using the REDCap (Research Electronic Data Capture) survey tool. ANALYSES: Registration, demographics, post-session surveys, attendance, and the retrospective post-program surveys were merged to create a clean dataset that was analyzed using Stata. Names and email addresses of participants were used to merge all datasets. The clean and final dataset included both quantitative and qualitative variables. In addition to quantitative and qualitative outcomes, the program's impact was described through a retrospective knowledge comparison. Similarly, all responses were aggregated for the post-session surveys to be able to report measures of participants' overall satisfaction. Participation: Twenty-three unique individuals registered and were accepted to the SUD in nursing facilities. Cohort 1 - winter 2025. Of those registrants, 12 unique participants (52%) attended at least one session. On average, program participants attended three of six sessions. Post-Session Survey Results: After each session, all registered participants were sent a post-session evaluation to assess quality. Average feedback ratings across sessions compared to aggregated scores for all fall 2023 and spring 2024 *ECHO* programs. The average session was attended by about six participants (range of two to eight participants per session). It is unclear why attendance dropped for the fourth session. There were no known conferences or crises happening in long-term care at this time. Overall, sessions received strong ratings. GENERAL QUALITATIVE FEEDBACK: Participants were asked what they liked best about the *ECHO* session and what aspects could be improved. Common themes across sessions are presented below, along with an illustrative quote from a participant: What did you like best about this *ECHO* session? Case studies, knowledge/information shared, advice, recommendations, and suggestions; What aspects of this *ECHO* session could be improved? More participants for a more thorough group review, ideas, and community responses; LIKED BEST: "There are many facilities trying to work with difficult residents and not only is a bit of relief knowing that we are not the only facility, but it felt good to be able to provide some approaches that have worked for us with our resident." — *ECHO* Participant. TOPICS OF FUTURE INTEREST AND ADDITIONAL COMMENTS:

Oregon

OR CMP Funds Expended for Administrative Uses in CY 2025: $0.00

OR CMP Funds Expended for Emergency Uses in CY 2025: $0.00

OR Active CMP Funded Projects in CY 2025: 4

Participants were asked what they would like to see in a future *NFBH SUD ECHO* program. Suggestions included: psychotropics; strokes/transient ischemic attack (TIA); individually based limitation (IBL) without resident consent; and navigating the transition from houselessness to assisted living. Post Program Survey Results: One participant completed the post-program survey, yielding a response rate of 8%. Because only one (29%) completed the post-project surveys, the items were not analyzed, since these results would have a strong non-response bias.

Project Title: Bingocize Oregon: Promoting Health Across the Lifespan Among Oregon Certified Skilled Nursing Residents through Bingocize

Unique Identifier: OR-0624-SOU-1184

Project Duration: 08/11/2025 to 08/11/2028

Total Amount of CMP Funds Approved for this Project: $329,206.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $0.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) *Bingocize*® is a strategic combination of exercise and the game of bingo, offering an evidence-based health promotion program capable of fulfilling the need for social engagement and physical activity. *Bingocize* as an activity for nursing home residents that can increase daily social engagement, decreasing social isolation, improving functional health, and increasing nursing home residents' quality of life. Building upon the successes of past and current *Bingocize* projects, the primary goal for the three-year project is to implement *Bingocize*® in 22 Oregon certified nursing facilities (CNFs) to improve residents' functional mobility, social interactions, and the overall quality of their life.

b) Objective 1: Twenty-two (22) facilities will engage in *Bingocize* training and will demonstrate skill and knowledge to lead *Bingocize*®. Evaluation will be based on the number of participating facilities and the number and percentage of trained facility staff who pass post-training. Objective 2: A combination of university faculty and student interns will team up and demonstrate the skills and knowledge to lead *Bingocize*®. They will then partner with certified nursing facility (CNF) staff to implement *Bingocize*® programs. Evaluation includes the number and percent of students who complete on-line training, number and percent of students who pass (80%) post-training

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Oregon

OR CMP Funds Expended for Administrative Uses in CY 2025: $0.00
OR CMP Funds Expended for Emergency Uses in CY 2025: $0.00
OR Active CMP Funded Projects in CY 2025: 4

assessment, the number and percent of students who contribute to program implementation at participating nursing facility (NF), the number of hours provided per student (per academic program), and the number and percent of placed students who properly supported trained CNF staff in program implementation.

c) A *Bingocize*® program will establish and provide current and future NF residents with the opportunity to participate in an evidence-based program capable of producing culture change, mobility, social interactions, and improving quality of life in several ways. First, the exercise portion of the program will positively affect functional performance leading to maintenance in activities of daily living (ADLs) and reduced fall risk. The program provides an effective way for residents to engage in 45 minutes of intermittent, low-intensity exercise twice weekly (this could benefit residents' muscular strength, flexibility, balance, gait parameters, and cardiopulmonary fitness. Second, because the *Bingocize*® program is a group activity, the residents will have the opportunity to socially engage and communicate with other residents as well as staff and university faculty and students and will enjoy playing *Bingocize*®. This program can further benefit residents with dementia diagnosis by coaching them to undertake and encourage each modeling movements in response to commands, directing gestures towards others, switching back and forth between tasks more effectively compared to other activities (e.g., coloring, listening to music, eating a snack). Evidence also supports that CNF residents enjoy the program in terms of self-report as well as with high adherence (97%) and retention (over 86%) of participants. Therefore, this project is urgently needed to benefit Oregon CNF residents' functional, social, cognitive, and emotional well-being.

d) Before training sessions are scheduled at each facility, the Project Director (PD), Project Coordinator (PC) and Project Education and Training Director (PETD) will consult with the CNF administration to designate a member of the staff as the Lead Facilitator (LF), frequently an Activities Director (AD). With help from the PD, PC, PETD, Southern Oregon University (SOU) student interns and SOU student workers, with assistance from the CNF lead facilitator (LF), will market, promote, and recruit residents using supplied flyers and brochures. When possible, family members will be informed of the project as well. The lead facilitator will be asked to encourage additional CNF staff to take the on-line training. At least two additional CNF staff from each facility will be trained; however, training will be open to all members of the project team responsible for incorporating *Bingocize*® into each resident's individual plan of care. For example, it is anticipated that physical and occupational therapists may complete the training after successfully integrating *Bingocize*® into therapy sessions during this Oregon CMP project. Student interns will host at least one quarterly focus group to gather facility feedback using quantitative and qualitative questions. This will help in identifying necessary changes to the program based on focus group results, conveying that information to other members

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Oregon

OR CMP Funds Expended for Administrative Uses in CY 2025: $0.00
OR CMP Funds Expended for Emergency Uses in CY 2025: $0.00
OR Active CMP Funded Projects in CY 2025: 4

of the team, thus ensuring involvement and feedback engagement of the CNF and their participating community.

e) Not applicable

Funded Entity(ies):

Southern Oregon University (SOU)

Results of the Project:

Interim results are not yet available.

Project Title: SPARKing Conversation, Connection, and Fun! During COVID-19 and Beyond

Unique Identifier: OR-0125-SCA-1267

Project Duration: 11/01/2025 to 01/31/2026

Total Amount of CMP Funds Approved for this Project: $121,147.23

Total Amount of CMP Funds Expended During CY 2025 for this Project: $0.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The *SPARKing Conversation, Connection and Fun* project will provide participants with SPARK Box art kits. SPARK Boxes are individual arts engagement toolkits that contain high-quality arts supplies, instructions, and ideas to SPARK conversation, connection, and fun! Each box is designed around a theme and includes everything needed to complete 15 or more simple art projects in a variety of art forms. SilverKite's SPARK Boxes are packaged and distributed directly to each participant. Each art kit contains colorable box, washable markers, mechanical pencil, mixed media journal, washable watercolors and brush, instruction booklet, egg shaker, and leaf stencil. Because SPARK Boxes are individual arts toolkits, residents who receive these boxes will not be sharing the equipment and there is no risk of infection control concerns.

b) The project goal is to improve the quality of life for the nursing home residents who reside within the 24 participating Oregon nursing facilities. By providing SPARK Boxes and live and online art projects

Oregon

OR CMP Funds Expended for Administrative Uses in CY 2025: $0.00
OR CMP Funds Expended for Emergency Uses in CY 2025: $0.00
OR Active CMP Funded Projects in CY 2025: 4

and workshops for all residents, with a special focus targeting those who are socially isolated or lonely, the objective is to support quality of life projects to improve resident engagement in activities by introducing specialized arts programming to nursing home staff and residents. The program will offer a quality and structured art program that allows each community to match the community's interests and specific residents needs specialized workshops that can range from drawing and watercolor to storytelling, music, and special memories. Metrics will be measured through evaluation forms with the goal being 100% of recipients and staff believe that the boxes are easy to use, and 90% of residents engaging with the boxes can note a benefit to mood and/or energy level.

c) The project will offer cognitive art engagement activities that stimulate the brain and offer sensory stimulation. These benefits will help nursing home residents improve cognitive and sensory-motor functions. By promoting active engagement in life, it can also decrease depression and social isolation to decrease behavioral symptoms of dementia.

d) The nursing home will directly benefit from having the supplies, structure, and ability to adapt the activity art program to meet the various needs of their community, thereby offering a quality-of-life enrichment activity.

e) Not applicable

Funded Entity(ies):

Silver Kite Community Arts

Results of the Project:

Interim results are not yet available.

Project Title: Furry Friends Project

Unique Identifier: OR-0125-AIN-1268

Project Duration: 12/10/2025 to 11/30/2026

Total Amount of CMP Funds Approved for this Project: $174,635.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $148,164.17

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Oregon

OR CMP Funds Expended for Administrative Uses in CY 2025: $0.00
OR CMP Funds Expended for Emergency Uses in CY 2025: $0.00
OR Active CMP Funded Projects in CY 2025: 4

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) Joy for All companion pets are a high-impact/low-cost, evidence-based solution that provide for rapid and easy deployment. Joy for All companion pets have low-to-no technological barriers to adoption, and do not require a subscription or connectivity (e.g., Wi-Fi or Bluetooth). There is an ongoing need to improve the quality of care and quality of life for senior living residents living with dementia. Federal and state initiatives have called upon providers to equip caregiving staff with non-pharmacological interventions to address the decreased coping skills and negative reactions to environmental stimuli that challenge people undergoing cognitive decline. To successfully address these challenges and provide an optimal resident environment requires caregivers to find solutions that are person-centered and address individual needs and preferences. Residents living with dementia often find it difficult to communicate and connect with their peers, caregivers, and family, increasing a sense of isolation, boredom, and loneliness, which can result in bio-psycho-social distress and increased agitation and emotional turmoil. It is therefore of primary importance for care partners to find appropriate, compassionate, and individualized solutions that can increase a sense of comfort to encourage better interactions and foster a sense of joy and well-being. Animal-assisted therapy is known to lessen the behavioral and psychological symptoms of dementia for many individuals. However, senior living communities often find it difficult to keep a live animal on site due safety concerns if an animal is handled inappropriately or an inappropriate animal is chosen; sanitation and hygiene; possible allergies to certain animals, such as pet dander; the possibility of patient possessive behaviors, such as a reluctance to part with an animal at the end of a session; and the possibility of attachment problems and grief reactions. These risks prohibit the inclusion of live pets in senior living communities or limit them to only occasional visits, diminishing the benefits the residents can enjoy from interacting with these animals. Research and thousands of testimonials continue to demonstrate that robotic pets can mitigate many of the challenges that prohibit the inclusion of traditional pets in skilled nursing communities and have been shown to have similar positive effects. Robotic companion pet therapy offers an alternative to traditional pet therapy and delivers the positive effects of interacting with a live animal.

b) Ageless Innovation is seeking to enrich the lives of Oregon skilled nursing facility residents living with dementia with the *Furry Friends Project*. The goals of the project are to: 1) improve the quality of life of residents living with dementia, by 2) reducing the incidence of depressive symptoms. The project will achieve these goals by introducing assistive robotic companion pets, which provide a practical alternative to traditional pet therapy. Robotic companion pets have been shown to have therapeutic effects by providing non-pharmacological intervention for distressed residents while

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Oregon

OR CMP Funds Expended for Administrative Uses in CY 2025: $0.00
OR CMP Funds Expended for Emergency Uses in CY 2025: $0.00
OR Active CMP Funded Projects in CY 2025: 4

providing respectful, person-centered, and individualized care for those who have benefited from lifelong interactions with pets such as dogs and cats. This one-year project will not require extensive time commitment from staff at the forty (40) communities that have agreed to participate. As part of the project's implementation, the program will provide comprehensive and detailed training sessions to implement the best practices model and ensure the project's goals are attained, and the solution becomes an integral part of the community's organizational culture. Quarterly peer-to-peer huddles will be conducted with care partners that will reinforce the use of robotic pets not to pacify residents, but as a way for residents to reconnect with those feelings of joy and calm their pets provided throughout their lives. In addition, the project's participating communities will have unlimited access to online training videos, allowing them to train an unlimited number of staff members. Ageless Innovation also provides ongoing support for facilities. Beyond the one-year project period, participating facilities will have the option to purchase additional pets and access to the online companion pet training video. To successfully implement the project, Ageless Innovation will: 1. Schedule and conduct project review calls with each participating community once the project is approved and prior to the project's launch to schedule the project implementation training and discuss the evaluation protocol; 2. Send and conduct the Resident Mood/ Quality of Life Assessment by Staff Survey to the participating communities prior to the training to acquire baseline data; 3. Ship the pet option mix to all of the participating communities; and 4. Conduct a 90-minute virtual training with each of the project's participating communities to review and discuss specific items, including: 1) Pet Disinfection Protocol, 2) Pet Maintenance, 3) Underlying Program Principles, 4) Pet Introduction Guidelines and Best Practices, 5) Pets for Reminiscence Therapy, 6) Pet Interaction Benefits, 7) Pet Identification -"Pet Adoption Program", 8) Project's evaluation protocol and timeline, and 9) Question and answer.

c) People living with dementia experience similar benefits when interacting with robotic companion pets as they do with live animals. Robotic companion pets can also be used on demand, eliminating scheduling needs for busy staff. Psychological studies have identified the following psychosocial needs as important for all people — connection, comfort, and communication — all of which are enabled by robotic companion pets. In addition, these pets can facilitate reminiscence, the connection to memories and sharing these with others, which improve self-esteem, provides residents living with dementia with a sense of fulfillment and comfort as they look back at their lives, and can be a validation of a life well-lived. Holding and petting a Joy for All pup or cat inspires residents to share their memories of beloved pets, resulting in increased social interactions, spontaneous conversations, attention to an activity, and an interest in being more involved with their surroundings. For many residents, brushing, petting, and talking to their pup or cat can restore a

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Oregon

OR CMP Funds Expended for Administrative Uses in CY 2025: $0.00
OR CMP Funds Expended for Emergency Uses in CY 2025: $0.00
OR Active CMP Funded Projects in CY 2025: 4

sense of purpose and self-worth, which are important factors in reducing anxiety and depression. Interactions with pets can also elevate mood and provide relaxation. Pets, including robotic versions, have proven to be helpful in treating people with anxiety and provide a sense of comfort and compassion that can also reduce depression. Research has concluded that the presence of a pet has the potential to stimulate both overt social-verbal and social-nonverbal communication. Research has also shown that Joy for All Companion Pets provide psychosocial benefit in the form of improved quality of life through reduced loneliness and increased sense of purpose/resilience. Additionally, for those with dementia, the Companion Pets demonstrated the ability to improve mood/cognitive activity and reduce cognitive decline and associated behaviors. When interacting with their Joy for All pup or cat, residents reported and showed reduced feelings of uneasiness, fear, and apprehension, which often lead to agitation, seeking constant reassurance, not wanting to be left alone, calling out, restlessness, pacing, striking out, and resisting care. Effective communication or an understanding of an individual's personhood is indispensable for staff to successfully provide for the residents' optimal satisfaction, comfort, and emotional well-being. Another benefit is cheer; pets can help individuals keep their minds engaged with happy thoughts. When interacting with their pup or cat, residents become playful and their facial expressions brighten with smiles. Research has also demonstrated physical benefits when residents interact with their assistive robotic pet. Movement and often range of motion increases while reaching for, holding, and petting their pup or cat. Residents also responded to the tactile stimulation of the pet. The sensation of soft fur combined with the weight of the pet stimulates the senses and the cat's purr and the pup's heartbeat deliver deep vibration, which has a calming effect. One study found that the increased motoric activity, as well as talking and interacting with the pet, resulted in increased respiration and oxygen saturation, which is important to maintain optimal health.

d) Forty (40) skilled nursing communities support and have agreed to participate in the *Furry Friends Project*. Each of the participating communities will identify at least one Community Project Leader (CPL) to collaborate with the *Furry Friends Project* Success Manager to rollout and promote the project, assist with project evaluation requirements, as well as address challenges and highlight successes. As part of the project's implementation, the program will provide comprehensive and detailed training sessions to implement the best practices model and ensure the project's goals are attained, and the solution becomes an integral part of the community's organizational culture. In addition, the project's participating communities will have unlimited access to online training videos, allowing them to train an unlimited number of staff members.

e) Ageless Innovation will achieve "buy-in" from community staff, family members, and volunteers by providing a comprehensive training, as well as access to on-demand videos that will help them better

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Oregon

OR CMP Funds Expended for Administrative Uses in CY 2025: $0.00
OR CMP Funds Expended for Emergency Uses in CY 2025: $0.00
OR Active CMP Funded Projects in CY 2025: 4

understand how to support engaging interactions between the residents and assistive robotic pets. These Robotic Pets are intended for residents in nursing facilities.

Funded Entity(ies):

Ageless Innovation

Results of the Project:

Interim results are not yet available.

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State Civil Money Penalty Reinvestment Projects Funded in Calendar Year (CY) 2025
Seattle Long-Term Care Location

Washington

WA CMP Funds Expended for Administrative Uses in CY 2025: $89,157.74

WA CMP Funds Expended for Emergency Uses in CY 2025: $110,381.65

WA Active CMP Funded Projects in CY 2025: 27

Project Title: SilverKite MOREArts ArtKits

Unique Identifier: WA-1121-LAW-874

Project Duration: 03/01/2022 to 02/28/2025

Total Amount of CMP Funds Approved for this Project: $306,168.97

Total Amount of CMP Funds Expended During CY 2025 for this Project: $18,978.30

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) In partnership with SilverKite Community Arts, the project will be implemented in 11 LeadingAge Washington (LAW) skilled nursing facilities (SNFs). The program will equip nursing home staff with tools, skills, and experience to develop and deliver high-quality, engaging, and inspiring arts engagement programs for residents. Each quarter, SilverKite will design and create classroom-sized ArtKits filled with carefully curated art supplies and arts activity instruction cards for staff members to use in group settings.

b) The project's goals are 1) art kit usage: 85% of communities use the tools in the kits (at least twice per month) in arts programming and activities. In addition, 100% of communities will find the kits easy to use. 2) Engagement goals: 75% of communities will have an average of seven residents engaging with the materials during each art activity program offered using the ArtKits, 90% rate of engagement (active participation) during the programs and 3) Effect of engagement goals: 90% of the residents attending each art workshop will enjoy the experience, and 75% will indicate a change in their mood or energy level due to their participation.

c) The residents' quality of life will improve. They will benefit from increased engagement and participation in the activities and enjoy a positive change in their mood or energy level.

d) The nursing home benefits by having the project available to residents.

e) Although this project aims to improve the quality of life for residents, staff, family, and friends also benefit.

Funded Entity(ies):

LeadingAge Washington and Silverkite Community Arts

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Washington

WA CMP Funds Expended for Administrative Uses in CY 2025: $89,157.74
WA CMP Funds Expended for Emergency Uses in CY 2025: $110,381.65
WA Active CMP Funded Projects in CY 2025: 27

Results of the Project:

This project was successfully completed and exceeded its quantitative goals. Surveys and interviews indicated that 100% of the participating communities in the project used the ArtKits at least three times a month, with many communities using the ArtKits five or more times per month. An average of six to eight residents engaged in each of the ArtKit activities facilitated in their communities. One hundred percent (100%) of participating community survey respondents reported that participating in the ArtKit activities improved resident mood and or energy levels. Overall, the program had a positive effect on the nursing home residents. These results are final.

Project Title: Increasing Resident Engagement and Interaction with iN2L (It's Never Too Late)

Unique Identifier: WA-0222-NGH-910

Project Duration: 05/01/2022 to 04/30/2025

Total Amount of CMP Funds Approved for this Project: $387,766.16

Total Amount of CMP Funds Expended During CY 2025 for this Project: $18,656.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The project will provide the It's Never Too Late (iN2L) engagement technology in seven nursing homes. iN2L is a multidimensional approach to engaging residents in life-enriching activities and rehabilitation interventions. It offers thousands of computer-based experiences through technology, with continuous staff training and support to ensure program consistency and sustainability.

b) The *Increasing Resident Engagement and Interaction with iN2L* goals are to 1) reduce social isolation by addressing the life enrichment needs and individual interests of the residents of the participating communities and 2) increase their activity engagement. To achieve these goals, 1) Create My Page unique content pages/buttons for 30% of residents. 2) Increase the participation of residents' involvement in group activities by 15%, and 3) Increase the participation of residents' involvement in individualized activities by 15%. The Activity Engagement survey, which measures the individual's positive and negative emotional status over the previous two-week period, will be used and can be completed manually or online. Residents will be helped by staff and volunteers with the survey and assure complete anonymity and confidentiality. The program will transfer the survey

Washington

WA CMP Funds Expended for Administrative Uses in CY 2025: $89,157.74
WA CMP Funds Expended for Emergency Uses in CY 2025: $110,381.65
WA Active CMP Funded Projects in CY 2025: 27

responses to the online version, and iN2L will provide the resulting reports. Program data reporting is delivered quarterly. The iN2L system also tabulates the number of system usage hours.

c) Nursing home residents benefit from engaging activities, reduced isolation, engagement, and an improved quality of life.

d) The nursing home benefits from these projects and programs offered to the residents.

e) Not applicable

Funded Entity(ies):

NewGen Healthcare

Results of the Project:

All six participating communities (one was closed due to a fire for much of the project) were able to utilize their equipment to create meaningful engagement for their residents and increase resident quality of life. The project manager reported that this program was excellent at increasing resident involvement and engagement. All six of the nursing home communities reported that the residents who participated in the program were more engaged and connected through their use of It's Never Too Late (iN2L). Resident use of the equipment was up in 50% of the facilities and each of the facilities tracked over 100 hours of usage based on the final report. iN2L was used in group activity programs, independent engagement, and one- to-one opportunities in each of the facilities. The sign-in process remained a challenge for residents throughout the project. It was easy to use the equipment without signing in and having to remember the password. There was somewhat of a decrease in interest in the last quarter of the project, but overall, the three-year project period demonstrated increased engagement for those who participated. These results are final.

Project Title: "Moments of Truth" to engage, Nurture, Stimulate, Inspire, Grow, and Network (ENSIGN) - Extension Project

Unique Identifier: WA-0322-PHW-937

Project Duration: 07/01/2022 to 06/30/2025

Total Amount of CMP Funds Approved for this Project: $304,665.56

Total Amount of CMP Funds Expended During CY 2025 for this Project: $34,739.63

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

State Civil Money Penalty Reinvestment Projects Funded in Calendar Year (CY) 2025
Seattle Long-Term Care Location

Washington

WA CMP Funds Expended for Administrative Uses in CY 2025: $89,157.74
WA CMP Funds Expended for Emergency Uses in CY 2025: $110,381.65
WA Active CMP Funded Projects in CY 2025: 27

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The extension project will provide the It's Never Too Late (iN2L) engagement technology in four additional Pennant Healthcare, Inc. skilled nursing facilities (SNFs). The iN2L engagement technology will allow residents, families, and staff to Engage, Nurture, Stimulate, Inspire, Grow, and Network (ENSIGN). iN2L technology will also provide a greater opportunity to implement innovative tools to reduce opioid and antipsychotic medication usage and decrease falls.

b) The project proposes to 1) increase positive emotions (happy/joyful/peaceful) experienced by residents by 25% facility wide. Project progress will be measured using the iN2L Quality of Life survey, which will be administered to residents at the beginning of the project period, and at the following intervals: a. 12 months after the initial survey, b. 24 months after the initial survey, c. 36 months after initial survey; 2) Create at least four to 25 digital life stories in each facility with help from family members. The biographies will be incorporated into the facility's new hire orientation and training protocol. The iN2L monthly usage reports will verify the bios. 3) Create at least four to 30 personalized resident "pages" in each facility that reflects residents' interests and preferences.

c) Nursing home residents benefit from engaging in these activities, which reduce isolation and improve quality of life.

d) Nursing homes benefit from having these types of projects and programs available for their residents.

e) Not applicable

Funded Entity(ies):

Pennant Healthcare, Washington

Results of the Project:

All four communities used the It's Never Too Late (iN2L) system to meet their identified goals of increasing quality of life of residents by engaging in life enrichment activities, redirection, and rehabilitation interventions. The total hours of usage over the three-year project showed there was a noteworthy increase in usage for one community and a slight decrease in the three communities. There were continuous efforts of support, education, and resources provided by the iN2L Customer Success Manager. Users of over 100 hours per month are considered "super users" and on average, three of the four nursing home communities were "super users". In total, the iN2L systems were utilized over 9,000 hours over the three-year span of

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Washington

WA CMP Funds Expended for Administrative Uses in CY 2025: $89,157.74
WA CMP Funds Expended for Emergency Uses in CY 2025: $110,381.65
WA Active CMP Funded Projects in CY 2025: 27

the project. Comparing baseline data to year three, the results show a 35% increase in activity engagement and a 43% increase in reported energy levels amongst residents. The nursing homes did incorporate the use of resident profiles to promote a person-centered experience, although not as much as originally planned. There were 56 profiles created across the communities. Three of the four communities elected to continue the iN2L subscription post grant funding to ensure their residents can continue to utilize and enjoy the product long-term. These results are final.

Project Title: Eversound Engagement and Interaction Project

Unique Identifier: WA-0422-LAW-940

Project Duration: 08/01/2022 to 07/31/2025

Total Amount of CMP Funds Approved for this Project: $257,187.72

Total Amount of CMP Funds Expended During CY 2025 for this Project: $30,429.83

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The project will provide the Eversound equipment to 12 skilled nursing facilities (SNFs) in the State of Washington. Hearing loss and impaired sensory processing are challenges nursing home residents face and are linked to psychosocial distress, decreased well-being, and quality of life. Additionally, the applicant will provide project training to ensure staff can fully engage, regardless of their level of hearing loss. Eversound is an “engagement amplifier” designed to help deliver sounds directly and without distraction to those with hearing deficiencies or who lack focus due to dementia.

b) The goals of the *Eversound Project* are to 1) increase accessibility of group programming and one-on-one interactions and 2) improve the quality of life of residents in the participating communities by reducing social isolation and increasing engagement for residents impacted by hearing or sensory processing impairment. The specific outcome metrics are to: 1) Increase accessibility of and engagement with group programming. 2) Increase accessibility of and engagement in 1:1 interactions and 3) Increase resident-reported or observed quality of life indicators by 20%.

c) This project will enhance the quality of life for residents by enabling them to engage and participate fully, regardless of whether they are impacted by hearing or sensory impairments.

d) The nursing home benefits by having the Eversound equipment and project available to residents.

Washington

WA CMP Funds Expended for Administrative Uses in CY 2025: $89,157.74
WA CMP Funds Expended for Emergency Uses in CY 2025: $110,381.65
WA Active CMP Funded Projects in CY 2025: 27

e) Although the project aims to improve the quality of life for residents, staff, family, and friends also benefit, and residents are better able to interact and engage with one another.

Funded Entity(ies):

LeadingAge Washington

Results of the Project:

This project was successfully completed and met its goals and objectives. The project was implemented to address hearing and communication barriers that limit resident participation in activities and social interactions within participating communities. Over the project period, resident engagement increased from 28.4% to 68.2%, a 39.8% increase. 70.5% of residents improved their engagement frequency, moving from "Sometimes" to "Often" participating in activities and staff and families reported noticeable improvement in communication, social connection, and overall quality of life for residents. Analysis of data gathered from the 12 participating facilities reveals that over the span of the project, a total of 738 residents participated, and residents used the Eversound headphones between one to five times per week. The project proved to be an effective tool in increasing accessibility, participation, and connection within the participating communities. The significant increase in engagement, coupled with positive feedback from staff, families, and residents, demonstrates the lasting impact of reducing hearing barriers. These results are final.

Project Title: SAIDO Learning

Unique Identifier: WA-0822-LAW-1007

Project Duration: 11/01/2022 to 10/31/2025

Total Amount of CMP Funds Approved for this Project: $367,381.74

Total Amount of CMP Funds Expended During CY 2025 for this Project: $41,566.80

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) LeadingAge Washington will implement the *SAIDO Learning* project in eight skilled nursing facilities (SNFs). *SAIDO Learning* was developed by the Kumon Learning Therapy Center, part of the Kumon Institute of Education in Japan, as a program designed for individuals with memory impairment. Individuals with Alzheimer's and other dementias participate in structured sessions with trained staff,

Washington

WA CMP Funds Expended for Administrative Uses in CY 2025: $89,157.74
WA CMP Funds Expended for Emergency Uses in CY 2025: $110,381.65
WA Active CMP Funded Projects in CY 2025: 27

focusing on mental exercises such as simple arithmetic, writing, and reading aloud, to enhance engagement among residents. The process fosters confidence and often improves abilities and quality of life.

b) Project Goals: *SAIDO Learning* will have presented and trained 200 staff members in eight nursing homes on how to become *SAIDO* supporters and successfully host *SAIDO Learning* sessions. Of the 200, 90% will complete the training and pass the skills exam. *SAIDO Learning* will have assisted the eight partnering communities in completing diagnostic testing for 160 or more residents. By September 30, 2025, *SAIDO Learning* will demonstrate favorable outcomes in 70% of residents who actively participate in the program. Outcomes are described through both quantitative and qualitative results. Quantitative outcomes are defined as a decline of 1.5 points or less per year, depending on the level of dementia (mild, moderate, severe) at the program's start.

c) The activities and exercises will provide enjoyable challenges for the residents and aim to improve their quality of life.

d) The SNFs benefit by having this type of project and program available for their residents.

e) Not applicable

Funded Entity(ies):

LeadingAge Washington

Results of the Project:

This project was extremely challenged by lack of nursing home participation and support. The communities that participated saw positive outcomes in residents. The number of trained employees has been significantly impacted by COVID-19 closures, staffing in general, losing staff in key positions and the closing of a nursing home. Training was originally completed in seven of the eight skilled nursing communities. Early on, several nursing home communities dropped out and were replaced by others. Of the supporters trained, 98% successfully passed the skills exam on the first try. All passed after further review. All active communities were trained and became proficient in conducting the diagnostic testing with oversite by the *SAIDO* team. Although the number of nursing home participants varied throughout the project, three consistently and actively participated. All communities that participated saw positive outcomes in residents and staff. All trained staff members can perform diagnostic testing and Learners identified by the communities were evaluated. There was a wide range of outcomes for Learners based on the level of dementia at enrollment in the program. Outcomes are described through both quantitative and

Washington

WA CMP Funds Expended for Administrative Uses in CY 2025: $89,157.74
WA CMP Funds Expended for Emergency Uses in CY 2025: $110,381.65
WA Active CMP Funded Projects in CY 2025: 27

qualitative results. Quantitative outcomes are defined as a decline of 1.5 points or less per year depending on the level of dementia (mild, moderate, severe) at the start of the program. Mini-Mental State Examination (MMSE) outcomes show a +1.24 increase and many Learners continued with the SAIDO program even as they declined based on the diagnostics because the benefits outweighed pulling them from the program. It was noted that because of the engagement, positive reinforcement, confidence building and inclusion, the learners should continue the program. One hundred eighty-six (186) staff members were trained overall in the communities by the end of the project. These results are final.

Project Title: Briarwood at Timber Ridge/SNFClinic

Unique Identifier: WA-122-BTR-1039

Project Duration: 04/01/2023 to 03/31/2026

Total Amount of CMP Funds Approved for this Project: $36,200.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $12,350.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The *SNFClinic* project aims to address high staff turnover and the need for a centralized system for training, staff management, and resident care resources. The project will provide a centralized computer-based system for, among other things, training new hires and ensure that staff have access to quality in-service and nursing training, as well as care plans, assessments, policies, procedures, and other tools.

b) The project aims to improve health inspection scoring, reducing the health deficiency score by 10% from the baseline of 52 by the project's conclusion, and note an improvement in CMS Quality Measures.

c) *SNFClinic* will benefit nursing home residents by enhancing staff training and providing services that enhance the overall quality of care.

d) The nursing home benefits by having the SNFClinic tools and software available to staff.

e) The nursing home staff benefit from having the software and tools available to enhance their professional development.

Washington

WA CMP Funds Expended for Administrative Uses in CY 2025: $89,157.74

WA CMP Funds Expended for Emergency Uses in CY 2025: $110,381.65

WA Active CMP Funded Projects in CY 2025: 27

Funded Entity(ies):

Briarwood at Timber Ridge and Long-Term Care Consultants is a collaborating partner.

Results of the Project:

The nursing home was onboarded onto the SNFClinic electronic learning system in May 2023. All key staff were trained on the project. As of the last quarterly progress report for the period ending December 31, 2025, submitted on January 23, 2026, the nursing home staff are utilizing the software for training, policy, and procedure review and other resources. The overall completion rate is 82.7%, for training, policy and procedure review and other resources. This is a significant increase over last quarter's average completion rate of 77.2%. Improvements in overall quality of person-centered care are measured by tracking baseline and current quality measures data tracked by CMS. As previously reported, a communications and data freeze imposed by CMS in August 2025 has hindered Long-Term Care Consultant's (LTCC) ability to report on Minimum Data Set (MDS) Quality Measure (QM) results. These freezes were further exacerbated by the federal government shutdown that began on October 1, 2025, and ended on November 12, 2025. As of the date of the quarterly progress report, the most recent MDS QM data published by CMS is current as of June 30, 2025. Compared to its baseline scores, the nursing home has improved in two of the seven QM categories. The nursing home is making steady progress in improving its survey results and overall health inspection score. The baseline survey of March 25, 2022, included seven deficiency tags and a health inspection score of 52. The most recent survey of October 25, 2024, included five deficiency tags and a health inspection score of 32. Further results are pending.

Project Title: Access to Arts - Continuation

Unique Identifier: WA-1223-SCA-1102

Project Duration: 03/01/2024 to 02/28/2026

Total Amount of CMP Funds Approved for this Project: $108,153.10

Total Amount of CMP Funds Expended During CY 2025 for this Project: $47,523.67

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The project is a continuation of the WA-1222-SCA-1038, *Access to Arts Project*, which was implemented in 11 skilled nursing facilities (SNFs) over one year from March 1, 2023, to February 29, 2024. Seniors Creating Art (SCA) workshops will be offered in person to residents three times a

Washington

WA CMP Funds Expended for Administrative Uses in CY 2025: $89,157.74
WA CMP Funds Expended for Emergency Uses in CY 2025: $110,381.65
WA Active CMP Funded Projects in CY 2025: 27

month to enhance their physical and mental well-being. The project aims to increase access to arts programming for seniors residing in skilled nursing home communities, enabling those participating to experience improved overall health and well-being.

b) The expected outcomes are that 80% of residents present will engage either actively or passively in art programming, and at least 75% of those engaging in programming will be reported to have maintained positive or improved mental or physical well-being after participating in workshops.

c) Residents' quality of life improves as they enjoy and engage in arts programming, maintaining their mental and physical well-being.

d) The nursing home benefits by offering its residents these types of projects and programs.

e) Not applicable

Funded Entity(ies):

Seniors Creating Art

Results of the Project:

Interim results show that goals are being exceeded and objectives are being met. Based on the most recent quarterly progress report, 97.36 percent of residents present engaged either actively or passively and 100% of those engaged in programming reported a maintained or improved mental or physical well-being after participating in the workshops. All 11 locations are offering Seniors Creating Art workshops three times per month as planned. All art supplies for each quarter thus far have been delivered and are being used by the residents. Feedback to date has all been positive and further and final results are pending.

Project Title: Access to Arts - Extension

Unique Identifier: WA-1223-SCA-1103

Project Duration: 03/01/2024 to 02/28/2027

Total Amount of CMP Funds Approved for this Project: $88,338.20

Total Amount of CMP Funds Expended During CY 2025 for this Project: $26,469.13

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Washington

WA CMP Funds Expended for Administrative Uses in CY 2025: $89,157.74

WA CMP Funds Expended for Emergency Uses in CY 2025: $110,381.65

WA Active CMP Funded Projects in CY 2025: 27

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) Seniors Creating Art will provide in-person art workshops three times a month to residents in six skilled nursing facilities (SNFs) to enhance their physical and mental well-being.

b) The expected outcomes are that 80% of residents present will engage either actively or passively in art programming, and at least 75% of those engaging in programming will be reported to have maintained positive or improved mental or physical well-being after participating in workshops.

c) The project aims to enhance the quality of life for residents by enabling them to enjoy and engage in arts programming, thereby maintaining, or improving their mental and physical well-being.

d) The nursing home benefits by offering its residents these types of projects and programs.

e) Not applicable

Funded Entity(ies):

Seniors Creating Art

Results of the Project:

Interim results show based on the most recent quarterly progress report, goals are being exceeded and objectives are being met with 95.79% of residents present engaged either actively or passively and 100% of those engaged in programming reported a maintained or improved mental or physical well-being after participating in the workshops. All six nursing homes are offering Seniors Creating Art workshops three times per month as planned. All art supplies for each quarter thus far have been delivered and are being used by the residents. Feedback to date has all been positive. Further results are pending.

Project Title: SilverKite MOREArts ArtKits

Unique Identifier: WA-0124-WHCA-1105

Project Duration: 03/01/2024 to 02/28/2027

Total Amount of CMP Funds Approved for this Project: $106,455.24

Total Amount of CMP Funds Expended During CY 2025 for this Project: $34,752.67

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

State Civil Money Penalty Reinvestment Projects Funded in Calendar Year (CY) 2025
Seattle Long-Term Care Location

Washington

WA CMP Funds Expended for Administrative Uses in CY 2025: $89,157.74
WA CMP Funds Expended for Emergency Uses in CY 2025: $110,381.65
WA Active CMP Funded Projects in CY 2025: 27

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The *SilverKite MOREArts ArtKits* project will be implemented in eight skilled nursing facilities (SNFs). The program will equip nursing home staff with tools, skills, and experience to develop and deliver high-quality, engaging, and inspiring arts engagement programs for residents. Each quarter, SilverKite will design and create classroom-sized ArtKits filled with carefully curated art supplies and arts activity instruction cards for staff members to use in group settings.

b) The project's goals are 1) art kit usage: 85% of communities use the tools in the kits (at least twice per month) in arts programming and activities. In addition, 100% of communities find the kits easy to use. 2) Engagement goals: 75% of communities have an average of seven residents engaging with the materials during each art activity program offered using the ArtKits, 90% rate of engagement (active participation) during the programs, and 3) Effect of engagement goals: 90% of the residents attending each art workshop enjoyed the experience, and 75% indicated a change in their mood or energy level due to their participation.

c) The residents' quality of life will improve. They will benefit from increased engagement and participation in the activities and enjoy a positive change in their mood or energy level.

d) The nursing home benefits by having the project available to residents.

e) Although this project aims to improve the quality of life for residents, staff, family, and friends also benefit.

Funded Entity(ies):

Washington Health Care Association

Results of the Project:

After the seventh quarter of this project, it is meeting its quantitative goals. Surveys and interviews indicate 100% of the participating communities are using ArtKits at least five times per month. On average 15 residents are engaged in each of the ArtKit activities facilitated in their communities. One hundred percent (100%) of participating community survey respondents reported that participating in the ArtKit activities are enjoying them and that engagement improved resident mood and/or energy levels. Further results are pending.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

State Civil Money Penalty Reinvestment Projects Funded in Calendar Year (CY) 2025
Seattle Long-Term Care Location

Washington

WA CMP Funds Expended for Administrative Uses in CY 2025: $89,157.74
WA CMP Funds Expended for Emergency Uses in CY 2025: $110,381.65
WA Active CMP Funded Projects in CY 2025: 27

Project Title: Finding Joy in the Journey

Unique Identifier: WA-0124-WHCA-1106

Project Duration: 03/01/2024 to 02/28/2025

Total Amount of CMP Funds Approved for this Project: $8,320.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $4,000.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The *Finding Joy in Their Journey* project will be implemented in five Washington Health Care Association member skilled nursing facilities. Premier Senior Services' training program will help nursing homes develop an approach to providing optimal care to all residents with dementia.

b) The goals are to equip staff with the critical skills and knowledge necessary to support residents and their families, with an emphasis on individualized, person-centered care delivery. Nursing home staff will be able to address the unique needs of each resident and provide the necessary care and support. Achievement of these objectives will be evaluated through structured pre-testing and post-testing to assess staff knowledge and awareness, supplemented by quarterly reviews and ongoing performance monitoring to measure knowledge acquisition, care application, and improvements in resident engagement.

c) Staff will be able to provide residents with dementia with the necessary care and understand their unique needs. This is anticipated to improve the quality of care and life for the residents.

d) Nursing homes benefit from having this project and program available to their staff and residents.

e) Participating nursing home staff benefit from the learning they will receive from the training and enhanced professional development.

Funded Entity(ies):

Washington Health Care Association

Results of the Project:

This training-focused project was designed to improve the quality of life for residents living with dementia while embedding person-centered dementia practices into the daily culture of participating communities.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Washington

WA CMP Funds Expended for Administrative Uses in CY 2025: $89,157.74
WA CMP Funds Expended for Emergency Uses in CY 2025: $110,381.65
WA Active CMP Funded Projects in CY 2025: 27

The program emphasized practical, sustainable strategies that staff could immediately integrate into care routines to enhance engagement, dignity, and meaningful connection. Throughout the project period, communities were offered 30-minute in-service training sessions to reinforce key concepts and promote interdisciplinary participation. Designated project leads were trained to champion the initiative internally and are now equipped to provide ongoing education to additional staff, supporting long-term sustainability. Continued access to consultation via phone or Zoom remains available to reinforce implementation efforts. Early signs of cultural integration were evident, with one community requesting additional materials and reporting expansion of the training across multiple disciplines, demonstrating strong organizational commitment to sustaining dementia-informed practices beyond the grant period. Final outcomes indicate successful integration of dementia-informed practices into organizational culture, supported by continued training expansion, leadership engagement, and sustained access to consultation resources beyond the project period. These results are final.

Project Title: Access to Arts - Avamere Skilled Advisors LLC

Unique Identifier: WA-0224-SCA-1117

Project Duration: 05/01/2024 to 04/30/2026

Total Amount of CMP Funds Approved for this Project: $95,321.30

Total Amount of CMP Funds Expended During CY 2025 for this Project: $45,449.02

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) Seniors Creating Art will offer in-person art workshops twice a month to residents, aiming to improve their physical and mental health. The Access to Arts project aims to expand art activities in 13 skilled nursing facilities (SNFs) so that participants may experience improved overall health and well-being.

b) The expected outcomes are that 80% of residents present will engage either actively or passively in art programming, and at least 75% of those engaging in programming will be reported to have maintained positive or improved mental or physical well-being after participating in workshops.

c) Residents will experience an improved quality of life as they engage in arts programming and maintain or enhance their mental and physical well-being.

d) The nursing home benefits by offering its residents these types of projects and programs.

Washington

WA CMP Funds Expended for Administrative Uses in CY 2025: $89,157.74
WA CMP Funds Expended for Emergency Uses in CY 2025: $110,381.65
WA Active CMP Funded Projects in CY 2025: 27

e) Not applicable

Funded Entity(ies):

Seniors Creating Art

Results of the Project:

Interim results show that goals are being exceeded and objectives are being met with 95.2% of residents present engaged either actively or passively and 100% of those engaged in programming reported a maintained or improved mental or physical well-being after participating in the workshops. All 13 nursing homes are offering Seniors Creating Art workshops two times per month as planned. All art supplies for each quarter thus far have been delivered and are being used by the residents. Feedback to date has all been positive. Further results are pending.

Project Title: Access to Arts

Unique Identifier: WA-0424-WHCA-1132

Project Duration: 07/01/2024 to 06/30/2027

Total Amount of CMP Funds Approved for this Project: $443,025.50

Total Amount of CMP Funds Expended During CY 2025 for this Project: $136,364.21

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) Seniors Creating Art will offer in-person art workshops three times a month to residents, aiming to enhance their physical and mental well-being. The *Access to Arts* project aims to expand access to art in 30 skilled nursing facilities (SNFs), enabling participants to experience improved overall health and well-being.

b) The expected outcomes are: 80% of residents who participate in art programming will either actively or passively engage, and at least 75% of those participating in programming will be reported to have maintained positive or improved mental or physical well-being after participating in workshops.

c) Enhanced quality of life for residents as they enjoy and engage in arts programming and maintain or improve their mental and physical well-being.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Washington

WA CMP Funds Expended for Administrative Uses in CY 2025: $89,157.74
WA CMP Funds Expended for Emergency Uses in CY 2025: $110,381.65
WA Active CMP Funded Projects in CY 2025: 27

d) The nursing home benefits by offering its residents these types of projects and programs.

e) Not applicable

Funded Entity(ies):

Washington Health Care Association

Results of the Project:

Goals are being met and exceeded for this project with 97.35% of residents present engaged either actively or passively and 100% of those engaged in programming reported a maintained or improved mental or physical well-being after participating in the workshops. All 30 locations have Seniors Creating Art workshops three times per month as planned. All art supplies for each quarter thus far have been delivered and are being used by the residents. Feedback to date has all been positive. Further results are pending.

Project Title: SNFClinic

Unique Identifier: WA-0324-LTCC-1138

Project Duration: 08/01/2024 to 07/31/2027

Total Amount of CMP Funds Approved for this Project: $253,980.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $86,320.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The *SNFClinic* project aims to address high staff turnover and the need for a centralized system for training, staff management, and resident care resources. It will provide a centralized computer-based system for, among other things, training new hires and ensure that staff have access to quality in-service and nursing training, as well as care plans, assessments, policies, procedures, and other tools.

b) The specific goals and objectives are to 1) On average, a 30% improvement across all 17 participating nursing homes in the quality measures (QMs) used by CMS to calculate the QM star rating published on the CMS Care Compare website and 2) 50% of the participating nursing homes' QM star ratings will improve.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Washington

WA CMP Funds Expended for Administrative Uses in CY 2025: $89,157.74
WA CMP Funds Expended for Emergency Uses in CY 2025: $110,381.65
WA Active CMP Funded Projects in CY 2025: 27

c) SNFClinic will benefit nursing home residents by enhancing staff training and providing services that improve the overall quality of care.

d) The nursing home benefits by having the SNFClinic tools and software available to staff.

e) The nursing home staff benefit from having the software and tools available to enhance their professional development.

Funded Entity(ies):

Long-Term Care Consultants, LLC

Results of the Project:

Sixteen (16) of the original 17 facilities included in the application have been onboarded on SNFClinic and are actively using the software. All key staff were trained and a total of 2,307 users across the facilities have provided individual login credentials and have access to SNFClinic. One of the original facilities on the application chose not to participate and was not replaced. Otherwise, the project has not experienced any difficulties. As of the last quarterly progress report for the period ending January 31, 2026, all of the facilities improved in at least two of the measured Minimum Data Set (MDS) QM categories. On average, the facilities improved in 52% of the measured MDS QM categories. This exceeds the project goal of an average 30% improvement. Long-term trends will become more apparent as the project continues. This data is based on updated data published by CMS on February 5, 2026, and is current through September 30, 2025. Further results are pending.

Project Title: Animal Therapy

Unique Identifier: WA-0424-CHCC-1145

Project Duration: 07/01/2024 to 06/30/2027

Total Amount of CMP Funds Approved for this Project: $14,850.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $3,491.83

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

Washington

WA CMP Funds Expended for Administrative Uses in CY 2025: $89,157.74
WA CMP Funds Expended for Emergency Uses in CY 2025: $110,381.65
WA Active CMP Funded Projects in CY 2025: 27

a) The *Animals as Natural Therapy (ANT)* project is designed to cater to residents' leisure and recreation needs while emphasizing their psycho-social well-being. Christian Health Care Center (CHCC) will partner with Animals as Natural Therapy (ANT) to provide animal therapy to residents. ANT will provide ten large animal visits, and 14 small animal visits each year.

b) The goals are to increase resident participation in *Animal Therapy* activities, decrease reported feelings of isolation or loneliness, and maintain a satisfaction rate of 95% or higher regarding the overall therapeutic recreation program's activities and impact on quality of life.

c) Residents who participate in the *Animal Therapy* project will report a higher quality of life and receive enjoyment from interacting with the animals.

d) The nursing home benefits by having this project available to its residents.

e) Not applicable

Funded Entity(ies):

Christian Health Care Center

Results of the Project:

This program continues to be a success after more than a year of implementation. During the most recent reporting period of October 1, 2025, to December 31, 2025, six animal visits were received at the nursing home and 156 residents participated in the animal therapy sessions. The goals of increased resident participation, improving physical and mental health scores and decreased feelings of isolation among new residents are being tracked and reported. Overall resident participation for this reporting period was 28.15%, which is the lowest percentage of resident participation since the project started. The nursing home believes that participation will increase in the next quarter. Comparing the residents' Patient Health Questionnaire-9 (PHQ-9) scores, some decreased, some increased, and some had no change. Christian Health Care Center (CHCC) reports that residents genuinely enjoy the animal therapy visits and open up about their past with animals or just talk significantly more than they usually do. They note the relationships the residents form with the animals that make frequent appearances, remembering their names and talking to the animal like an old friend. Further results are pending.

State Civil Money Penalty Reinvestment Projects Funded in Calendar Year (CY) 2025
Seattle Long-Term Care Location

Washington

WA CMP Funds Expended for Administrative Uses in CY 2025: $89,157.74

WA CMP Funds Expended for Emergency Uses in CY 2025: $110,381.65

WA Active CMP Funded Projects in CY 2025: 27

Project Title: Joy and Vitality Through Movement

Unique Identifier: WA-0524-WHCA-1150

Project Duration: 07/01/2024 to 06/30/2026

Total Amount of CMP Funds Approved for this Project: $238,430.40

Total Amount of CMP Funds Expended During CY 2025 for this Project: $132,537.90

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The project, in partnership with SilverKite Community Arts, will be implemented in 24 skilled nursing facilities (SNFs) that are a member of the Washington Health Care Association (WHCA). This program unlocks the transformative power of creative movement. Teaching artists from SilverKite Community Arts will travel to each nursing home community to offer hour-long creative movement workshops approximately twice a month for skilled nursing residents. Workshops will focus on creative expression, mobility, stretching, balance, storytelling, connection, and fun. Residents will showcase their learning twice per calendar year with a performance for family and friends.

b) The intended outcomes of (1) at least five residents attend each workshop on average, with residents actively engaged (on average) in the workshop at least 75% of the time. (2) The goal is for residents to engage in social activities as part of each workshop to encourage interaction with others, with the goal being to have a 60% rate of social engagement during each workshop (on average). (3) The workshops are designed to improve resident mood and increase energy levels. The goal is to achieve an 85% reported rate of improvement in mood and energy levels because of participating in these workshops. (4) The project aims to help residents improve their flexibility and strength. The goal is a reported rate of 60% improvement in flexibility and/or strength among residents.

c) These workshops will enhance residents' physical and mental well-being, thereby improving their overall quality of life.

d) The SNF benefits by having this project for their residents.

e) Not applicable

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Washington

WA CMP Funds Expended for Administrative Uses in CY 2025: $89,157.74
WA CMP Funds Expended for Emergency Uses in CY 2025: $110,381.65
WA Active CMP Funded Projects in CY 2025: 27

Funded Entity(ies):

Washington Health Care Association

Results of the Project:

As of the end of the sixth quarter of this project, it is meeting its quantitative and qualitative goals. The workshops are being facilitated to address residents' overall well-being, creativity, connection, and mobility, stretching and reaching on average six to eight residents in each workshop. Respondents reported 33.3% of the residents are engaging with the workshops 100% of the time, 44.4% of the residents are engaging with the workshops between 100% and 75% of the time, and 11.1% indicated that residents are engaging between 74% and 25% of the time. Evaluations also indicate 100% of respondents report that the workshop experiences have had a positive effect on the residents, increasing their level of joy, laughter, energy, and mood, improving their quality of life. Further results are pending.

Project Title: SilverKite MOREArts ArtKits

Unique Identifier: WA-0524-SCA-1151

Project Duration: 08/01/2024 to 07/31/2027

Total Amount of CMP Funds Approved for this Project: $119,337.93

Total Amount of CMP Funds Expended During CY 2025 for this Project: $41,096.31

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The project will be implemented in eight skilled nursing facilities (SNFs). The program will equip nursing home staff with tools, skills, and experience to develop and deliver high-quality, engaging, and inspiring arts engagement programs for residents. Each quarter, SilverKite will design and create classroom-sized ArtKits filled with carefully curated art supplies and arts activity instruction cards for staff members to use in group settings.

b) The project's goals are 1) art kit usage: 85% of communities use the tools in the kits (at least twice per month) in arts programming and activities. In addition, 100% of communities find the kits easy to use. 2) Engagement goals: 75% of communities have an average of seven residents engaging with the materials during each art activity program offered using the ArtKits. A 90% rate of engagement (active participation) was achieved during the programs, and 3) The effect of engagement goals:

Washington

WA CMP Funds Expended for Administrative Uses in CY 2025: $89,157.74
WA CMP Funds Expended for Emergency Uses in CY 2025: $110,381.65
WA Active CMP Funded Projects in CY 2025: 27

90% of the residents attending each art workshop enjoyed the experience, and 75% indicated a change in their mood or energy level due to their participation.

c) The residents' quality of life will improve. They will benefit from increased engagement and participation in the activities and enjoy a positive change in their mood or energy level.

d) The nursing home benefits by having the project available to residents.

e) Although this project aims to improve the quality of life for residents, staff, family, and friends, it benefits residents who share their artwork and art projects.

Funded Entity(ies):

SilverKite Community Arts LLC

Results of the Project:

After the sixth quarter of this project, it is currently exceeding its quantitative goals. Surveys and interviews indicate 100% of the participating communities are using the ArtKits at least twice per month. On average 11 residents are engaging in each of the ArtKit activities facilitated in their communities with 33.3% of respondents reporting that 20 or more residents are participating in each session. One hundred percent (100%) of participating community survey respondents reported that participating in the ArtKit activities are enjoying them and that engagement improved resident mood (smiling and laughing) and/or energy levels. Further results are pending.

Project Title: Music Therapy

Unique Identifier: WA-0624-CHCC-1174

Project Duration: 09/01/2024 to 08/31/2027

Total Amount of CMP Funds Approved for this Project: $10,920.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $3,360.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Washington

WA CMP Funds Expended for Administrative Uses in CY 2025: $89,157.74
WA CMP Funds Expended for Emergency Uses in CY 2025: $110,381.65
WA Active CMP Funded Projects in CY 2025: 27

a) The *Music Therapy* project is designed to cater to residents' leisure and recreational needs while also emphasizing their psycho-social well-being, regardless of their stage in rehabilitation or long-term care.

b) The goals are: (1) increase resident participation in Music Therapy activities by 25% within two years; improve residents' self-reported physical and mental health scores on the Patient Health Questionnaire-9 (PHQ-9) within one year; (2) Decrease reported feelings of isolation or loneliness among new residents by 20% within the first month of admission. (3) Maintain a satisfaction rate of 95% or higher among residents regarding the overall therapeutic recreation program's activities and impact on quality of life.

c) Residents who participate in the project will experience improved physical and mental health, as well as enhanced quality of life.

d) The nursing home benefits by offering its residents these types of projects and programs.

e) Not applicable

Funded Entity(ies):

Christian Health Care Center

Results of the Project:

As of the most recent quarterly progress report for the period ending November 30, 2025, the facility had three music therapy visits. The music therapist was not available to visit during September and October 2025. There were 23 residents served during these visits and staff enjoy knowing when the therapist is coming and providing names of residents they think would benefit from a music therapy visit. Resident participation has increased as the therapist is now able to do 30 visits per month and before the project began, she was only able to do 10 visits. Out of the 23 residents served, 11 resident scores went up (higher depression score), seven resident scores went down (lower depression score), and five scores stayed the same. Out of the 23 residents served, five were newly admitted. Two resident responses were unchanged, one resident reported less lonely than previously, one resident reported feeling lonelier than previously, and one resident hasn't been at the facility long enough to get a second score. Twenty percent (20%) of the newly admitted residents reported feeling less lonely than previously. Further results are pending.

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

State Civil Money Penalty Reinvestment Projects Funded in Calendar Year (CY) 2025
Seattle Long-Term Care Location

Washington

WA CMP Funds Expended for Administrative Uses in CY 2025: $89,157.74

WA CMP Funds Expended for Emergency Uses in CY 2025: $110,381.65

WA Active CMP Funded Projects in CY 2025: 27

Project Title: Window to the Arts - Continuation

Unique Identifier: WA-0924-ECA-1203

Project Duration: 11/01/2024 to 10/31/2025

Total Amount of CMP Funds Approved for this Project: $15,000.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $14,000.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) The project will be implemented in three skilled nursing facilities (SNFs) to improve the quality of life for nursing home residents and combat isolation through live performances and customized, responsive arts experiences. A creative therapist will participate in each event and provide interactive arts workshops following the performances. Creative therapy interactions will provide nursing home residents with meaningful experiences that offer sensory stimulation, personal engagement, validation, and comfort. The program will promote self-expression through singing, music-making, improvisation, and songwriting. Variables measured include changes in feelings of loneliness, anxiety, or isolation for nursing home residents; interpersonal relationships and social connectedness between residents; and levels of communication between residents and between residents and caregivers.

b) The program anticipates a decrease in loneliness, anxiety, or isolation among nursing home residents by more than 20% from pre-intervention to post-program. It also expects to strengthen interpersonal relationships and social connectedness among residents, with a 20% increase by the end of the project period. In addition, the project anticipates a 10% increase in communication between residents and between residents and caregivers.

c) Residents will experience an improved quality of life as they engage in arts programming and maintain or enhance their mental and physical well-being.

d) The nursing home benefits by offering its residents these types of projects and programs.

e) SNF staff, families, and friends also participate in these events, which benefit everyone.

Funded Entity(ies):

Edmonds Center for the Arts

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

Washington

WA CMP Funds Expended for Administrative Uses in CY 2025: $89,157.74
WA CMP Funds Expended for Emergency Uses in CY 2025: $110,381.65
WA Active CMP Funded Projects in CY 2025: 27

Results of the Project:

Final results show that this project completed four site visits (one to two of the facilities and two to the third) and provided both live musical performances and board-certified music therapy sessions, group sessions and 1:1 intervention. Goals were met. Music performance decreased loneliness, anxiety, or isolation amount nursing home residents by varying percentages among the three facilities. Music therapy strengthened interpersonal relationships and social connectedness among residents at all facilities and 100% of the group participants demonstrated active engagement for at least 50% of the session. The staff demonstrated a strong understanding of the research and clinical benefits of music performance and music therapy, sharing observations of unique positive behaviors during the sessions. Pre- and post-session data exceed expectations, showing statistically significant improvement in all areas. These results are final.

Project Title: End of Life Doula Training Extension

Unique Identifier: WA-0924-WHCA-1215

Project Duration: 01/01/2025 to 03/07/2025

Total Amount of CMP Funds Approved for this Project: $16,640.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $16,640.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) This project, in partnership with the Gentle Passage Doula Collective, will be implemented in seven Washington Health Care Association member skilled nursing facilities.

b) The goal of the project is to prepare and equip staff with tools to enhance their knowledge, skills, and abilities to ease the pain and suffering residents and their families may experience at the end of life. Staff will learn how to provide support by implementing non-medical approaches and appropriate communication skills. Participants will complete a two-hour training session each week, as well as a pre-test to determine their existing knowledge base and a post-test to determine their knowledge improvement following the project. Participants will be able to demonstrate and implement at least three learned doula skills into their environment, identifying three symptoms of pain, two non-medical pain interventions, and stating where to find the goals of care for their dying resident to ensure care is consistent with goals of care. Participants will demonstrate appropriate language skills, knowledge of the resident's condition, and show compassion in communicating with the dying resident and their

Washington

WA CMP Funds Expended for Administrative Uses in CY 2025: $89,157.74
WA CMP Funds Expended for Emergency Uses in CY 2025: $110,381.65
WA Active CMP Funded Projects in CY 2025: 27

family members through classroom simulation opportunities. Participants will be able to state two ways to continue learning and growing in the doula role.

c) Residents and families will benefit by having better trained staff.

d) The nursing home benefits by having staff with expertise in the dying process and how best to serve residents and their families.

e) The participating nursing home staff benefit from the training, and it also enhances their professional development.

Funded Entity(ies):

The Washington Health Care Association

Results of the Project:

The Gentle Passage Coula Collective (GPDC) provided the *End-of-Life Doula Training* project to the seven skilled nursing home communities. This program enhanced the knowledge, skills, and abilities of the caregiving teams, using evidence-based, state-of-the-art tools and information. By transforming the perception of death from a clinical to communal experience, the training prepared caregivers to integrate non-medical supportive techniques into their daily practices. Furthermore, the program incorporated targeted communication strategies to bolster comfort and confidence among residents and their families. The virtual training was delivered over an eight-week period, with participants engaging in two-hour weekly sessions by expert instructors. Participants demonstrated significant improvements in their ability to provide compassionate, non-medical support to dying residents, as evidenced by the pre and post training assessment scores. Caregivers reported greater confidence in their roles, which translated into more effective bedside support. Feedback from families indicated a heightened sense of ease and support during the challenging times of their loved ones' final days. These results are final.

Project Title: Sand Table Creations

Unique Identifier: WA-1024-WHCA-1220

Project Duration: 01/01/2025 to 12/31/2026

Total Amount of CMP Funds Approved for this Project: $96,326.99

Total Amount of CMP Funds Expended During CY 2025 for this Project: $58,400.39

On 9/29/2025, CMS announced revisions to the Civil Money Penalty Reinvestment Program (CMPRP) in memorandum QSO-25-26-NHs. CMS has restructured the CMPRP program and updated the criteria for allowable and non-allowable uses of CMP funds. Please review CMS memorandum QSO-25-26-NHs before submitting a future CMP application to ensure all project criteria are met.

State Civil Money Penalty Reinvestment Projects Funded in Calendar Year (CY) 2025
Seattle Long-Term Care Location

Washington

WA CMP Funds Expended for Administrative Uses in CY 2025: $89,157.74
WA CMP Funds Expended for Emergency Uses in CY 2025: $110,381.65
WA Active CMP Funded Projects in CY 2025: 27

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) This project will be implemented in 33 nursing homes. The project is a versatile and enriching tool for dementia care, providing a calming, multi-sensory experience that enhances quality of life through cognitive stimulation, emotional support, and social engagement. If offers a safe, interactive environment where residents with dementia can explore, reminisce, and connect, making it a valuable resource.

b) The goal of the project is to improve the quality of life and care of residents by fostering social interaction, movement, function, memory and to minimize loneliness. The project anticipates five to 10 users per week and performance monitors will include tracking active participation per quarter, tracking specific interests per activity, tracking change in mood or energy level and participation with a goal of a 20% increase in participation, based on specific interests, and an improvement in mood/energy levels over the months and at year end.

c) Residents will benefit from enhanced quality of life as they engage in the Sand Table Program and maintain or improve their mental and physical well-being.

d) The nursing home benefits by offering its residents these types of projects and programs.

e) Not applicable

Funded Entity(ies):

Washington Health Care Association

Results of the Project:

As of the fourth quarter of this project, it is being successfully completed. In quarter one, all 33 participating nursing homes received comprehensive start-up kits for the Sensory Sand Table project to include the sand table with wheels, kinetic sand, sensory balls, program binder, et cetera. In the most recently completed fourth quarter, participating communities continued integrating the program into their resident engagement routines, with an emphasis on "*Holiday Memories*" and "*Topography*". These themes supported sensory stimulation, reminiscence, and therapeutic interaction for residents living with dementia. Staff remained committed to expanding resident participation by implementing a variety of sensory-based approaches to individual abilities and preferences. All participating communities continued to receive ongoing program support, materials, and guidance from the project team. Some of the feedback received includes "One resident finds comfort in the sand table. It is like she can focus on the sand table and push the rest of the

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Washington

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WA CMP Funds Expended for Emergency Uses in CY 2025: $110,381.65
WA Active CMP Funded Projects in CY 2025: 27

world's noise out just to focus on the feel of the sand slipping through her fingers and moving the figurines becomes the only thing she can see. It helps with anxiety and calmer nervous mannerisms." "Our residents with memory loss enjoy using the sand table almost daily" and "One of our residents really became interactive and wanted to join with the other residents and see what each person was creating in their space. She sparks a lot of joy with her resident peers." Further results are pending.

Project Title: Access to Arts Extension

Unique Identifier: WA-1024-WHCA-1221

Project Duration: 01/01/2025 to 12/31/2027

Total Amount of CMP Funds Approved for this Project: $320,250.74

Total Amount of CMP Funds Expended During CY 2025 for this Project: $83,045.52

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) Seniors Creating Art will offer in-person art workshops three times a month to residents, aiming to enhance their physical and mental well-being. The Access to Arts project aims to expand access to art in 30 skilled nursing facilities (SNFs), enabling participants to experience improved overall health and well-being.

b) The expected outcomes are: 80% of residents who participate in art programming will either actively or passively engage, and at least 75% of those participating in programming will be reported to have maintained positive or improved mental or physical well-being after participating in workshops.

c) Enhanced quality of life for residents as they enjoy and engage in arts programming and maintain or improve their mental and physical well-being.

d) The nursing home benefits by offering its residents these types of projects and programs.

e) Not applicable

Funded Entity(ies):

Washington Health Care Association

Washington

WA CMP Funds Expended for Administrative Uses in CY 2025: $89,157.74

WA CMP Funds Expended for Emergency Uses in CY 2025: $110,381.65

WA Active CMP Funded Projects in CY 2025: 27

Results of the Project:

Goals are being met and exceeded for this project with 96.8% of residents present engaged either actively or passively and 100% of those engaged in programming reported maintained or improved mental or physical well-being after participating in the workshops. All 22 nursing homes have Seniors Creating Art workshops three times per month as planned. All art supplies for each quarter thus far have been delivered and are being used by the residents. Feedback to date has all been positive. Further results are pending.

Project Title: Rhythms and Recall

Unique Identifier: WA-0125-ENRS-1280

Project Duration: 04/01/2025 to 03/31/2028

Total Amount of CMP Funds Approved for this Project: $249,882.95

Total Amount of CMP Funds Expended During CY 2025 for this Project: $39,174.53

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) This project will be implemented in 17 nursing homes. The purpose of the project is to improve the physical and mental health among participants by utilizing musical instruments and creating conversations within a group setting. Enrichment facilitators will lead music workshops twice per month at each of the 17 nursing homes.

b) The goals of the project are 1) 80% of residents present during the workshops will actively or passively engage in programming and 2) At least 75% of those engaging in programming will be reported to have maintained positive or improved mental or physical well-being after participating in the workshops.

c) Enhanced quality of life for residents as they enjoy and engage in music programming and maintain or improve their mental and physical well-being.

d) The nursing home benefits by offering its residents these types of projects and programs.

e) Not applicable

Washington

WA CMP Funds Expended for Administrative Uses in CY 2025: $89,157.74
WA CMP Funds Expended for Emergency Uses in CY 2025: $110,381.65
WA Active CMP Funded Projects in CY 2025: 27

Funded Entity(ies):

Enrichment Services

Results of the Project:

As of the quarterly progress reported for the period ending December 31, 2025, feedback from residents and staff shows overwhelming support for this project. The participating skilled nursing facilities (SNFs) continue to welcome their music facilitators and are supportive by bringing residents to the workshops and keeping all music supplies safe. Staff share that residents who normally don't participate in art or other activities are coming out for the music workshops. Results from the evaluation forms collected show that 97.6% of residents present in the workshops engaged either actively or passively and 100% of those engaged in the programming reported a maintained or improved mental or physical well-being after participating in the workshops. To date, this program is a success at all 17 participating nursing home communities. Participation numbers were higher in the second quarter than the first quarter and feedback from the facilitators, residents, and staff have shown that these workshops are incredibly effective at providing opportunities for socialization, reminiscing, and improved mental and physical well-being for the residents. Further results are pending.

Project Title: A Day of Collaboration: Strengthening Infection Prevention and Control (IPC) in Nursing Homes

Unique Identifier: WA-0224-WAS-1297

Project Duration: 06/11/2025 to 09/17/2025

Total Amount of CMP Funds Approved for this Project: $5,000.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $3,952.80

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) This virtual conference is designed to support CMS-certified nursing home providers in Washington State by strengthening their infection prevention and control (IPC) systems. This conference will provide information and resources to reduce IPC-related citations.

b) The goal is to enhance the quality of care and quality of life for nursing home residents. The purpose is to equip nursing home providers with the knowledge and tools necessary to effectively prevent

Washington

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WA CMP Funds Expended for Emergency Uses in CY 2025: $110,381.65
WA Active CMP Funded Projects in CY 2025: 27

and control infections within their facilities. This webinar will provide a collaborative learning environment where providers can share experiences, challenges, and solutions. The goal is to reduce the incidences of citations related to infections and promote a healthier living environment. The quantifiable objectives are to reduce infection rates, participant engagement (at least 70%), training effectiveness (3.5 out of 5 from participants) and reduction in IPC-related citations.

c) Enhanced quality of life and quality of care for nursing home residents after participating in the webinar.

d) The nursing home benefits by having staff with training and expertise in IPC and to best serve the residents they care for.

e) The participating nursing home staff benefit from the training, and it enhances their professional development.

Funded Entity(ies):

Washington State Department of Social and Health Services

Results of the Project:

This one-day virtual training conference was held September 17, 2025, with 257 attendees and staff from 98 nursing homes participating and was extraordinarily successful. The conference supported nursing home providers in Washington State by providing information to strengthen infection prevention and control (IPC) systems. The conference provided information and resources to reduce IPC-related citations. Presentation topics focused on common IPC challenges identified by licensors and complaint investigators. The primary purpose was to equip nursing home providers with the knowledge and tools necessary to effectively prevent and control infections within their facilities. Engagement levels exceeded expectations, with 84.3% of attendees actively engaged. Interactive participation data showed 110 attendees posting in the Question and Answer and live chat and the median time per attendee for the event was seven hours. Attendance peaked during sessions focused on practical prevention content, demonstrating participants' interest in directly applicable clinical and operational strategies. These results are final.

State Civil Money Penalty Reinvestment Projects Funded in Calendar Year (CY) 2025
Seattle Long-Term Care Location

Washington

WA CMP Funds Expended for Administrative Uses in CY 2025: $89,157.74
WA CMP Funds Expended for Emergency Uses in CY 2025: $110,381.65
WA Active CMP Funded Projects in CY 2025: 27

Project Title: Relax and Recover

Unique Identifier: WA-0725-ENRS-1380

Project Duration: 10/01/2025 to 09/30/2028

Total Amount of CMP Funds Approved for this Project: $391,055.39

Total Amount of CMP Funds Expended During CY 2025 for this Project: $32,800.60

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) Enrichment Services will offer in-person programs twice per month at 30 nursing homes to improve their physical and emotional health by promoting relaxation, stress reduction, and encouraging overall well-being.

b) The expected outcomes are: 80% of residents who participate in programming will either actively or passively engage, and at least 75% of those participating in programming will be reported to have maintained positive or improved mental or physical well-being after participating in workshops.

c) Enhanced quality of life for residents as they enjoy and engage in programming and maintain or improve their mental and physical well-being.

d) The nursing home benefits by offering its residents these types of projects and programs.

e) Not applicable

Funded Entity(ies):

Enrichment Services

Results of the Project:

This project just began October 1, 2025. The project is off to an excellent start with feedback from residents and staff showing strong support of their workshops and appreciation for the results. After the first quarter of the project, 97.13% of residents in the workshops engaged either actively or passively and 100% engaged in programming reported a maintained or improved mental or physical wellbeing after participating in the workshops. The purchase and delivery of the supplies for the project was successful, and each community received their supplies and storing them for use at each workshop. All facilitators were onboard and participation is even higher than expected. Overall, feedback from facilitators, residents, and staff has

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Washington

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WA CMP Funds Expended for Emergency Uses in CY 2025: $110,381.65
WA Active CMP Funded Projects in CY 2025: 27

shown that the workshops are incredibly effective at providing opportunities for relaxation, stress-relief, reminiscing and improved mental and physical wellbeing for residents. Further results are pending.

Project Title: End of Life Doula Training - LeadingAge Washington Extension

Unique Identifier: WA-0725-LAW-1381

Project Duration: 10/06/2025 to 12/12/2025

Total Amount of CMP Funds Approved for this Project: $33,280.00

Total Amount of CMP Funds Expended During CY 2025 for this Project: $33,280.00

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) a) This project, in partnership with the Gentle Passage Doula Collective, will be implemented in ten skilled nursing facilities (SNFs) that are members of LeadingAge Washington.

b) The goal of the project is to prepare and equip staff with tools to enhance their knowledge, skills, and abilities to ease the pain and suffering residents and their families may experience at the end of life. Staff will learn how to provide support by implementing non-medical approaches and appropriate communication skills. Participants will complete a two-hour training session each week, as well as a pre-test to determine their existing knowledge base and a post-test to determine their knowledge improvement following the project. Participants will be able to demonstrate and implement at least three learned doula skills into their environment, identifying three symptoms of pain, two non-medical pain interventions, and stating where to find the goals of care for their dying resident to ensure care is consistent with goals of care. Participants will demonstrate appropriate language skills, knowledge of the resident's condition, and show compassion in communicating with the dying resident and their family members through classroom simulation opportunities. Participants will be able to state two ways to continue learning and growing in the doula role.

c) Residents and families will benefit by having better trained staff.

d) The nursing home benefits by having staff with expertise in the dying process and how best to serve residents and their families.

e) The participating nursing home staff benefit from the training, and it also enhances their professional development.

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Washington

WA CMP Funds Expended for Administrative Uses in CY 2025: $89,157.74
WA CMP Funds Expended for Emergency Uses in CY 2025: $110,381.65
WA Active CMP Funded Projects in CY 2025: 27

Funded Entity(ies):

LeadingAge Washington

Results of the Project:

The Gentle Passage Doula Collective delivered another successful cycle of virtual *End-of-Life Doula Training* project to ten LeadingAge Washington member skilled nursing facilities. Pre- and post-tests were completed with all participants and participants demonstrated high engagement, strong satisfaction, and powerful learning outcomes. Across the dataset, most participants rated the training "very relevant and very helpful", the majority rated satisfaction as four or five (with five being the highest). Many participants described the training as inspiring, eye-opening, affirming, and crucial to their roles. The results show increased competency in non-medical support, improved confidence and communication skills, strengthened care environments, greater awareness of grief and trauma-informed practices and strong buy-in for continued training. These results are final.

Project Title: Access to Arts - Extension

Unique Identifier: WA-0725-SCA-1382

Project Duration: 10/01/2025 to 09/30/2028

Total Amount of CMP Funds Approved for this Project: $191,489.41

Total Amount of CMP Funds Expended During CY 2025 for this Project: $8,133.58

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) Seniors Creating Art will offer in-person art workshops three times a month to residents, aiming to enhance their physical and mental well-being. The *Access to Arts* project aims to expand access to art in 13 skilled nursing facilities (SNFs), enabling participants to experience improved overall health and well-being.

b) The expected outcomes are: 80% of residents who participate in art programming will either actively or passively engage, and at least 75% of those participating in programming will be reported to have maintained positive or improved mental or physical well-being after participating in workshops.

c) Enhanced quality of life for residents as they enjoy and engage in arts programming and maintain or improve their mental and physical well-being.

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Washington

WA CMP Funds Expended for Administrative Uses in CY 2025: $89,157.74
WA CMP Funds Expended for Emergency Uses in CY 2025: $110,381.65
WA Active CMP Funded Projects in CY 2025: 27

d) The nursing home benefits by offering its residents these types of projects and programs.

e) Not applicable

Funded Entity(ies):

Seniors Creating Art

Results of the Project:

This project began October 1, 2025, and after the first quarter of this project, goals are being met. All 13 locations are offering Seniors Creating Art workshops three times per month as planned. All art supplies for each quarter thus far have been delivered to the participating nursing homes and are being used by the residents. Results from the first quarterly report indicate that 98.64% of residents present engaged either actively or passively and 100% of those engaged in programming reported maintained or improved mental or physical well-being after participating in workshops. Feedback to date has been positive. Further results are pending.

Project Title: The Music Box: Remembering the Music Project

Unique Identifier: WA-0725-WHCA-1383

Project Duration: 10/01/2025 to 09/30/2026

Total Amount of CMP Funds Approved for this Project: $106,352.02

Total Amount of CMP Funds Expended During CY 2025 for this Project: $83,912.15

Project Summary (a. Purpose, b. Goals, c. Benefit to nursing homes, d. Benefit to nursing home (NH), e. Target audience beyond nursing home residents, if applicable):

a) This project will be implemented in 30 nursing homes and is an interactive music program designed to inspire joy, movement, and memory through hands-on musical play. With a variety of accessible instruments, this program will foster connection, creativity, and emotional expression among residents.

b) The goal is to show a 20% increase in participation, based on specific interests, and an improvement in mood/energy levels of 20% and at year end.

Washington

WA CMP Funds Expended for Administrative Uses in CY 2025: $89,157.74
WA CMP Funds Expended for Emergency Uses in CY 2025: $110,381.65
WA Active CMP Funded Projects in CY 2025: 27

c) Enhanced quality of life for residents as they enjoy and engage in music programming and maintain or improve their mental and physical well-being.

d) The nursing home benefits by offering its residents these types of projects and programs.

e) Not applicable

Funded Entity(ies):

Washington Health Care Association

Results of the Project:

This project began October 1, 2025, and the first quarter of this project ended December 31, 2025. All 30 participating nursing home communities received the materials for the project. A live virtual training session for staff was conducted on October 22, 2025, and had 21 participants. Each community was sent a recording of the webinar right after the initial training. On-demand training sessions were available for staff who were unable to attend and for newly hired staff. A central theme discussed during the training sessions was "*The Power of Play*" emphasizing the importance of creative, sensory-based activities in supporting cognitive function, emotional expression, and overall quality of life for residents living with dementia. Each community received a comprehensive program-binder containing essential documentation and resources to support effective and consistent implementation. Further results are pending.

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