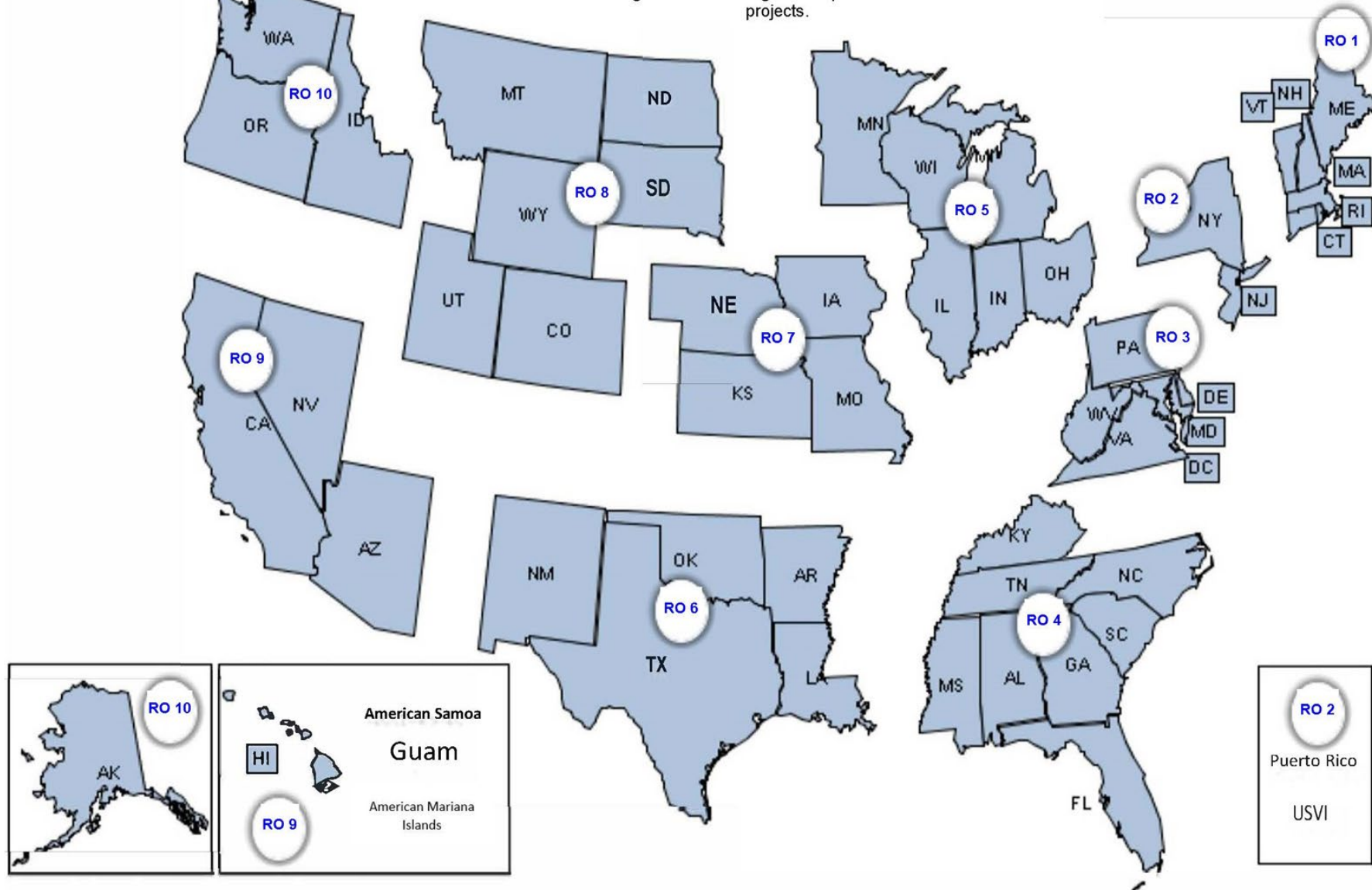


## State CMP Reinvestment Projects Funded in CY 2017

Please click on a region to see the region's respective list of 2017 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 similar project.

**State Civil Money Penalty Reinvestment Projects Funded in Calendar Year (CY) 2017  
Region 1**

State	Total amount of State CMP funds obligated for each project (all years)	Anticipated project duration	Title of each approved project funded in whole or in part with State CMP funds	Brief description of the goals and objectives of the project	List entity (ies) that received funding and will carry out the project	List entity (ies) that will benefit from the project	Expected deliverables or metrics for the project	Project category	Results of the project
Connecticut	\$3,500.00	One-day training in 2017 (1 day)	Getting to the Root Cause of Resident Falls	Identify the underlying root cause for resident falls in skilled nursing facilities; provide insights to how to have a better night of uninterrupted sleep for residents to hopefully lead to a lesser likelihood of falls; and assist facilities in selecting appropriate interventions for residents to reduce falls. Working with several partners to ensure broad messaging to facilities to reduce falls and improve resident quality of life and care. The conference was conducted on February 28, 2017.	Barbara S. Cass, R.N., Section Chief, Facility Licensing & Investigations - Connecticut Department of Public Health; Connecticut Association of Health Care Facilities; LeadingAge Connecticut; Connecticut Coalition for Culture Change;	All Connecticut skilled nursing facilities	Increase resident knowledge of reasons why falls occur so they have a clearer understanding. Increase understanding among facilities and staff regarding reasons for falls and ways to be more proactive in preventing them.	Training	The day-long conference provided insights into improving the culture of safety, thereby reducing the number of falls that residents in skilled nursing facilities may experience. In federal fiscal year 2017, accidents and hazards were the most frequently cited deficiency, with 51.8% of nursing homes cited. In federal fiscal year 2018, while non-compliance with accidents and hazards continues to be the most

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					American College of Health Care Administrators				frequently cited deficiency, improvement has been noted, with 43.9% of nursing homes cited.
<b>Maine</b>	\$6,000.00	January 2016 – December 2017 (24 months)	Conference on End of Life Care and Ethical Decision Making	Funding was requested to cover the costs associated with the rental of conference space and the costs of the expert speaker who will be presenting at the conference. All Maine nursing homes will participate. The expectation is that this presentation will enhance essential skills to provide nursing home residents with safe, quality care while balancing residents'	Dr. Michael Gillett, speaker; Maine Division of Licensure & Regulation (for conference venue rental)	All Maine nursing homes	Program presentation, participation of nursing home staff, survey results of participants.	Training	There were 66 total participants - 86.36% strongly agreed that the program met expectations; 12.12% agreed that the program met expectations. Only one participant indicated that the program did not meet his/her expectations. Written comments were very positive. Project expenditures were

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				rights and being sensitive to family concerns. The conference will focus on ethical decision-making regarding end of life care and honoring individual's wishes, while improving communication.					\$6,000.00.
<b>Maine</b>	\$51,000.00	September 2017 – December 2017 (4 months)	Maine Long-Term Care Conditions of Participation (CoP) Supportive Services Initiative	To fund needed CoP trainings and support services, through education of rural independent long-term care facilities; have facilities complete a self-risk assessment tool; and have facilities develop and implement activities in line with the new CoPs with the assistance of the Maine	Maine Health Care Association	All Maine nursing homes	Program presentation, participation of nursing home staff, survey results of participants.	Training	Projects had four trainings, with 86 of 95 nursing homes participating with 179 participants. Further materials were disseminated to facilities to follow-up care. Approximately \$16,000 expended in 2018.

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				Health Care Association.					
<b>Massachusetts</b>	\$1,550,000.00	January 2016 – July 2018 (31 months)	Supportive Planning and Operations Team (SPOT) Project	SPOT makes available technical assistance and training to support nursing home teams to develop and implement Quality Assurance and Performance Improvement (QAPI) plans, conduct root cause analysis resulting in meaningful corrective actions, improve communication, and engage residents and families in QAPI. During the 2017 project year, the SPOT Team will provide technical assistance/training to all 60 participating nursing homes through virtual learning sessions, on-site visits, telephone	60 under-performing nursing homes; Supportive Planning and Operations Team (SPOT)	60 under-performing nursing homes	Department of Public Health (DPH) will work with 60 under-performing nursing homes to develop and implement effective QAPI plans; conduct effective root cause analysis resulting in meaningful corrective actions; improve communication and engage residents and families in QAPI through the use of: virtual learning sessions, on-site technical assistance visits, telephone outreach, and email support.	Direct Improvements to Quality of Care	In addition to continuing to engage the 40 nursing homes that participated in the first year of SPOT, DPH identified 20 additional nursing homes to engage in the initiative. Between April 18 and May 16, 2017, the SPOT Team conducted unannounced, on-site visits to the 20 additional nursing homes during which members of the team assessed the status of the nursing home's QAPI

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				outreach, and email support. The focus of the technical assistance/ training is to strengthen QAPI in the nursing homes.					program in collaboration with nursing home teams. DHS will assess the status of QAPI in the 40 previously-participating nursing homes, the SPOT Team collected QAPI self-assessments completed by the nursing home teams. The SPOT Team began providing on-site technical assistance visits in July 2017 and visited 59 of the 60 nursing homes by the end of the calendar year. As compared to the

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									beginning of this project year, participating nursing homes reported an increase in having a QAPI plan, an increase in all levels of staff receiving training in QAPI, and an increase in communication of QAPI, specifically tools like performance improvement plans being communicated to staff, residents, and their families.
<b>Massachusetts</b>	\$500,000.00	March 2017 – December 2017 (10 months)	Strengthening Resident and Family Councils	The primary objective of this project is to work with skilled nursing home staff, residents, and family members to	Massachusetts (MA) Coalition for the Prevention	51 MA nursing homes	The project led participating nursing homes through several small tests of change activities	Direct Improvements to Quality of Care	Of the participating nursing homes, there were small changes to the meeting structure,

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			and Engage-ment Initiative	develop, enhance, and sustain resident and family councils in their facilities. The project recognizes the essential role that resident and family councils play in fostering meaningful engagement between nursing home residents, their families, and facility leadership in efforts to improve person-centered care and the quality of resident life.	of Medical Errors		aimed at improving resident engagement. In addition to monthly check-in calls, the project held two learning sessions and four webinars. Project activities were documented and were developed into an activity guide, which can be used as a template to begin, strengthen, and sustain resident and family engagement in nursing homes. The activity guide will be available on the Massachusetts Program Management Bureau of Health Care Safety		which led to substantive improvements in the meeting quality: 61% changed how agendas are used, 50% changed how seating is arranged, 44% changed how minutes are shared, and 40% incorporated accommodations and adaptations. As a result of these structural changes and guided activities, 91% of participating nursing homes reported an increase in informal or scheduled 1:1 resident



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							and Quality, Massachusetts, Department of Public Health website: <a href="http://www.mass.gov/eohhs/gov/departments/dph/programs/hcq/healthcare-quality/health-care-facilities/long-term-care-facilities/nursing-homes/civil-monetary-penalty-use-plan.html">http://www.mass.gov/eohhs/gov/departments/dph/programs/hcq/healthcare-quality/health-care-facilities/long-term-care-facilities/nursing-homes/civil-monetary-penalty-use-plan.html</a>		conversations, and 49% reported new conversations between leadership/staff and residents between meetings. Ten nursing homes launched a family council or meeting over the course of the project, and seven were in the process of starting one. While nine participating nursing homes already had family councils or meetings in place, they worked to improve their structure and objectives through

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									this project.
<b>New Hampshire</b>	\$1,060,830.46	July 1, 2017-January 31, 2018 (12 months)	Building Memories: Increasing Use of the Music & Memory Program in New Hampshire	The project will continue implementation and support for the Music & Memory Program in certified nursing facilities, providing them with a non-pharmacological tool to use to improve the quality of life for their residents.	New Hampshire Health Care Association	All Certified Nursing Homes in New Hampshire	By introducing the Music & Memory program, we are looking for a reduction in aggressive behaviors, acting out, and depressive symptoms with the addition of a non-pharmacological intervention. Also adding an additional activity for the residents and an increase in overall resident satisfaction.	Resident Satisfaction	No data available
<b>Vermont</b>	\$190,479.00	July 1, 2016 – June 30, 2017 (12 months)	Reducing the Inappropriate Use of Antipsychotic	Funding was requested to continue efforts to reduce the inappropriate use of antipsychotic medications in Vermont	Vermont Health Care Association (VHCA)	All Vermont nursing homes	Through this project, VHCA will host an Oasis train-the-trainer session and at least eight Oasis and Music	Training	Hosted an Oasis train-the-trainer education session where 45 individuals participated; Hosted

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			Medications in Vermont Nursing Homes Through Workforce Training and Support; Oral Health Education Program	nursing homes, by promoting workforce training and support through Oasis (a person-centered curriculum), Music & Memory networking, Alzheimer's Disease, Dementia Care training, and mentor training for direct care workers. Funding was also requested to provide training for direct care workers to improve nursing home residents' oral health care.			& Memory Networking Meetings; offer the Alzheimer's Disease and Dementia Care training in all of Vermont's 37 Medicare/Medicaid nursing homes; and develop a comprehensive Peer Mentor Training packet to be piloted in five nursing homes. VHCA will provide oral health training to all of Vermont's 37 Medicare/Medicaid nursing homes and will provide each nursing home with a copy of the DVD, "Mouth Care Without a Battle."		12 Oasis and Music & Memory networking meetings; Offered 39 Alzheimer's Disease and Dementia Care Trainings with a total of 532 individuals attending the training; Preparation of a Comprehensive Peer Mentor training packet which was piloted in five nursing homes; Oral Health trainings were offered in 35 of Vermont's Medicare/Medicaid nursing homes with a total of 248 individuals

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									participating in the trainings; Each of Vermont's 37 Medicare/Medicaid nursing homes was provided with the training DVD, "Mouth Care Without a Battle."

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<b>New Jersey</b>	\$32,000.00	May 1, 2017 – April 30, 2019 (24 months)	Nonviolent Crisis Prevention And Intervention Training	The goal of this project is to train nursing home staff on nonviolent crisis prevention techniques and de-escalation interventions. Objectives include: Train-the-Trainer education of 22 staff on de-escalation techniques (two days) and training and certification of two staff (four days). 400 total staff to be educated over two years.	State of New Jersey (NJ); NJ Department of Military and Veteran Affairs; Veteran's Memorial Home at Paramus	No data available	Quarterly reports.	Training	Thus far, 22 staff members have been trained on de-escalation techniques (two- day training), and two staff members have participated in the four-day training and certification.
<b>New Jersey</b>	\$15,750.00	May 1, 2017– December 31, 2017 (7 months)	NJ Alliance for Culture Change Connect (2017 conference)	Eight-hour conference highlighting best practices in person-centered care related to Caring Conversations project, caring for people with Parkinson's disease, using volunteers, and using information technology to improve quality of life.	New Jersey Alliance for Culture Change (NJACC)	124 participants from certified nursing homes	Evaluation of the conference and survey three months later on activities since the conference.	Training	Of the 124 participants, 65% of the 60 respondents to the follow-up survey reported that their community is planning or implementing strategies to enhance resident quality of life and incorporate person-centered care.

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<b>New Jersey</b>	\$23,750.00	January 15, 2017 – December 31, 2017 (11 months)	Transformative Leadership Academy for Person-Centered Care	Four day-long workshops and an online community facilitated nursing home staff in developing consistent staffing, customer service, team building, decision making, leadership, dining standards, and regulation compliance, while delivering person-centered care.	New Jersey Alliance for Culture Change (NJACC)	30 staff from 20 nursing homes	Pre and post-assessments and workshop evaluations, mid-project and final reports.	Training	84% of respondents reported that their nursing home adopted new practices or approaches to improve resident care or quality of life. Self-assessments measured improvements in 8 of 10 measures of person-centered care, while one measure was unchanged, and one had a slight decrease.
<b>New Jersey</b>	\$24,750.00	September 1, 2016 – June 30, 2017 (10 months)	New Jersey Hospital Association ; Northern & Southern New Jersey Chapters of Association for Professionals in Infection	Pay tuition for up to 50 nursing home staff to attend the Northeastern Basic Course for Principles of Infection Prevention and Control between October 2016 and April 2017.	New Jersey Hospital Association	Participating nursing homes (do not pay for tuition)	Attendance records, certificates of completion and course evaluation results.	Training	No data available

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			Control and Epidemiology; New Jersey Department of Health Partnership on Principles of Infection Prevention and Control						
<b>New York</b>	\$1,000,000.00	August 1, 2015 – July 31, 2017 (24 months)	Customer Satisfaction Survey and Quality Improvement	Administer professionally designed customer service satisfaction surveys to residents and family members in participating nursing homes to capture their satisfaction and particular experience with the care, services and living environment. To provide actionable feedback to facility leadership.	Foundation for Quality Care National Research Corporation	Nursing homes in New York, including residents, leadership, staff and family members	Satisfaction surveys Individualized actionable feedback provided to each participating nursing home	Other	General satisfaction among residents and their families was surveyed and evaluated over an annual period. The general satisfaction of residents increased for 20 of the 35 nursing homes. The average improvement was 10.7% with eight homes improving over 10% and one home improving

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									33%. The general satisfaction of families increased for 19 of the 35 nursing homes. The average improvement was 14.2% with 11 homes improving over 10% and five homes over 20%. Other facility-specific improvements were made by nursing homes as a result of the feedback provided



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<b>Delaware</b>	\$30,300.00	December 12, 2016 – May 1, 2017 (5 months)	Music & Memory	Project will an expand the state's Music & Memory program with the goal of improving the overall quality of life for nursing home residents with dementia.	Delaware Division of Long Term Care Residents Protection (DLTCRP)	Residents in certified nursing homes in Delaware; University of Delaware; AARP, and Alzheimer's Association	Reduction in the use of anti-psychotic, anti-anxiety, and anti-depressant medications. Reduction in agitation and sundowning. Enhancement in engagement and socialization and increase in fostering a calmer social environment. Increase in providing a way to give pleasure to persons with dementia. Increase in cooperation and attention, reduction in resistance to care specific to all activities of daily living.	Direct Improvements to Quality of Life	Facilities are using personalized tracking sheets to track the usage of the program. The project has reduced the use of anti-psychotic medications. There have been reports of decreased behaviors, such as yelling, hitting, and other disruptive behaviors.

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Delaware	\$9,973.00	October 2, 2017 – October 3, 2017 (2 days)	Minimum Data Set (MDS) 3.0 Workshop	The project will provide an MDS 3.0 workshop to Delaware Medicare/Medicaid certified nursing homes and surveyor staff. The purpose of the training is to provide certified nursing homes and surveyors training on the most recent updates of the MDS section by section; detail the guidelines for capturing 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 Assessment.	Delaware Division of Long Term Care Residents Protection (DLTCRP)	Certified nursing homes in Delaware; state surveyors	Each certified nursing facility will have the most up-to-date knowledge on the new MDS.	Training	The purpose of the training is to provide certified nursing homes and surveyors training on the most recent updates of the MDS section by section. Additionally, attendees were provided knowledge in the detailed guidelines for capturing ADLs, describing coding, management, and care of pressure ulcers per the RAI User's Manual. Furthermore, the training discussed the importance of therapy services and documentation.

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				The training will discuss the importance of therapy services and documentation.					
<b>Delaware</b>	\$77,274.00	November 31, 2016 – October 31, 2017 (11 months)	It's Never 2 Late - Delaware Veterans Home	Purpose of this project is for the facility to purchase the It's Never 2 Late (iN2L) technology system to make quality of life improvements for the residents of a 181 Medicare/Medicaid certified skilled nursing facility.	Delaware Division of Long Term Care Residents Protection (DLTCRP)	Residents of Delaware Veterans Home	The facility will monitor impact in order to show reductions in antipsychotic drug use, depression, behaviors, and falls.	Direct Improvements to Quality of Life	Results have shown that iN2L has reduced the use of anti-psychotic medications. The project has also increased the quality of life for the residents in the facility. Several residents have displayed increased engagement and socialization with the staff and with fellow residents.
<b>Delaware</b>	\$49,349.00	May 1, 2017 – December 31, 2017 (8 months)	Music & Memory	Project will an expand the state's Music & Memory program with the goal of improving the overall quality of life for nursing home	Delaware Division of Long Term Care Residents Protection	No data available	No data available	No data available	Facilities are utilizing personalized tracking sheets to track the usage of the program for each individual resident. Music &

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				residents with dementia.	(DLTCRP)				Memory has reduced the use of anti-psychotic medications. There have been reports of residents with decreased behaviors, such as yelling, hitting, and other disruptive behaviors.
<b>Delaware</b>	\$33,121.00	June 6 – 7, 2017 (2 days)	Dementia Training	The purpose of this training is to update Medicare/Medicaid certified nursing homes and surveyors on the most recent developments in dementia care and psychotropic medication usage in nursing homes. The workshop will also instruct participants on the effectiveness of current therapies for	Delaware Division of Long Term Care Residents Protection (DLTCRP)	Staff who work in Medicare/Medicaid certified nursing homes, including nurses, certified nursing assistants, and activity assistants	The training will provide: an understanding of dementia; identification of common causes of aggressive, repetitive, and sundowning behaviors in adults; description of behavioral/care intervention that may be used to prevent or reduce difficult care situations; description of challenges related to	Training	Delaware staff, including nurses, certified nursing assistants and activity staff who work in Medicare/Medicaid certified nursing homes were provided with up-to-date knowledge on clinical aspects of dementia care. All participants displayed an understanding of dementia and how to identify causes of

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				Alzheimer's disease, the development of measures of quality of life in persons with Alzheimer's disease, the care of patients with late-stage dementia, and autism in the elderly.			caregiver stress and utilization of stress reduction techniques; learning alternative activity interventions that are success-oriented.		aggressive, repetitive, and sundowning behaviors in adults and how to prevent and reduce difficult care situations.
<b>Maryland</b>	\$8,750.00	September 15, 2016 – January 31, 2019 (29 months)	You Are the Eyes and Ears Conference	This project aims to improve care for residents of Maryland long-term care facilities by strengthening the capacity of geriatric nursing assistants (GNAs) to provide care and support. It also provides recognition and support for GNAs by awarding scholarships and professional achievement awards.	The Beacon Institute, Inc.	GNAs who work in Maryland skilled nursing facilities	The training will improve skills and enhance GNAs' professional knowledge.	Direct Improvements to Quality of Life	The training included 140 attendees and four speakers. Based on post conference surveys, 95% of attendees rated each session in the top 20% of the evaluation scale. The majority of attendees felt that the facility was conducive to learning, the content was relevant, the teaching methods were effective, and the

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									handouts were effective.
<b>Maryland</b>	\$100,889.00	August 31, 2016 – January 31, 2019 (33 months)	Staff Training on Dementia Care	The purpose of this project is to provide certified nursing home staff with tools and strategies for working with residents with dementia (through behavior and person-centered concepts). An expected outcome of the project is that residents will receive optimum dementia care from staff who are certified in Alzheimer's care.	The Beacon Institute, Inc.; Maryland Office of Health Care Quality	12 nursing homes in Baltimore City and Charles County	The training will result in nursing home staff who are better trained in Alzheimer's care, resulting in both basic and advanced certification from the Alzheimer's Association. The results from the training will be presented and shared publicly to encourage enrollment in the training program.	Training	No Cost Extension (NCE) was granted on December 18, 2017. The grant is still ongoing after the committee granted a No Cost Extension (NCE) on December 18, 2018.
<b>Maryland</b>	\$82,800.00	April 1, 2017 – December 31, 2017 (9 months)	Improving Nursing Home Transitions	The project will train nursing home staff, residents, and caregivers to use a discharge toolkit. Nursing home staff will	The Beacon Institute, Inc.	15 Maryland nursing homes	The training/toolkit includes the following staff resources: checklist of factors to assess residents' competency for self-	Training	No data available

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<b>State</b>	<b>Total amount of State CMP funds obligated for each project (all years)</b>	<b>Anticipated project duration</b>	<b>Title of each approved project funded in whole or in part with State CMP funds</b>	<b>Brief description of the goals and objectives of the project</b>	<b>List entity (ies) that received funding and will carry out the project</b>	<b>List entity (ies) that will benefit from the project</b>	<b>Expected deliverables or metrics for the project</b>	<b>Project category</b>	<b>Results of the project</b>
		No Cost Extension for December 18, 2017 through July 30, 2018.		also be provided with training in current discharge practices.			care; home environment review checklist; recommendations for addressing needs; template of discharge plan of care; contact list for various issues; and recommended resources. The training/toolkit also includes the following resident resources: discharge plan of care (with directions of how to follow post-discharge); tips for staying healthy; medication lists and tips; resource list that is specific to residents' needs in the community. The following caregiver		

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							resources are also included: caregiver self-assessment of competency and needs; review protocol (before residents return home); identifying home risks; action list to deal with specific problems; communication tips.		
<b>Maryland</b>	\$7,415.00	September 21, 2016 – February 15, 2017 (6 months)	Western Maryland Geriatric Nursing Assistants (GNA) Conference 2016	This conference enables collaboration with local agencies, employers, and organizations to support high- quality certified nursing aide (CNA) and GNA care. It helps establish an annual and local professional development opportunity for regional CNAs and GNAs. As	Allegany College of Maryland (ACM)	50-100 CNAs and GNAs who work in Maryland skilled nursing facilities	The conference will provide attendees with a certificate of completion of job-related professional development, helping improve patient care through best practice training. A report will be developed on the conference's suitability as an ACM credit internship; internship	Training	50 CNAs and GNAs enrolled, and conference attendees and others received a pertinent resource guide. Training was provided on various topics, including dealing with difficult behaviors in dementia patients and presence. Current resources from the Alzheimer's Association



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				part of the conference, attendees and others also receive a pertinent resource guide.			outline and learning objectives will be developed.		were also provided.
<b>Maryland</b>	\$109,850.00	June 23, 2016 – July 18, 2017 (13 months)	Wound Care Training and Certification	This project will offer training to up to 50 individuals on the physiology of the skin and underlying tissues wound prevention, wound assessment, and wound healing.	Health Facilities Association of Maryland	50 health care staff members in Maryland skilled nursing facilities	The project aims to increase the number of skilled nursing facility staff who are trained in wound care, as well as to improve treatments for reducing risk and achieving quicker healing times for residents.	Training	51 people attended three trainings in October 2016, March 2017 and June 2017. The average pass rate between the three classes was 70%.
<b>Maryland</b>	\$80,189.00	November 1, 2016 – January 31, 2017 (3 months)  No Cost Extension was granted on April 10,	Advancing Quality Assurance and Performance Improvement (QAPI) in Maryland	This project aims to develop a corps of QAPI-certified professionals in Maryland. This program will provide training to 50 QAPI coordinators and will assist with coordinating, developing, and	The Beacon Institute, Inc.	50 QAPI coordinators; 40 Maryland nursing homes	50 nursing home staff will complete the QAPI long- term care course (provided by the American Association of Nurse Assessment Coordination); 50 nursing home staff will pass the QAPI Certification exam and	Training	No data available

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		2017		implementing QAPI plans in about 40 Maryland nursing homes.			will become QAPI Certified Professionals (QCPs); 40 Maryland nursing homes will complete QAPI plans.		
<b>Pennsylvania</b>	\$977,900.00	July 1, 2016 – June 30, 2017 (12 months)	Reduction in the Utilization of Restraints	Pennsylvania Restraint Reduction Initiation (PARRI- MAP-IT) program for healthy skin; to improve lives of residents through education, support, mentorship of long-term care providers, residents and families, government agency representatives, and advocacy organizations; eliminating the use of physical restraints.	Kendal Outreach	No data available	Quarterly reports submitted to Office of Long-Term Living contained data and responses regarding consultations performed during each quarter. Yearly surveys sent to respondents asking if their interaction with PARRI had a positive impact on their individual care processes.	Direct Improvements to Quality of Life	PARRI staff engaged 132 facilities in 40 counties in the last quarter.
<b>Pennsylvania</b>	\$50,000.00	July 1, 2016 – June 30, 2017 (12 months)	Improvement to Call Bell Access	The RistCall Patient Care Pilot program will install the RistCall wireless, wearable call	Kane Regional	Kane Regional residents	Centers for Medicare & Medicaid Services Quality Assurance and Process Improvement	Direct Improvements to Quality of	RistCall equipment was installed in a 40-bed unit. The impact has been improvement in

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				bell system.			(QAPI) framework with five elements will be considered to evaluate patients' ability to call for help when away from bed (patient mobility and independent active life style), system ability to provide across the shift/department communication (for leadership), system ability to capture anonymous feedback from patients and staff (feedback and data systems monitoring), system ability to provide detailed reports on response time, patient satisfaction and staff satisfaction (on	Care	call bell response time, as well as improved resident satisfaction with the response from caregivers.

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							performance improvement projects).		
Virginia	\$215,395.00	September 1, 2015 – August 31, 2017 (24 months)	Micro Learning as a Tool for Delivering Person-Centered Care for Residents With Dementia in Virginia's Nursing Facilities	The project is expected to result in better quality care for nursing facility residents with dementia (through the provision of training to the staff who care for them). The learning gained through this training is sustainable, as nursing homes will continue to utilize approaches and practices in their homes. Staff are likely to be more responsive to ongoing training via this platform if: the initial delivery proves beneficial, and they recognize that the administrators are willing to try new	Riverside Center for Excellence in Aging and Lifelong Health	Clinical and non-clinical staff in nine nursing homes	No data available	Training	The survey was completed by 244 participants, mostly women (93%) and nearly evenly split between Caucasian (49%) and African Americans (49%). The pass rate for the entire project period averaged 96%, with pass rates by nursing homes varying between 94% and 100%. Certificates of completion were issued quarterly to participants who had completed lessons in that quarter and achieved a 100% pass rate on all quizzes. An average of 283 certificates were

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				approaches to make their jobs, as well as the care they provide, more effective.					issued each quarter, with a total of 1,131 certificates issued by the end of the project.

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<b>Alabama</b>	\$106,232.00	June 18, 2015 – June 18, 2018 (36 months)	Long-Term Care Quality Improvement Initiative/The Society for Post-Acute and Long-Term Care Medicine (AMDA) Clinical Practice Guidelines (CPGs) and Region IV Website	Develop a regional website and provide AMDA's Clinical Practice Guidelines and other AMDA resources to certified nursing homes in five southeastern U.S. states (Alabama, Georgia, Kentucky, Mississippi, and South Carolina).	University of Louisville Research Foundation, Inc.	Long-term care residences and staff in the targeted states	AMDA's CPGs will be made available to clinicians and all members of the interdisciplinary team on 21 different long-term care topics. CPGs may be used for in-service education and directed plans of correction.	Training	No data available
<b>Alabama</b>	\$61,7000.00	August 2016 – August 2019 (36 months)	Music & Memory and Art Therapy Program	To develop and implement a Music & Memory program and art therapy program for 32 certified Alabama	Ms. Gayle Boswell, Alzheimer's Education,	32 certified long-term care facilities, between 480	No data available	Direct Improvements to Quality of Life	Dementia education was provided for 40 certified nursing homes; 9,477 staff trained by year three of

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				nursing homes. To reduce symptoms of anxiety and depression; reduce agitation, improve communication, foster self-expression, enhance coping skills and stimulate positive interactions with staff and family. The art therapy program will work with 15-20 dementia residents weekly on a themed art activity; Dr. Daniel Potts and Angela Duncan will evaluate between 480 and 640 residents with dementia over the three years; assist the interdisciplinary team with individual person-centered care plans; and conduct a statewide	Resources & Services, Inc. (AERS)	and 640 residents with dementia and staff of facilities.			the grant. Many facilities have now included AERS training as part of their orientation, formed dementia caregiver groups and include certified nursing assistants in training. Facilities not included in this project have contacted AERS for training in this program. Many residents who were reclusive, non-active or verbal began taking part in programs.

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				conference on best practices in dementia care that will be provided for 227 certified nursing homes					
<b>Alabama</b>	\$204,552.00	October 6, 2014 – August 31, 2017 (35 months)	The Young Adult in Long Term Care (YALTC)	Develop a training curriculum and program (for clinical practitioners and staff) about the young adult in the long-term care setting.	The Society for Post-Acute and Long-Term Care Medicine (AMDA)	Long-term care residents and clinical practitioners	YALTC training was guided by four key research questions, and data was collected at three periods during the course training. Each participant completed a pre-test (prior to the training) and post-test (immediately following training). A follow-up was conducted 60 days after the training.	Training	Overall, the YALTC program has a significant initial impact on knowledge about adult residents. There was a statistically significant difference between the percentage of correct responses from post-test follow-up, suggesting that YALTC training had an effect on participant knowledge.
<b>Alabama</b>	\$1,744,332.00	October 2017 – September 30, 2020	Brushing Away Infections; Improving	Program in seven Alabama nursing homes to educate certified nursing assistants and	The University of Alabama	Residents and staff in seven certified	Provide didactic and one on one, real time clinical coaching to 90% of aides and	Direct Improvements to Quality of	Results pending



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		(36 months)	Mouth Care Program (IMCAP)	licensed nurses on how to improve mouth care by utilizing evidence-based mouth care practices.	Birmingham, School of Nursing	nursing homes in Alabama	nurses; implement a comprehensive IMCAP in each facility; teach staff how to reduce care-resistant behaviors during oral care; integrate mouth care best practices at each participating facility; improve the overall oral health of residents.	Care	
<b>Alabama</b>	\$88,089.90	August 26, 2016 – August 26, 2018 (24 months)	Reducing Avoidable Hospitalizations Across the Continuum of Care	This project will assist Region IV states in reducing avoidable hospitalizations and educating residents, family members, staff, and community partners about best practices to reduce avoidable hospitalizations.	Florida Atlantic University	Certified Nursing homes in Alabama and community partners	Through this project, the following deliverables are expected: modification of Resident and Family Decision Guide; piloting the guide in seven of eight Region IV states; developing a video for nursing	Direct Improvements to Quality of Care	No data available (

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							homes that explains the role of the Decision Guide in reducing avoidable hospitalizations; sending a complete package of Decision Guides and training materials, and providing the Decision Guide in different languages (i.e. Spanish, French, Chinese, Tagalog and Haitian Creole); developing webinars and conducting workshops to discuss best practices on how to reduce avoidable hospitalizations.		
<b>Florida</b>	\$517,330.00	August 11, 2015 – August 31,	Developing a Curriculum	The purpose of this project is to educate nursing home staff,	The Society for Post-	Nursing homes, QIOs, Long-	AMDA will produce training curriculum and training program	Training	AMDA conducted one online training and 13 training workshops with

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		2017 (25 months)	and Training Program for Clinical Practitioners and Staff on the Younger Adult in the Long-term Care Setting	Quality Improvement Organizations (QIOs), surveyors, and Ombudsmen on how to provide quality care for younger adults in long term care (LTC) facilities.	Acute and Long-Term Care Medicine (AMDA)	Term Care Ombudsmen and state surveyors across state of Florida	for clinical practitioners and staff on younger adults in LTC setting. The education and training will address challenges young adults face in LTC facilities and provide recommendations for best practices to successfully integrate young adults into the life of the facility.		three in Florida. Overall, there were 692 attendees at all workshops and online, 103 in Florida. Based on feedback from training attendees, the training program had a significant positive impact on participants' knowledge about younger adult residents. As a result of the training (in-person and online), participants were able to distinguish between young adult residents' wants and needs and felt better able to meet those needs. In addition, participants agreed that they learned things from the

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									training that they were able to apply directly to working with younger adult residents.
<b>Florida</b>	\$275,000.00	January 1, 2017 – April 18, 2018 (17 months)	Integration of a Telemedicine System and Outcome Measurement Platform into Nursing Facilities to Improve After-Hours Medical Care	The purpose of this project is to attempt to reduce the frequency of avoidable hospital admissions and readmissions, improve resident health outcomes, and reduce overall health care spending without restricting access to care through telemedicine services.	The Targeting Revolution-ary Elder Care Solutions (TRECS) Institute	Four certified nursing homes in the state	The TRECS Institute will implement telemedicine services at four certified nursing homes. Telemedicine will help reduce emergency room visits and hospitalizations and will provide for a better quality of life for nursing home residents.	Direct Improvements to Quality of Care	The TRECS Institute implemented telemedicine services in four Florida nursing homes. Outcomes from the eight-month study indicate that nursing home residents who are treated at their bedside by a virtual physician service and avoid an unnecessary hospital admission is a benefit to the resident, the facility, and to the Medicare program. It was determined that to be successful with a telemedicine program, physicians and

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									management must be on board and willing to make the program successful. Without this teamwork, the program will struggle.
<b>Florida</b>	\$143,776.00	November 21, 2016 – October 31, 2018 (24 months)	Developing a One-Hour English Version and Spanish Version of Two Evidence Based Training Programs to Improve Person-Centered Care and Outcomes in Nursing	The purpose of this project is to provide training DVDs that have had success in the nursing home industry but have been unsuccessful in reaching nursing home staff whose primary language is Spanish.	Generativity, LLC	All certified nursing homes across the state	Generativity will develop one-hour Spanish versions of the Mouth Care Without a Battle and Bathing Without a Battle trainings; they will also create a one-hour English version of the current three-hour Mouth Care Without a Battle program. By providing access to these trainings, Spanish-speaking staff will improve the care they	Training	This project successfully created and disseminated new training programs to all nursing homes in the state of Florida. Although a small number of staff participated in the evaluation of the project, the results overwhelmingly demonstrate the benefit of the training program in terms of staff self-efficacy, the ability to provide

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			Homes: Bathing Without a Battle and Mouth Care Without a Battle				provide to nursing home residents in Florida.		information about new techniques, and the overall fit of the program with learners' needs.
Florida	\$119,255.10	October 1, 2017 – December 31, 2019 (27 months)	Reducing Avoidable Hospitalizations Across the Continuum of Care	The purpose of this project is to educate residents, their families, and nursing home staff about best practices in reducing avoidable hospitalizations.	Florida Atlantic University (FAU)	Nursing homes, Quality Improvement Organizations (QIOs), Long-Term Care Ombudsman and state surveyors across the state of Florida	FAU will disseminate the "Go to the Hospital or Stay Here" Guide as a tool to educate on the risks and benefits of hospitalization. The university will also conduct workshops in the participating states to train on the use of the Guide. The Guide and associated trainings will help residents and their families make better	Direct Improvements to Quality of Care; Training	Results pending

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							choices on the need for hospitalization.		
Georgia	\$47,339.50	June 10, 2016 – April 14, 2017 (10 months)	Avalon's Green Space	The goal of this project is to create a green space that all Avalon Health & Rehabilitation Center residents can utilize to be able to engage in outdoor activities that they enjoy. Specifically, the green space will include a pergola, garden, seating for residents, a walkway as well as fencing and lights around the perimeter of the green space. The green space will be used as an intervention when residents become anxious or have destructive behaviors.	Avalon Health and Rehabilitation Center (Miram Deberry, Project Leader)	Avalon Health and Rehabilitation Center	Measures of success will include: (a) a decrease of 20% in the usage of psychotropic medications compared to the previous three years to address agitation and anxious behaviors; (b) a decrease of 20% in staff interventions for behaviors that arise between residents and themselves; and (c) an increase of 20% in the overall resident satisfaction and contentment with the center implementation of the	Culture Change	The Avalon Green Space is completed, and residents are able to walk freely up to the doors that allow them uninhibited access into the green space. Based on the resources needed to fulfill the project and anticipated costs, the project received a savings of \$674.99. The project was a complete success, to include an overall decrease of at least 20% in the usage of psychotropic medications as compared to years 2013-2015 (from 476

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							new green space. Years 2013-2017: Year, #of Medications 2013, 578 2014, 493 2015, 476 2016, 391 2017, 400		(2015) to 391 (2016) and 400 (2017); a decrease of at least 50% in staff interventions (from 25 (1/1/2016) to 13 (1/1/2017); and an increase of at least 50% of overall resident satisfaction regarding the Green Space implementation (from 30% (12/2016) to 80% (06/2017)).
<b>Georgia</b>	\$293,524.00	March 27, 2015 – August 31, 2017 (29 months)	The Younger Adult in LTC (Long Term Care) Setting	The purpose of this project is for AMDA to provide services to improve the quality of care and quality of life for younger adults utilizing LTC services. This is a regional CMP award that authorizes training to be provided in	American Medical Directors Association (AMDA), Inc. (Gwenn Murray, Project	Clinical practitioners and staff of certified nursing facilities	1. Creating the Young Adult in the LTC Setting educational curriculum and materials 2. Web-based course creation and launching of the web-based training 3. Webinar production	Direct Improvement to Quality of Care	AMDA completed and delivered a successful project. (1) The Young Adult in the LTC Setting educational curriculum and materials (training curriculum, training workbook and supporting tools and



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				the participating Region IV states of Alabama, Georgia, Florida, Mississippi and South Carolina. The project objectives are: Develop training curriculum and training program for clinical practitioners and staff on the young adult in the LTC setting. The curriculum will be developed using a three-pronged training strategy: (1) online component; (2) face to face component; and (3) virtually, in a learning collaborative; and Educate and train the Medical Directors, nursing home staff, HFRD surveyors, the LTC Ombudsman and	Leader)		4. Video production 5. Conduct 13 Live trainings in Region IV (7 per year) 6. Launch the learning collaborative 7. Dissemination of findings		documents) have been completed and are available for use. (2) The web-based course was created, and the web-based training was launched. The online training platform went live on April 14, 2017 and was promoted and deployed to the states that had completed in-person trainings (GA, MS and SC). On July 1, 2017, the online training module was made available and promoted to the remaining three states (AL, KY and FL) to allow them the opportunity to register and complete the training, prior to the

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				members of the Quality Improvement Organizations on how to provide better care for the young adult in LTC.					end of the grant period. Learning resources were available on the online training website through the end of the project period (August 2017). The Younger Adult DVD (targeted at the SNF CNA population was finalized and completed), which is an abbreviated version of the Younger Adult curriculum in a DVD format, features narrated course material, select videos, and has been configured into 15-20-minute modules to facilitate delivery to CNA staff. (3) The webinar was developed

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									and delivered. (4) Video production was completed, and ten videos are imbedded within the curriculum. (5) 13 Live Trainings were conducted in Region IV. Two live trainings were conducted in each of the five states and three live trainings were conducted in FL. Six trainings were conducted in 2016 and seven trainings were conducted in 2017. (6) The learning collaborative was launched during the 4th quarter of 2016. On December 7, 2016, the first webinar was conducted, and Dr.

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									Hudson Garrett presented an hour-long webinar on "Preventing Antibiotic Resistance in the Younger Adult in the Post-Acute/Long-Term Care Setting: Strategies for Stewardship." (7) Findings were disseminated via quarterly reports, annual reports, Insight Policy Research reports, and the final report.
<b>Georgia</b>	\$115,094.90	November 22, 2017 – September 30, 2019 (23 months)	Reducing Avoidable Hospitalizations Across the Continuum of Care	This project will assist Region IV states in reducing avoidable hospitalizations and educating residents, family members, staff, and community partners	Florida Atlantic University	Certified nursing homes in Georgia and community partners	Through this project, the following deliverables are expected: modification of the Resident and Family Decision Guide;	Direct Improvements to Quality of Care	Results pending

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				about best practices to reduce avoidable hospitalizations.			piloting the guide in seven of eight Region IV states; developing a video for nursing homes that explains the role of the Decision Guide in reducing avoidable hospitalizations; sending a complete package of Decision Guides and training materials to every skilled nursing and nursing facility, and providing the Decision Guide in different languages (i.e. Spanish, French, Chinese, Tagalog and Haitian Creole); developing webinars and conducting workshops to discuss		

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							best practices on how to reduce avoidable hospitalizations.		
<b>Georgia</b>	\$788,850.00	June 6, 2017 – March 31, 2019 (22 months)	Georgia Statewide Music & Memory Program	This program will develop and implement a Music & Memory program for 150 certified nursing homes in Georgia. The program will enhance the quality of life for residents with dementia through person- centered care plans, which include individualized music playlists and activities.	Georgia Health Care Association (GHCA)	150 certified nursing homes in Georgia	Expected deliverables include: enrollment of nursing homes with high antipsychotic utilization rates and nursing homes with a dedicated dementia unit; provision of education and training on music therapy, including demonstrated usage of tactile music expression; development of personalized playlists for each participating resident; and incorporation of Music and Memory program into individualized	Direct Improvements to Quality of Care	141 nursing homes have enrolled in the program (through Q3 2018). 50 nursing homes have been Music & Memory certified as of the end of 2017. The project was presented at the GHCA Winter Convention, and webinars were held on January 16-17, 2017, February 13-14, 2017, and March 13-14, 2017.

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							resident care plans.		
<b>Georgia</b>	\$47,339.50	June 10, 2016 – April 14, 2017 (10 months)	Virtual Dementia Tour	To provide virtual dementia tours, education, and training for direct care staff, physicians, other clinicians, administrative and corporate personnel in 169 Georgia certified nursing homes.	Second Wind Dreams	169 certified nursing homes in Georgia (residents, family members, direct care staff, the board of directors, and community partners)	Improvements in the delivery of care provided to residents with dementia.	Training	No data available
<b>Georgia</b>	\$88,000.00	August 30, 2016 – June 14, 2017 (11 months)	Eden Alternative and Culture Change at A.G. Rhodes Nursing Home	This program will implement culture change and person- directed care utilizing the Eden Alternative principles.	A.G. Rhodes Health and Rehabilitation	No data available	Certify staff in Eden Alternative principles.	Training	No data available
<b>Georgia</b>	\$176,032.00	June 16,	Promoting	This project will conduct	University	Nine	This project will	Direct	The project resulted in

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		2016 – April 14, 2017 (10 months)	Quality Bereavement Care	education and training on end-of-life care for nine certified nursing homes in Georgia. Through the project, direct care staff will be interviewed on how to improve end of life care, and a list of best practices for long-term care facilities to assist residents with grief and advance care planning will be developed. Throughout this project, discussions about advance care planning and Physician's Orders for Life-Sustaining Treatment (POLST) will occur.	of Georgia Research Foundation	certified nursing homes in Georgia	determine best practices in bereavement care for residents, family members, and long-term care facility staff. The University of Georgia will discuss death and dying practices utilized at Carlyle Place with residents, family members, direct care staff, members of the interdisciplinary team, and corporate officials. A variety of interview techniques will be used to solicit information on how the nursing home manages a resident's death, and what practices are	Improvements to Quality of Care	the development of two booklets for statewide dissemination to Georgia nursing homes on "Best Practices in Bereavement Care" (to be utilized by residents and staff).



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							instituted in a nursing home to help residents, family members and staff grieve the loss of life.		
<b>Kentucky</b>	\$21,360.00	October 1, 2016 – October 31, 2017 (12 months)	It's a Wonderful Life Through Technology	To purchase It's Never Too Late (iN2L), an adaptive computer technology for: enhancing individual and group activities; improving behavior management; decreasing utilization of antipsychotic medications; and providing opportunities for lifelong learning and resident access to family and friends via the internet.	Sayre Christian Village Healthcare Center	Sayre Christian Village Healthcare Center residents, family members, and staff	Informing residents, family members, and staff of iN2L; developing customized iN2L My Story digital biographies for 41 residents with dementia; utilizing iN2L technology for care plan meetings. As part of the project, all parties will also receive information on how to protect themselves from identity theft and the loss of private protected health	Direct Improvements to Quality of Life	41 My Story digital biographies developed; successfully using Skype to contact family; physical therapy using exercise cycle application for therapy sessions; residents using iN2L for games and family as well as for church services.

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							information, as well as on social media and social networking.		
<b>Kentucky</b>	\$201,113.00	July 1, 2016 – March 31, 2019 (33 months)	The Society for Post-Acute and Long-Term Care Medicine (AMDA) Clinical Practice Guidelines (CPGs)	a) Develop a CMS Region IV regional website and provide Clinical Practice Guidelines (CPGs) and other resources developed by the American Medical Director Association (AMDA) to certified nursing homes (CNH) across six (6) Region IV states (Kentucky, Alabama, Georgia, Mississippi, South Carolina and Florida). b) Develop a password protected website for a continuing education program including examinations for up to	University of Louisville Research Foundation	Kentucky nursing homes, nursing home providers, OIG Long-Term Care (LTC) Surveyors, LTC Ombudsman, QIO	Develop a password protected website; Develop continuing education program including examinations for up to six CPGs per year; Provide CME/CEs to health care professionals from three disciplines at no charge; Produce webinars from the AMDA Implementation Manuals as available to be archived on website. Evaluate change in health care practices following completion of	Direct Improvement to Quality of Care	AMDA CPG website completed since 10/17/18. All 20 CPGs CE exams completed and available on the website. Website utilization report from 1/31/19 – 3/31/19 continuing education credits: 504. Filming completed, and website updated for Urinary Incontinence, Pain Management, and Heart Failure.

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				six of the 21 CPGs per year for continuing education (CE) examinations and provide Continuing Education Units (CEUs) to health care professionals from four disciplines that include Medicine, Nursing, Social Work and Dietitians. c) This will improve the quality of care for NH residents.			CME/CEs. Evaluate change in state CNH performance in quality measures and frequency in deficiency citations correlated to CPG topics		
<b>Kentucky</b>	\$299,727.20	March 15, 2017– March 15, 2020 (36 months)	Inspired Living Project	The Inspired Living Project will use It's Never 2 Late (iN2L) adaptive computer technology as a non-pharmacological approach to: reduce falls/falls-related injuries, improve balance and gait, increase flexibility,	Trilogy Health Services	1,350 residents in nine Kentucky nursing homes	iN2L technology will keep residents engaged, resulting in reduced falls and increased socialization.	Direct Improvements to Quality of Life	Results pending

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				and increase upper body, lower body and core strength, for approximately 1,350 participants. The target for this project is residents with a Brief Interview for Mental Status (BIMS) score of seven or less.					
<b>Kentucky</b>	\$91,956.40	April 1, 2017– June 30, 2018 (15 months)	Reducing Avoidable Hospitalizations Across the Continuum of Care	This project will assist Region IV states in reducing avoidable hospitalizations and educating residents, family members, staff, and community partners about best practices to reduce avoidable hospitalizations.	Florida Atlantic University	Certified nursing homes in Kentucky and community partners	Through this project, the following deliverables are expected: modification of Resident and Family Decision Guide; piloting the Guide in seven of eight Region IV states; developing a video for nursing homes that explains the role of the Decision Guide in	Direct Improvements to Quality of Care	No data available

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							reducing avoidable hospitalizations; sending a complete package of Decision Guides and training materials to every skilled nursing and nursing facility, and providing the Decision Guide in different languages (i.e. Spanish, French, Chinese, Tagalog and Haitian Creole); developing webinars and conducting workshops to discuss best practices on how to reduce avoidable hospitalizations.		
<b>Kentucky</b>	\$744,202.00	April 15, 2017 – April 15, 2020 (36 months)	Bingocize	This project will train 300 direct care staff to implement Bingocize in 20 Kentucky certified	Western Kentucky University Research	This project is designed to benefit at least 1,000	The Bingocize program involves activities and exercise to improve functional	Training	Results pending

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				nursing homes.	Founda- tion, Inc.	residents in 20 certified nursing homes in Kentucky. This project also involves facilitating partnerships between seven universities and direct care staff in 20 certified nursing homes in Kentucky.	performance, leading to improvements in: activities of daily living, range of motion, and depression. The program is associated with reduced fall risk and increased resident engagement. Resident participation will be monitored, and the impact of the program will be assessed.		
<b>Kentucky</b>	\$10,000.00	November 15, 2016 – November 15, 2018 (24 months)	Virtual Dementia Tour (VDT)	To improve dementia care through the provision of VDTs, education, and training for direct care staff, residents and family	Kenton Housing, Inc; Rosedale Green	Rosedale Green residents, family members, and staff	Implement VDT tours for residents, family members, staff, and the community. Utilize the Dementia Aware Competency	Training	No data available

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				members.			Evaluation (DACE) to monitor the facility's progress.		
<b>Kentucky</b>	\$9,515.00	November 15, 2016 – November 15, 2018 (24 months)	Virtual Dementia Tour (VDT)	To provide VDTs, education, and training for direct care staff, residents, and family members.	Golden Living Center-Green Hill	Golden Living Center-Green Hill residents, Family members, and staff	Implement VDT tours for residents, family members, staff, and the community. Utilize the Dementia Aware Competency Evaluation (DACE) assessment to monitor the facility's progress.	Training	No data available
<b>Kentucky</b>	\$23,497.23	October 1, 2017 – October 31, 2018 (13 months)	Minimum Data Set (MDS) 3.0 Coding and Interpretation Basic Training; Advanced MDS Training	This will provide joint education and training to providers, MDS Coordinators, and State Agency surveyors on the MDS 3.0. Note: MDS 3.0 Coding and Interpretation Basic Training is two days (November 6-7); Advanced MDS Training	Office of the Inspector General	MDS Coordinators, State Agency Staff, and other nursing home personnel	The training will give an overview of the MDS and will cover the following topics: how to assure accuracy; who must have an assessment completed; the resources needed to complete an assessment; and	Training	Through this project, 174 MDS coordinators were trained in the Basic MDS class, and 207 MDS coordinators were trained in the Advanced MDS class. The Quality Improvement Organization (QIO) was added to the

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				is one day (November 9).			what forms are used and when. Information will also be provided on: the entry and discharge tracking assessment; a section by section review of item coding; a discussion of significant change assessments; the MDS Care Area Assessments; and MDS error correction.		agenda and discussed the quality measures and composite scores. The MDS deficiencies have decreased as a result of training.
<b>Kentucky</b>	\$49,051.00	March 15, 2017 – March 15, 2020 (36 months)	Living Intently and Fully Engaged (LIFE) Project	Utilize It's Never 2 Late (iN2L) technology to improve quality of life for 64 skilled nursing residents.	Wesley Manor Retirement Community, Inc.	Residents of the Wesley Manor nursing home	Through this project, personal activity content pages and digital biographies/life stories will be developed for 64 residents. The iN2L technology will be utilized to engage family members in	Direct Improvements to Quality of Life	Results pending



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							resident care plan conferences via Skype.		
<b>Kentucky</b>	\$46,109.14	March 1, 2017 – February 29, 2020 (36 months)	Giving Our Loved Ones Direction (GOLD) Project	Provide It's Never 2 Late (iN2L), an adaptive computer technology, to residents.	Morganfield Nursing and Rehabilitation	Residents of the Morganfield nursing home	This technology is expected to enhance individual and group activities, enrich social connections, and increase person-centered activities and interactions.	Direct Improvements to Quality of Life	Results pending
<b>Kentucky</b>	\$57,570.84	March 15, 2017 – March 15, 2019 (24 months)	We're Building on Love Project	Provide It's Never 2 Late (iN2L), an adaptive computer technology, to residents.	Carmel Manor	Residents of the Carmel Manor nursing home	This technology is expected to enhance individual and group activities, enrich social connections, and increase person-centered activities and interactions.	Direct Improvements to Quality of Life	No data available
<b>Kentucky</b>	\$46,485.24	March 15, 2017– March 15, 2020 (36 months)	Fulfilling Residents' Interests and Encourag-	Utilize It's Never 2 Late (iN2L) technology to improve quality of life for 126 skilled nursing residents.	Mountain Manor of Paintsville	Residents of the Mountain Manor of Paintsville nursing	Through this project, personal activity content pages and digital biographies/life stories will be	Direct Improvements to Quality of Life	Results pending

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			ing New Discoveries (FRIEND) Project			home	developed for 126 residents. The iN2L technology will be utilized to engage family members in resident care plan conferences via Skype.		
<b>Kentucky</b>	\$2,006,299.00	November 1, 2017 – October 31, 2020 (36 months)	Emergency Preparedness for Certified Nursing Homes in Kentucky	Provide basic and advanced training on emergency preparedness, improving the quality of care and quality of life of residents through improved safety before, during, and after emergencies and catastrophic disasters.	University of Louisville Foundation (UOL)	All residents, staff, family members, and community partners throughout Kentucky	Over a three-year period, UOL will provide yearly training to 285 staff, surveyors, Long-Term Care Ombudsman, and Quality Improvement Organization (QIO) staff on the Centers for Medicare & Medicaid Services Final Rule for Emergency Preparedness.	Training	Training conducted in February 2018 was well received. Administrators and directors of nursing gave significant positive feedback on how to enhance their facilities' emergency responses.
<b>Kentucky</b>	\$9,425.51	May 1, 2017	SuzyQ	Food service equipment	Cambridge	Residents of	As part of this project,	Direct	No data available

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		– May 31, 2018 (13 months)	Food Service Equipment	will be utilized to enhance the dining program and offer residents more food choices. In addition, the facility seeks to decrease the number of residents with unintentional and significant weight loss.	Place	Cambridge Place	staff will receive training on the Dining Practice standards and will assist residents with food choices. Direct care staff will accommodate resident allergies, intolerances, and preferences. Staff will be trained on “No Bare Hand Contact,” and quarterly reports will discuss targeted goals for decreasing significant weight loss. Meal observation audits will be conducted.	Improvements to Quality of Care	
<b>Kentucky</b>	\$73,405.00	August 1, 2017 – August 31, 2018	One-Stop Dementia Shop	This program will provide training to long-term care providers (on complying with Centers	Kentucky Office of Inspector General	Kentucky long- term care providers,	The training will provide information on how the brain is affected by dementia,	Training	Project was well attended, and the 468 participants were very satisfied.

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		(13 months)		for Medicare & Medicaid Services [CMS] regulation revisions) and to Office of Inspector General (OIG) long-term care surveyors (on the new CMS long-term care survey process on dementia management).	Division of Health Care, Training and Quality Assurance Branch	OIG long-term care surveyors, and direct care certified nursing aides who attend the training	as well as the overall disease process. In addition, providers will learn three different techniques for increasing the domains of well-being, i.e., the positive approach, hand under hand technique, and the validation technique (in conjunction with a case study).		
<b>Mississippi</b>	\$142,535.00	February 5, 2016 – September 30, 2018 (32 months)	Quality Improvement Initiative Using Clinical Practice Guidelines	University of Louisville requested civil money penalty funds to implement a quality improvement initiative using clinical practice guidelines for training materials on a shared website and to provide continuing education	University of Louisville	Residents; staff; clinicians; medical directors; administrators; state survey staff; and Ombudsman	Implement a quality improvement initiative using clinical practice guidelines for training materials on a shared website and provide CEUs.	Training	Mississippi grant ended September 30, 2018. Mississippi long-term care and stakeholders have access to website and CEUs. 201 website visits by Mississippi in year-end annual report. Pending Final Report.

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				units (CEUs).					
<b>Mississippi</b>	\$18,525.00	August 30, 2017 – March 1, 2018 (6 months)	3 Multi-Sensory Rooms	Stonebrook requested civil money penalty funds to implement three multisensory rooms in three facilities, but ultimately created them in two facilities. Therefore, the amount of the award was revised to an amended amount of \$12,350.00. Onsite visits made March 15, 2018 and July 5, 2018.	Stonebrook	Residents at two facilities operated by Stonebrook	The project focused on assisting residents with dementia and dementia-related illnesses that have behavioral symptoms. The multisensory rooms offer a treatment alternative and are equipped to provide the resident with a secure and tranquil space that promotes comfort and relaxation.	Direct Improvements to Quality of Life	Per final reports, New Albany Health & Rehab Center and Oxford Health and Rehab have multisensory rooms. New Albany reported 12-16 residents visit it daily. It is used for residents with: behavior modification for sundowning, increased agitation, anxiety, depression, on psychotropic medication, frequent falls, resident-on-resident altercations, and in calming residents during end of life. Pontotoc Health and Rehab Center did not develop a multi-

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									sensory room and no funds were used by them.
<b>Mississippi</b>	\$86,714.90	July 19, 2017 – October 1, 2019 (26 months)	Reducing Avoidable Hospitalizations Across the Continuum of Care	Florida Atlantic University requested civil money penalty funds to implement “Reducing Avoidable Hospitalization Across the Continuum of Care” in Region IV and provide training in eight states. Onsite visit made June 20, 2018.	Florida Atlantic University	Nursing homes, Quality Improvement Organizations (QIOs), Long Term Care Ombudsman and state surveyors across state of Mississippi	This project plans to educate residents, family members, staff, and community partners on best practices in reducing avoidable hospitalizations.	Direct Improvements to Quality of Care; Training	Results pending
<b>Mississippi</b>	\$22,460.00	October 17, 2016 – December 31, 2017 (15 months)	Bedford Care Partners	Hattiesburg Medical Park Management Corporation requested civil money penalty funds to implement "Bedford Care Partners"	Hattiesburg Medical Park (HMP) Management	Residents and staff at HMP Management Corporation	Five individuals were provided Positive Approach to Care Program certification by Teepa Snow and two individuals	Training	Per final report on the "Bedford Care Partners," the grant provided the resources to train and develop hundreds of staff and

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				dementia care training project. Onsite training attended August 10, 2017.	ment Corporation		became Virtual Dementia Tour facilitators. These trainers then trained 500 or more individuals at eight nursing facilities.		community members. Best practices were developed that continue to improve dementia care.
<b>Mississippi</b>	\$45,495.33	December 2016 – December 2019 (36 months)	Communication, Assessment, Relationships Equals Excellence (CAREs) Program	The CAREs program seeks to utilize non-pharmacological approaches to reduce antipsychotic, anti-anxiety, and hypnotic drug use, as well as reduce falls with major injuries in the 30-bed Medicare skilled nursing facility. Through this project, It's Never 2 Late (iN2L), an adaptive computer technology, will be purchased to help meet these goals.	Pike Community Care Center; Camellia Estates	Camellia Estates residents and family members	No data available	Direct Improvements to Quality of Care	Results pending
<b>Missis-</b>	\$87,779.00	March 15,	Diving	This project will	Mississippi	Residents	The project focuses	Training	Results pending

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<b>sippi</b>		2017 – December 31, 2019 (34 months)	Deeper on a Culture Change Journey	implement culture change and person-directed care through the utilization of the Eden Alternative principle in four nursing homes (involving approximately 1,000 employees).	Methodist Senior Services, Inc.	and staff at Methodist Senior Services.	on the culture change of dementia care and training on the latest techniques. It includes collaborative efforts of the facility staff, communities, and families of the elders.		
<b>Mississippi</b>	\$84,500.00	November 8, 2017 – November 1, 2019 (24 months)	Mississippi (MS) Care Center of DeKalb (MCCD)	Mississippi Care Center of DeKalb requested civil money penalty funds to implement the MS MCCD project by utilizing 60 hospitality televisions with personalized speaker systems and a smartbox television system with a maintenance plan. The purpose is to improve the quality of life and peace of mind of residents with the use of	Mississippi Care Center of DeKalb	Residents that reside at Mississippi Care Center of Dekalb	60 hospitality televisions with personalized speaker systems; a smartbox television system with a maintenance plan.	Direct Improvements to Quality of Life	Results pending



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				technology that includes an in-house television channel that broadcasts daily events, activities, and information pertaining to the facility. On site visit made May 24, 2018.					
<b>Mississippi</b>	\$187,441.00	March 31, 2015 – August 31, 2017 (29 months)	The Younger Adult in Long-Term Care (YALTC)	The applicant, The Society for Post-Acute and Long-Term Care Medicine (AMDA), requested civil money penalty funds to implement "The Younger Adult in the Long-Term Care Setting." Training was delivered using three vehicles: online, face to face, and virtually. Onsite training attended May 3, 2016 – May 4, 2016.	The Society for Post-Acute and Long-Term Care Medicine (AMDA)	The target audience was the interdisciplinary care team staff for younger adults in more than 2,600 long-term care facilities throughout Region IV	This project developed a curriculum and training program for clinical practitioners and staff.	Training	Six-month final summary: Trainings were held in Mississippi May 3 – 4, 2016; attended by 162 people, with positive evaluation responses. Professional continuing education units (CEUs) were provided.

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<b>North Carolina</b>	\$109,887.73	October 1, 2017 – September 30, 2019 (24 months)	Reducing Avoidable Hospitalizations Across the Continuum of Care	This project will assist Region IV states in reducing avoidable hospitalizations and educating residents, family members, staff, and community partners about best practices to reduce avoidable hospitalizations.	Florida Atlantic University	Certified nursing homes in North Carolina and community partners	Through this project, the following deliverables are expected: modification of Resident and Family Decision Guide; piloting the guide in seven of eight Region IV states; developing a video for nursing homes that explains the role of the decision guide in reducing avoidable hospitalizations; sending a complete package of Decision Guides and training materials to every skilled nursing and nursing facility, and providing the Decision Guide in different	Direct Improvements to Quality of Care	Advisory committee is meeting monthly, and progress has been made with updating the Decision Guide.

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							languages (i.e. Spanish, French, Chinese, Tagalog and Haitian Creole); developing webinars and conducting workshops to discuss best practices on how to reduce avoidable hospitalizations.		
<b>North Carolina</b>	\$24,002.00	January 1, 2017 – December 31, 2017 (12 months)	No data available	This project will repurpose the staff dining room on the Center's main hall into a dining room for residents residing on the 2 <sup>nd</sup> , 3 <sup>rd</sup> , 4 <sup>th</sup> , and 5 <sup>th</sup> floors.	Longleaf Neuro-Medical Treatment Center	Residents of Longleaf Neuro-Medical Treatment Center	As part of this project, all staff will receive training on the Dining Practice (by the Registered Dietitian and the Medical Director). Staff, residents and caregivers handling food shall receive training on hand washing, and the importance of "No Bare Hand Contact"	Direct Improvements to Quality of Care	The Verandah was only operational in the last quarter of the project. Residents' individual clinical outcomes were continuously monitored throughout the quarter. Although the facility did not meet its target goals for overall increased lunch intake and reduced falls, it did see improvements for

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							of ready-to-eat food. Staff will also ensure that all food and beverages served in the dining room are maintained at proper temperatures, and that evening and morning meals will occur within a 14-hour timespan. The project aims to achieve overall increased lunch intake and reduced falls.		several residents. Residents liked being able to select their meal, and resident satisfaction was high (even among residents who sporadically attended during the quarter).
<b>North Carolina</b>	\$20,787.47	October 15, 2016 – October 14, 2017 (12 months)	No data available	Through this project, a computer, printer, large screen TV, home theatre system, 40 iPads (and cases), and 60 headphones will be purchased. The equipment will be used to increase resident	Healthique Group, LLC: Winston-Salem Nursing and Rehabilitation	All residents of the Winston-Salem nursing home	The project is expected to increase resident socialization and access to computer technology.	Direct Improvements to Quality of Life	All targeted goals set by the facility were met. The facility saw an increase in both resident participation in activities, as well as the length of time in which an activity occurred. With the

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				access to computer technology, social media, and music, as well as to enhance group activities.					addition of new technology, average group activity participation grew by at least 25% and resident satisfaction increased to 90%. In addition, new technology has been incorporated into activity care plans for residents receiving psychiatric services, and social engagement increased overall.
<b>North Carolina</b>	\$32,310.00	October 1, 2016 – March 31, 2018 (18 months)	Healing Garden	This project aims to enhance an existing Healing Garden and create a more therapeutic outdoor environment for residents, family members, visitors, and staff.	Conover Nursing and Rehabilitation Center	Conover Nursing residents, family members, visitors, and staff	The Healing Garden will be utilized for resident activities and to increase socialization and relaxation for residents, family members, visitors, and staff.	Direct Improvements to Quality of Life	No data available

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<b>North Carolina</b>	\$9,425.51	May 1, 2017 – May 31, 2018 (13 months)	SuzyQ Food Cart Delivery System	This project aims to enhance resident dining, increase resident food choices, and decrease significant weight loss.	Cambridge Place	Cambridge Place nursing home residents	Deliverables include improved meal service and weight stability for all residents.	Direct Improvements to Quality of Care	No data available
<b>North Carolina</b>	\$23,773.06	May 1, 2017 – April 30, 2018 (12 months)	Technology Enrichment Grant	This project will provide a SMART television for all resident rooms; iPads for residents to have access to the Internet; and enhanced activities programming.	BT2 Inc. Skyland Care Center	Skyland Care Center nursing home residents, particularly those residents with an interest in connecting with family and friends via the Internet.	The program will provide residents with: improved technology and internet access; enhanced quality entertainment, games, puzzles, and email; and engagement for every user during their activities of daily living.	Direct Improvements to Quality of Life	Residents share that their environment is more homelike, and the equipment has enhanced their quality of life.
<b>North Carolina</b>	\$20,217.00	August 1, 2017 – July 31, 2018	It's Never Too Late (i2NL)	Provide iN2L, an adaptive computer technology, to residents.	Capital Nursing and	All residents of the nursing	Provide enhanced computer technology and access for	Direct Improvements to	No data available

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		(12 months)			Rehabilitation Center	home	residents. Increase resident, family, and staff satisfaction 10%; increase resident participation in facility activities by 10%.	Quality of Life	
<b>North Carolina</b>	\$23,116.00	August 1, 2017 – July 31, 2018 (12 months)	It's Never Too Late (i2NL)	Provide iN2L, an adaptive computer technology, to residents.	Woodhaven Nursing, Alzheimer's and Rehabilitation Center	All residents of the nursing home	Provide enhanced computer technology and access for residents. Increase resident, family, and staff satisfaction by 10%; increase resident participation in facility activities by 10%.	Direct Improvements to Quality of Life	No data available
<b>North Carolina</b>	\$25,495.00	September 1, 2017 – August 30, 2018 (12 months)	Seniors Staying Connected Project	Provide It's Never Too Late (iN2L), an adaptive computer technology, to residents.	East Carolina Rehab and Wellness	All residents of the nursing home	The project aims to improve quality of life, increase participation in activities, and increase resident satisfaction. Quarterly reports will be	Direct Improvements to Quality of Life	No data available

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							developed, which will include results of resident activity participation within the facility, as well as the percentage of healthcare staff who document iN2L usage on care plans.		
<b>North Carolina</b>	\$41,024.00	December 15, 2017 – December 14, 2018 (12 months)	Residents Engaged to Achieve Creative Heights	Utilize the It's Never 2 Late (iN2L) interactive and adaptive computer system to implement facility initiative "Residents Engaged to Achieve Creative Heights" (REACH). REACH's purpose is to improve gaps in current engagement and motivation of residents.	Clay County Health-care, LLC dba Clay County Care Center	Residents, staff and family members of participating facilities.	Increase resident activity participation by 10%; Increase Modified Barthel Index (MBI) assessment score by 30% from admission to discharge from therapy services for all residents; Increase resident satisfaction with the facility by 10%; elevate current services provided at facility; meet	Direct Improvements to Quality of Life	1. Increase in both resident participation in activities and the length of the time an activity occurs. 2. Resident satisfaction increased to 90% since addition of iN2L system. 3. Facility noticed a need to continue education with residents and plan days and times in the facility activity



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							residents' needs in a non-pharmacological way; more positive interaction between residents, staff, and families; greater job satisfaction for staff; and greater value in activity and therapy sessions.		calendars to provide education 1:1 with residents.
<b>North Carolina</b>	\$15,932.00	March 1, 2016 – February 28, 2017 (12 months)	Meaningful Music Project	This project will use iPods and iPads that are filled with individualized playlists and music related applications. The playlists tailor the music to meet the needs of each resident living in the memory care neighborhood. This project aims to reduce anti-anxiety medications reduce behaviors and increase resident	Hickory West: Trinity Ridge	Residents of the nursing home who are living with dementia	Quarterly reports with results of anti-anxiety medications, incidence of behaviors, and satisfaction measures.	Direct Improvements to Quality of Life	The project improved satisfaction and quality of life for residents living with dementia. Music was used as an essential tool in connecting with residents with dementia by helping to soothe anxiousness and agitation and engaging those residents who appear withdrawn or

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				satisfaction through meaningful activities.					despondent. As a result, the facility experienced a reduction in the use of antipsychotic medications.
<b>South Carolina</b>	\$85,600.60	January 1, 2017 – December 31, 2018 (24 months)	Reducing Avoidable Hospitalizations Across the Continuum of Care	To assist Region IV states in reducing avoidable hospitalizations and to educate residents, family members, staff, and community partners on best practices in reducing avoidable hospitalizations.	Florida Atlantic University	South Carolina certified nursing homes and community partners	Through this project, the following deliverables are expected: modification of Resident and Family Decision Guide; piloting the guide in seven of eight Region IV states; developing a video for nursing homes that explains the role of the Decision Guide in reducing avoidable hospitalizations; sending a complete package of Decision	Direct Improvements to Quality of Care	No data available

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							Guides and training materials to every skilled nursing and nursing facility, and providing the Decision Guide in different languages (i.e. Spanish, French, Chinese, Tagalog and Haitian Creole); developing webinars and conducting workshops to discuss best practices on how to reduce avoidable hospitalizations.		
<b>South Carolina</b>	\$101,0293.40	October 12, 2016 – October 11, 2019 (36 months)	Improving Individualized Care for Residents with Dementia	a) This project is focused on individualized dementia care. b) It will eliminate off-label antipsychotic medication use in a minimum of 75 South	75 South Carolina nursing homes; LeadingAge	No data available	No data available	No data available	Results pending

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				Carolina nursing homes. c) This will improve nursing home residents' overall quality of care and health.					
<b>South Carolina</b>	\$4,720.00	June 30, 2017 – October 3, 2019 (27 months)	Music & Memory Program	a) This program is designed to provide music for residents who are going through rehab, pain management, memory issues, etc. as a form of therapy from motivation to meditation. b) This funding will cover the initial cost of the program and funds will be used for training. c) This project is for the residents to have access to music that brings them joy and helps them reminisce on joyful memories.	Anchor Rehabilitation and Healthcare Center of Aiken	No data available	No data available	No data available	This event proved to be very successful. Engagement of residents within their project was very highly rated and still residents are continuing to show interest in the access to music in all areas. The mobility of iPods allows for residents, whether mobile or bed ridden, to listen and interact to music and other audio programming.
<b>South</b>	\$2,104.00	December	Nursing	a) The objectives for this	Oakhaven	No data	No data available	No data	An aquarium was

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<b>Carolina</b>		13, 2016 - December 12, 2017 (12 months)	Home Aquarium Project	<p>project include increasing social interaction, enhancing community, providing exercise, and reducing depression among residents.</p> <p>b) The project will achieve the atmosphere and environment that surrounds them to be interesting, pleasurable and vibrant. Aquariums can bring aesthetic to decorate the facility as well as in helping replicate a more soothing and relaxing environment.</p> <p>c) Aquariums help introduce conversation between residents and staff: stimulating the mind and curiosity of</p>	Nursing Center	available		available	<p>purchased and installed, as well as fish were purchased for the tank. The residents have enjoyed this system so far. This has showed to have increased residential engagement and provided another element for entertainment and involvement for the facility.</p>

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				views. The colors and motions of the fish can help reduce stress, anxiety, depression, disruptive behaviors, and so much more.					
<b>South Carolina</b>	\$2,556.00	December 7, 2016 – December 6, 2017 (12 months)	Morrell Nursing and Rehabilitation Center Aquarium	To purchase an aquarium and the supplies to maintain the aquarium; to implement therapeutic drumming circles.	Morrell Nursing and Rehabilitation Center	All residents of the nursing home	Deliverables include: purchase aquarium, as well as the supplies and fish; notify residents that the aquarium has been implemented in a centralized area; begin activities related to the aquarium. Modify the activities program to include therapeutic drumming circles. The drumming circles aim to increase social interaction, as well as to improve emotional expression.	Direct Improvements to Quality of Life	An aquarium was purchased and installed, as well as fish were purchased for the tank. This was well received by the residents, who were engaged by viewing, cleaning, caring for, and learning about the aquarium and fish.

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							The circles also provide exercise that focuses on improving gross and fine motor skills, particularly for residents with dementia.		
<b>South Carolina</b>	\$2,500.00	August 23, 2016 – August 22, 2017 (12 months)	Synopsis of Music & Memory	a) This program is designed to provide music for residents who are going through rehab, pain management, memory issues, etc. as a form of therapy from motivation to meditation. b) This funding will cover the initial cost of the program and funds will be used for training and receipt of 10 iPod shuffles and the purchasing of a laptop to run the program. c) This project is for the	Richard M. Campbell Veterans Nursing Home	No data available	No data available	No data available	Residents are continuing to show interest in the access to music in all areas. The ability of the iPods to play music anywhere brings residents joy because the music links them to many joyful memories.

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				residents to have access to music that brings them joy and helps them reminisce on joyful memories.					
<b>South Carolina</b>	\$6,823.04	January 1, 2017 – December 31, 2017 (12 months)	South Carolina Spirit of Caring Conference	<p>a) This project is designed to encourage, recognize, and educate skilled nursing facilities.</p> <p>b) The nursing homes are sharing their specific best practices.</p> <p>c) It will benefit and enhance the well-being of nursing home residents by giving the staff of skilled nursing facilities access to many examples of effective techniques for improving their services.</p>	South Carolina Spirit of Caring	No data available	No data available	No data available	<p>This event marked the 20th anniversary of the state of South Carolina Spirit of Caring. Attendance for the Spirit of Caring Event was fair, as there were other competing events the same day. There were 13 Best Practice presentations. Special Best Practice books were printed for the attendees. The event yielded conversations, idea exchanges, and collaboration for the betterment of residents.</p>



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<b>South Carolina</b>	\$1,333,343.00	July 1, 2015 – June 30, 2018 (36 months)	University of Louisville Research Foundation, Inc.	a) This project is designed to improve the quality of care in nursing homes by increasing the knowledge and skills of healthcare professions. b) The project will educate the nursing home staff on twenty-one clinical conditions helping with the quality of care in the nursing home. c) Staff will increase their knowledge and skills in the delivery of health care of long-term care residents.	University of Louisville	No data available	No data available	No data available	Continuing education exams have been successfully completed, and from the shared outcomes, nursing home professionals received additional education and skillset.
<b>Tennessee</b>	\$392,543.00	July 1, 2016 – June 30, 2019 (36 months)	Reframing Dementia through Person-Directed Practices	The goal is to support the continued reduction of antipsychotic use in Tennessee nursing homes to lower than the national average of	Tennessee Edenizing Foundation d/b/a	The project engaged all TN nursing homes to participate in the Eden	Distribute the Reframing Dementia Training Kit to all project teams, which will provide tools and training for employees	Training	Results pending

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				18.7% (2015Q1) and to help sustain that reduction.	Tennessee Eden Alternative Coalition	Alternative Reframing Dementia project	and family members to shift perceptions of dementia care (F-241) and strengthen well-being (F-309). Engage participating nursing home employees (in Change Agent Teams of 3-4 per home) in the Train the Change Agent training, who then deliver the Reframing Dementia workshops in their respective organizations, and apply the tools taught in daily operations. Nursing home employees, both Change Agent Team members and those in a designated		

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							implementation sample group, will experience an overall 5% shift toward person-directed perceptions and approaches to dementia care that ultimately support the reduction of antipsychotic use. Empower participating organizations to apply new approaches and work toward specific benchmarks of progress within the designated sample group. At least half of the participating organizations will meet 50% of the suggested implementation		

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							benchmarks		
<b>Tennessee</b>	\$103,400.80	June 1, 2017 – September 30, 2019 (25 months)	Dissemination of Resident and Family Decision Guide, Go to the Hospital or Stay Here?	Implement "The Decision Guide: Go to the Hospital or Stay Here" in Regional IV nursing facilities in order to assist nursing home residents and families make optimal decisions concerning hospitalization or treatment in the nursing home (NH).	Florida Atlantic University	The project will engage all Tennessee nursing homes for in person and online training.	Project deliverables include the development of videos, edited Guides and tri-folds, trainings/workshops, and Guide implementation. Once implemented, a Quality Improvement Review tool will be completed on every hospital that occurs within a three-month Guide implementation window. Comparisons will be done for the 30-day period prior to implementation of the Guide and 30 days following the 3-month evaluation period to calculate the re-admission rates for	Direct Improvements to Quality of Life; Training	Results pending

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							the implementation period.		

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Indiana	\$600,000.00	August 1, 2016 – July 31, 2018 (24 months)	Music in Long Term Care	Program to introduce music into long-term care facilities and the care planning of residents to reduce pharmacologic interventions; reduction in the dosage of prescribed medication administered per resident; reduction in the amount of negative behaviors; reduction in the number of falls; increased level of resident engagement and quality of life.	Butler University (Project Coordinator)	Five to seven nursing homes will participate in the project. Approximately 200 residents will benefit by direct participation. Butler University students will participate and benefit from awareness of aging and dementia, as well as long-term care.	Develop music in long-term care project; develop protocols, guidelines, and timelines for implementation; create data collection tools; identify 5-7 facilities to participate; complete project; develop train the trainer program to be utilized by other groups; develop measurable outcomes and collect data to measure outcomes.	Direct Improvements to Quality of Life	No data available
Indiana	\$75,000.00	May 1,	Dementia	Educate nursing home	University of	12 nursing	Introduce the PAC	Training	22 nursing home

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		2016 – October 31, 2017 (18 months)	Care in Southwest Indiana	staff on dementia care strategies and techniques to improve quality of care and quality of life for residents; identify person-centered care approaches to decrease behavioral issues, falls, abuse, and anti-psychotic drug use; evaluate the “Positive Approach to Care” (PAC) model for potential statewide expansion.	Southern Indiana Center for Healthy Aging and Wellness; Teepa Snow, developer of “Positive Approach to Care”	homes in Southwest Indiana and their residents	model at 8 nursing homes in Southwest Indiana; complete train the trainer for 16 facility staff. Host a kickoff meeting, provide eight hours of online video training, conduct two days of in-person training, conduct workshop on lesson plan development, conduct eight in-service classes at each facility for at least 30 staff, provide three hours of telephone support, identify outcome and process measures, and collect data in order to create a Quality Assurance and Performance		staff were certified as a PAC Certified Independent Trainer or as a PAC Certified Independent Coach. 783 nursing home staff participated.

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							Improvement (QAPI) plan.		
Indiana	\$600,000.00	December 1, 2015 – November 30, 2017 (24 months)	Leadership Conference	Bi-annual leadership conferences to conduct training and promote Centers for Medicare & Medicaid Services initiatives such as GPRP pressure ulcer initiative, care coordination, dementia care, and healthcare associated infections. Improve awareness of healthcare quality issues in long-term care, increase participation in healthcare quality improvement projects addressing significant healthcare quality issues, and improve quality of life and quality of care for nursing home residents related to	Brookshire Management (Event Planner); Indiana Convention Center	All 554 nursing homes are invited to attend. Approximately 300-350 nursing homes attend each conference, along with health care quality organizations, provider organizations, consumer organizations, and long-term care ombudsman.	Conduct up to four conferences over a two- year period - hosting up to 1,300 attendees each. Specific to conference topics, the Indiana State Department of Health (ISDH) will track the following indicators: number of statewide deficiencies; Indiana's rank regarding the frequency of topic deficiency; number of facilities that participate in state projects related to conference topics; if possible, identify rates of topic deficiencies	Training	Health Care Quality Leadership Conference on October 22, 2015 focused on investigative strategies for addressing abuse. The Conference registration was 864 participants. On September 13, 2016, the ISDH hosted a Leadership Conference on infection control and prevention. The Conference registration was 804. On March 8, 2017, the ISDH hosted a Leadership



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				the topics of the conferences.			through Minimum Data Set (MDS) data and other sources. ISDH will also track the number of facilities that attend, number of statewide immediate jeopardy level deficiencies on surveys, percent of providers cited at immediate jeopardy level related to topic, number of statewide actual harm level deficiencies cited on survey, and percent of providers cited at actual harm related to topics.		Conference on dementia care. The conference featured Teepa Snow and her Positive Approach to Care. The Conference registration was 1,010.
<b>Indiana</b>	\$400,000.00	February 1, 2017 – January 31, 2019	Indiana Nursing Home Advanced	The purpose of the project is to implement a program to improve the education of healthcare	University of Indianapolis, Center for Aging and	Courses will be available to all Indiana nursing	Indiana State Department of Health will offer four advanced certification	Training	No data available.

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		(24 months)	Education Project	professionals working in long-term care facilities through course development focused on a lack of qualifications in important geriatric care areas, such as healthcare quality improvement, infection prevention, wound care, and Alzheimer's/dementia care.	Community (Project Coordinator) ; Alzheimer's Association of Greater Indiana; Association of Professionals in Infection Control and Epidemiology; Indiana University School of Medicine's Department of Gerontology; Wound Care Education Institute	homes, as well as to health care quality organization-s and education programs.	level education courses to approximately 25-50 participants for each course, to include the training materials in the following areas: healthcare quality improvement, infection prevention, wound care, and Alzheimer's/dementia care.		

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Indiana	\$600,000.00	December 1, 2016 – November 30, 2018 (24 months)	Regional Collaborative Project Expansion	Develop regional collaborative groups that are locally-based to work on quality improvement efforts within the nursing homes in their communities. Each regional collaborative will be responsible for developing and implementing at least two quality improvement projects addressing a quality of care need as identified through a Quality Assurance and Performance Improvement (QAPI) process utilizing QAPI principles.	University of Indianapolis Center for Aging and Community (Project Coordinator) ; nine long term care regional collaborative projects	Each of the nine regional collaborative projects includes 20-25 nursing homes. Projects are implemented to improve quality of care or quality of life for residents.	Support the established 7 regional collaboratives and expand to establish 2-3 new collaborative groups. Collaboratives will: 1. Develop at least two quality improvement projects to address quality of care issues determined through a needs assessment conducted in their region. 2. Develop a QAPI facility plan template that can be adapted by facilities. 3. Develop at least 3 QAPI project plan templates that can be adopted by nursing homes.	Direct Improvements to Quality of Care	No data available
Indiana	\$500,000.00	April 15,	Expressive	An effective expressive	University of	Participating	The Expressive Arts	Training	No data available

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		2016 – April 14, 2018 (24 months)	Arts in Long Term Care	arts program results in increased engagement of residents. This project will result in an Expressive Arts Course and an Expressive Arts Train-the-Trainer Course. The project will focus on the use of arts through movement, drawing, painting, sculpting, writing, music, or acting as interventions or approaches to improve quality of life for residents.	Indianapolis Center for Aging and Community (Project Coordinator)	nursing homes and their residents; health care quality organizations participating in the courses and included in their activities	Course will be offered statewide six times. The Expressive Arts Train-the-Trainer Course will be offered twice at different locations in the state. A toolkit will be created to provide a resource for implementation within long-term care facilities.		
<b>Indiana</b>	\$600,000.00	May 1, 2016 – April 30, 2018 (24 months)	Polypharmacy Reduction in Long Term Care	The project is intended to pilot an approach to polypharmacy reduction. The project will reduce unnecessary, non-beneficial, and harmful drugs resulting in improved quality of life,	Purdue University School of Nursing (Project Coordinator)	About 21 nursing homes will participate in the project, benefiting their residents	The average number of prescribed medications in nursing homes is 9-15 drugs per resident. The project will safely and effectively reduce the average number	Direct Improvements to Quality of Care	No data available

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				improved quality of care, and reduced health care costs.			of medications per resident, including a reduction of antipsychotic drug use.		
Indiana	\$332,360.00	October 1, 2017 – September 30, 2020 (36 months)	Conversations on Advanced Care Planning in Nursing Homes	The project will pilot improvements to advance care planning in nursing homes focusing on person-directed culture, resident quality of life, and resident choice. The most important component of advance care planning is the initial conversation about one's health care wishes. While not ideal, advance care planning tends to occur when a significant medical event occurs that requires health care decisions.	University of Southern Indiana (Project Coordinator) ; Respecting Choices	15 nursing homes will participate, benefiting participating residents and their families	The Respecting Choices Last Steps Model will be implemented in 15 nursing homes. 25 individuals will be trained as facilitators per year, for a total of 75 facilitators. The project will create a model for implementing advance care planning in a nursing home. The project will study whether quality advance care planning reduces the number of	Direct Improvements to Quality of Life	Results pending

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							unnecessary hospitalizations.		
Indiana	\$70,000.00	September 2016 – September 2018 (24 months)	Development and Education of Family Councils	The goal of this project is to assist all nursing homes in Baltimore and Howard County, Maryland in the development and education of resident councils by the end of calendar year 2018. Objectives include: By September 2017, we will have assisted three nursing home facilities (20%) (15 facilities currently lack a resident council) develop a resident council. By September 2018, we will offer education on the following topics through education materials and in-person presentations	Long-Term Care Facility Engagement Council of Central Maryland	Nursing homes in Baltimore and Howard County, Maryland. There are 15 facilities that lack a resident council and 15 that already have a resident council.	Outreach letters to resident councils and nursing homes. Advertisements for resident councils. Recognition of participation letters by resident councils. Education materials. Confirmation of resident council initiation.	Resident or Family Council	By September 2017, we assisted four nursing home facilities develop resident councils. Two resident councils meet bi-weekly, and two will meet monthly. By September 2018, 80% of resident councils (12) received education on the following topics through education materials and in-person presentations. Discharge Rights, Infection Control, and Culture Change

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				to 75% of resident councils (at least 11, as there are 15 current resident councils). Discharge Rights, Infection Control, and Culture Change					
Michigan	\$1,135,150.00	March 1, 2015 - February 28, 2018 (24 months)	Health Care Association of Michigan (HCAM)	The purpose of this project was to develop and improve the clinical assessment and critical thinking of the licensed nurses serving the long-term care population through a reliable training process, using the train-the-trainer model.	HCAM	This project will improve the quality of life for nursing home residents	Develop a quality improvement training model to change the culture of nursing home staff.	Training	No data available
Michigan	\$300,000.00	July 1, 2016 – December 31, 2017 (18 months)	Holland Home Alzheimer's Simulation	Development of an Alzheimer's simulation and training program to drive culture change and training for nursing home staff to better care for patients with dementia-	Holland Home	Holland Home staff	Provide training to all current and incoming staff whose care roles bring them into regular contact with individuals with dementia. Training	Training	Since July 2016, more than 800 employees and 25 caregivers have gone through this training. The overall results were not only a

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				related issues.			includes dementia simulation and Teepa Snow's "Positive Approach to Care." Teepa Snow will design and develop a series of core training materials. Two staff members will be trained as facilitators for simulation and as trainers for sustainability.		positive learning experience, but also helped staff to have a different outlook towards the consumers. There is a better understanding of what each consumer has to go through on a daily basis and the many challenges they face.
Michigan	\$329,916.00	May 1, 2016 – April 30, 2019 (36 months)	Western Michigan University Behavioral Consultation and Services	To provide behavioral consultation and services to persons with cognitive impairment at skilled nursing facilities in Michigan. To assist these individuals to age in place, reduce the use of medication to manage behavioral and psychological symptoms	Center for Gerontology at Western Michigan University, Kalamazoo; Heritage Community of Kalamazoo; Harold &	No data available	Conduct intake assessments; conduct Functional Behavioral Assessment (one to four weeks), to include interviewing caregivers, direct observation, and manipulation of environmental variables to develop	Direct Improvements to Quality of Care	Results pending



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				of dementia, improve staff knowledge and abilities, and develop modules that can be adopted by other skilled nursing facilities.	Grace Upjohn Care & Rehabilitation Center		treatment plan; develop and evaluate function-based interventions (three to eight weeks); conduct training for staff and caregivers on interventions; create training modules.		
<b>Minnesota</b>	\$308,000.00	July 2016 – July 2019 (36 months)	Music and Memory	Provide Minnesota nursing homes funding to implement their own Music & Memory type programming. To implement many Music & Memory type programs in nursing facilities across the state of Minnesota, through the issuance of mini grants.	Minnesota Department of Human Services (MDHS)	29 nursing facilities in the State of Minnesota have received monies to train facility staff and implement internal music and memory programs. For a full list	Many grant awards are anticipated; however, since this is a voluntary program, the total number of nursing facilities that will be awarded grants to implement programs is not known at this time.	Direct Improvements to Quality of Life	To date, 29 nursing facilities have implemented programs. An additional 34 facilities have been awarded grants but have not yet implemented programs.

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						please contact MDHS.			
<b>Minnesota</b>	\$90,075.00	June 2017 - June 2019 (24 months)	Joint Provider and Surveyor Training for Revised Requirements of Participation	To provide nursing facility leaders the knowledge needed to implement the revised regulations through training held at statewide locations.	Minnesota Department of Health; Minnesota Department of Human Services; work carried out through subject matter expert speakers and individuals/entities involved in the logistics of holding training sessions	Nursing home facility staff who attend the training	Providers attending the training will have a better understanding of the revised requirements of participation.	Training	One all-day training session was repeated at four locations throughout the state in November 2017. 800 nursing home staff (representing approximately 250 nursing facilities), 17 ombudsman staff, and 120 survey agency staff attended. Topics covered in the first round of training included: new survey process, facility-wide assessment, staff competency and training, quality

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					statewide				assurance and program improvement (QAPI), behavioral health, and abuse reporting.
Ohio	\$507,720.00	April 1, 2016 – December 31, 2018 (33 months)	Wound Care Certification	a) The purpose of this project is to provide improved wound care to nursing home residents. b) Nurses will be trained and become wound care certified. Participating nursing homes' performance on the Centers for Medicare & Medicaid Services (CMS) pressure ulcer quality measure (QM) will improve for both long and short stay residents. c) This project will benefit nursing home residents by improving the quality	Ohio Health Care Association	100-200 nursing home facilities throughout Ohio	5-15% improvement in the incidence of pressure injuries in long-stay residents, with a corresponding improvement in the CMS pressure injury QM; wound care certification for up to 200 nurses; 11 quarterly progress reports and a final report at the conclusion of the project.	Training	Group A is the bottom 25% of nursing homes according to the CMS pressure injury QM. Their rates decreased from 9.55% to 4.1% during the project period. Group B is the upper 75% of nursing homes, according to the pressure injury QM. This group's rate decreased from 4.1% to 3.45%. The results of the project

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				of the wound care they receive and by improving their quality of life.					strongly suggest that having a wound certified nurse helps nursing facilities that are low performers on the pressure injury QM reduce the number of pressure injuries. Sample size for data analysis purposes was smaller than anticipated due to a high attrition rate of participating nursing facilities, including both facilities whose nurses did not pass the certification exam and facilities that did not retain their certified nurses. Recommendations for future projects

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									include increasing the initial number of nursing facilities to account for the rate of attrition.
Ohio	\$1,005,662.00	July 1, 2016 – June 30, 2019 (36 months)	Preferences of Everyday Living Inventory (PELI)	a) The purpose of this project is to provide person-centered care by honoring each individual's everyday preferences. b) The project will guide providers on ways of integrating the PELI into daily operational practices, provide education and training to providers using preference assessment data to guide care, and evaluate remaining barriers to preference-based care implementation and provide solutions for long	Miami University; Scripps Gerontology Center	This project has the potential to benefit all 960 nursing facilities in Ohio (if all choose to participate in the project).	Education and training materials for all ranges of nursing facility staff, including newsletters, webinars, and training videos with guides; process for integrating preference data into quarterly care planning meetings; a variety of technological solutions for collecting, managing, and tracking data in order to help facilities sustain preference-based care over time;	Direct Improvements to Quality of Care	Results pending

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				term sustainability. c) Residents will benefit by experiencing higher overall satisfaction with their care in the facility and experiencing an improved quality of life.			an online discussion board to allow facilities to post questions and successes in providing preference-based care; 12 quarterly progress reports, and a final report at the conclusion of the project.		
Ohio	\$781,716.00	July 1, 2016 – June 30, 2019 (36 months)	Opening Minds Through Art (OMA)	a) The purpose of this project is to implement custom art making programs for nursing home residents with dementia to provide opportunities for positive self-expression and social engagement. b) The project aims to help improve the quality of interaction with and care	Miami University; Scripps Gerontology Center	Staff and residents at approximately 102 Ohio nursing facilities	Online video-based training modules; assessment of online training compared to in-person training; post-training consultation and support, including online support; certification as an OMA facility upon completion of one	Training	Results pending

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				of people with dementia by using in-person and online training for staff and volunteers. c) Residents will benefit from improved social interactions with facility staff and volunteers, and experience enhanced quality of life.			year of OMA programming; conferences in years two and three to share best practices among those implementing the program; satisfaction questionnaires given to conference attendees; 12 quarterly progress reports and a final report at the conclusion of the project.		
Ohio	\$603,310.00	January 1, 2017 – June 30, 2019 (30 months)	Antipsychotic Use Reduction	a) The purpose of this project is to reduce problematic behaviors exhibited by nursing home residents with dementia and dementia	WACON Solutions, Inc.	This project will benefit approximately 40 nursing facilities in Northwest	Up to 80 interdisciplinary staff certified in the Reality Comprehension Clock Test (RCCT) cognitive assessment tool;	Training	Results pending

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				related conditions through means other than medication. b) This project aims to teach non-medication behavior management and mentoring techniques, and the creation of individualized plans of care that focus on non-medication management of behaviors. The project will also improve performance on the Centers for Medicare & Medicaid Services (CMS) antipsychotic quality measure. c) Residents will benefit by experiencing reduced side effects from antipsychotic medications, thereby improving quality of life.		Ohio.	decrease in the use of antipsychotic medications for residents with dementia and dementia-related conditions; improved performance on the CMS antipsychotics quality measure; ten quarterly progress reports and a final report at the conclusion of the project.		



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Ohio	\$73,545.02	April 1, 2017 – May 31, 2019 (26 months)	Focused Nurse Education	a) The purpose of the project is to reduce unnecessary hospitalizations and preventable emergency room visits for nursing home residents. b) This project aims to provide a focused curriculum and geriatric specific training to registered nurses, licensed practical nurses, and state tested nurse assistants (STNAs) that will increase their ability to communicate accurately, effectively and confidently regarding the health conditions of the residents in their facilities, thereby reducing unnecessary hospitalizations and emergency room visits.	LeadingAge Ohio; Optimized Care Network (OCN); The Ohio State University Office of Geriatrics and Interprofessional Aging Studies; The Ohio State University College of Nursing; Silver Screen Video Productions	Three Ohio nursing facilities in Montgomery, Logan, and Lorain counties: Bethany Village (Dayton), Green Hills Retirement Community (West Liberty), and Kendal at Oberlin (Oberlin)	This project is expected to reduce hospital readmission rates by a combined 20% and reduce preventable emergency room visits by a combined 10% for the following seven health conditions: congestive heart failure, pressure injuries, pneumonia, chronic obstructive pulmonary disease, diabetes, stroke, and urinary tract infections. This project is also expected to develop geriatric-specific curriculum, video training modules, pre- and post-tests,	Training	Results pending

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				c) Residents who can be treated in the nursing home rather than in the hospital or emergency room will avoid transfer trauma and the accompanying disorientation.			certificate of completion, nine quarterly progress reports, and a final report at the conclusion of the project.		
Ohio	\$2,000,242.50	April 1, 2017 – April 30, 2019 (25 months)	Person-Centered Staff Engagement	a) The purpose of this project is to engage staff in person centered care practices to improve the quality of resident care and life. b) Twelve regional ombudsman programs in the state will be engaged in nursing home Quality Assurance Performance Improvement (QAPI) efforts and will carry lessons learned into future complaint handling efforts. A statewide	State Long-Term Care Ombudsman	Approximately 100 nursing facilities throughout Ohio	Expectations include a 10% reduction in citations issued by the Ohio Department of Health, a 10% reduction in ombudsman-verified complaints, a 10% improvement in staff stability, four semi-annual progress reports, and a final report at the conclusion of the project.	Training	Results pending

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				Resident Council Coalition, resident interview committees, and staff recognition programs will be launched. c) Residents will benefit from increased person-centered care, thereby improving resident satisfaction and an improved quality of life.					
<b>Ohio</b>	\$726,008.00	April 15, 2017 – June 30, 2019 (27 months)	LifeBio	a) The purpose of this project is to enhance person-centered care in nursing facilities. b) The project will develop a Life Story Booklet and Life Story Summary page for each resident, provide staff with training tools, and provide a monthly webinar and bimonthly site visits for technical	Ohio State University, Ohio Colleges of Medicine, Government Resource Center (GRC); Benjamin Rose Institute on	Approximate-ly 30 nursing facilities in Northeast Ohio	Approximately 830 LifeBio Story Booklets and Life Story Summaries, training materials for staff and volunteers, monthly webinars to provide technical assistance, increased resident and family satisfaction with care (particularly regarding care	Direct Improvements to Quality of Care	Results pending

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				assistance. c) The LifeBio Story Booklet and Summary page encourages staff and visitors to engage with residents about their life histories, including families, notable life events, hobbies, interests, personal accomplishments, work, and preferences for care-related tasks.	Aging (BRIA); Universal Healthcare Action Network (UHCAN)		preferences), a reduction in the use of antipsychotic medications, nine quarterly progress reports, and a final report at the conclusion of the project.		
Ohio	\$128,240.00	July 1, 2017 – June 30, 2018 (12 months)	CARES® Dementia Training	a) The purpose of this project is to provide person-centered dementia care to nursing facility residents. b) This project will use the CARES Dementia Basics Online Training program to train staff, who can then earn the essentialZ certificate. The project	OhioHealth Care Association (OHCA)	150 nursing facilities throughout Ohio. Enrollment offered first to facilities in the bottom 25% (as measured by the Ohio	The project will deliver 50 one-year subscriptions to the CARES Dementia Basics Online Training Program. Facilities will have at least 25% of their staff complete the training. At least one staff member at each	Training	OHCA recruited 150 nursing homes for this project. The timeframes for the Resident Satisfaction Survey did not line up with the timing of the CARES training program, and the questions on the

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				aims to increase scores on the Ohio Department of Aging's Nursing Home Resident Satisfaction Survey - Overall Resident Satisfaction Results and have a minimum of 25% of staff complete the online training. c) The project will benefit residents by giving direct care staff greater skills and knowledge with which to provide more person-centered care to residents with dementia and dementia-related conditions.		Department of Aging's 2015 Nursing Home Resident Satisfaction Survey)	participating facility will earn the essentiALZ certification. Project aims to improve scores on the Ohio Department of Aging's Nursing Home Resident Satisfaction Survey and will develop four quarterly progress reports and a final report at the conclusion of the project.		survey changed between 2015 and 2017, so the results were not comparable, even if the timeframes corresponded with the timeframes of the project. As a result, the median resident satisfaction score declined by 7.375 points between 2015 and 2017, from 84.19 to 76.815. Because of the inadequacy of resident satisfaction as an outcome measure, OHCA supplemented it with the Centers for Medicare & Medicaid Services quality

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									measure for long stay antipsychotic use. The median change in this measure among the 40 nursing homes that met the 25% training goal was an improvement of 1.22 percentage points.
Ohio	\$216,220.00	August 1, 2017 – June 30, 2019 (23 months)	Telehealth	a) The purpose of this project is to reduce hospital admissions and emergency department visits by providing telemedicine in two nursing homes located in rural areas of Ohio. b) One nursing home will establish an on-site telemedicine clinic and the other will utilize a telemedicine mobile cart. The project will track care	LeadingAge Ohio; Optimized Care Network	Two rural Ohio nursing facilities: Green Hills Community (located in Logan County) and Ohio Eastern Star Home (located in Knox County)	Deliver on-site clinic (CareSpace) at Green Hills Community, introduce a telemedicine cart at Ohio Eastern Star Home, reduce emergency room visits by 10%, reduce hospital admission and readmissions by 10%, and produce eight quarterly progress reports, and	Direct Improvements to Quality of Care	Results pending

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				coordination for residents at the two facilities who experience congestive heart failure, congestive obstructive pulmonary disease, pneumonia, or stroke to demonstrate the benefits of care coordination strategies through telemedicine. c) Residents can benefit from more timely responses by caregivers, leading to higher levels of function and increased quality of life. Telemedicine has been found to be associated with significant reductions in mortality, reduced hospital admissions, re-admissions, length of stay, and emergency department visits.			a final report at the conclusion of the project.		

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Ohio	\$7,022.34	May 9, 2017 – May 9, 2018 (12 months)	Pine Kirk Relocation	a) The purpose of this project is to move the belongings of relocated residents of Pine Kirk nursing home in the aftermath of a crisis event. b) Professional company will move resident's belongings to their new locations at other nursing homes and will move belongings back to Pine Kirk for those residents who wish to return. c) Residents are able to have their possessions moved in a safe, timely, and dignified manner.	Pine Kirk nursing home; Mathis Moving & Storage Co.	Pine Kirk nursing facility residents (Kirkersville, Ohio)	Move resident belongings for 23 residents from Pine Kirk to receiving facilities, relocate residents who choose to do so from receiving facilities back to Pine Kirk via van or ambulance. Move these residents' belongings from receiving facilities back to Pine Kirk.	Resident Relocation	On May 6, 2017, \$3,409.60 in relocation expenses was incurred by Mathis Moving & Storage to move the belongings of 20 residents from Pine Kirk to other Medicaid certified nursing facilities where those residents had relocated. On July 14, 2017, an additional \$2,909.70 was incurred by Mathis Moving & Storage to move the belongings of six residents from Pine Kirk to other facilities where those residents were



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									relocated. On May 8 and May 9, 2018, \$703.04 was incurred by Pine Kirk to move the belongings of 5 residents back to the Pine Kirk facility. The total relocation expenses for the entire project were \$7,022.34.
Wisconsin	\$7,000.00	January 2017 – December 2017 (12 months)	Intergenerational Program	Provide meaningful activities, educational opportunities, and innovative programming for grade school students, high school students, and nursing home residents to help build intergenerational relationships.	Good Samaritan Society-Lodi; School District of Lodi; other Wisconsin nursing homes that choose to implement the	Residents of the nursing home and grade school and high school students	The after-school program will include programs and special events where students and residents will foster relationships using prepared activities. These activities will develop a social connection between students and	Direct Improvements to Quality of Life	Final Report <a href="https://www.dhs.wisconsin.gov/regulations/qai/f01593-5-31-2018.pdf">https://www.dhs.wisconsin.gov/regulations/qai/f01593-5-31-2018.pdf</a>

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					Intergenerational Program using the project manual		residents; establish positive relationships, and respect for another generation. The program pays for transportation for students; supplies for activities; and the development of a program manual for use by other nursing homes to replicate the program. The project will be evaluated using satisfaction surveys developed for residents, students, family members, and nursing home staff.		
<b>Wisconsin</b>	\$59,250.00	August 2016 – August 2019 (36 months)	Infection Prevention and Control Training for Health Care	Provide training for infection prevention and control in nursing homes.	Department of Health Services, Wisconsin Healthcare-	Facility staff who participate in the training	The project will develop an educational program to address how antimicrobial	Direct Improvements to Quality of Care	Results pending

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			Professionals Working in Nursing Homes		Associated Infections in Long-Term Care Coalition		stewardship, outbreak identification and control, and surveillance relate to infection control and prevention. The project is expected to help reduce infection in nursing home residents and improve overall quality of care.		
<b>Wisconsin</b>	\$50,000.00	July 1, 2016 – December 31, 2018 (30 Months)	Dementia Training	The Wisconsin Department of Health Services will provide free dementia care training for nursing home staff to increase competency in the areas of Dementia, Crisis Response and Challenging Behaviors.	Wisconsin Department of Health Services	Residents with dementia will be cared for by staff who have a good understanding of their needs and abilities. Training will be available for all staff	Students who complete the training will be given a training certificate and their names will be listed on a registry that will allow for portability from one facility to another facility. The training will be evaluated by the student and their supervisor to	Training	No data available

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						that has contact and interaction with a resident with dementia including nurse aides, nurses, activity staff, and social workers, dietary and housekeeping staff, etc.	determine if the training was effective and helped them complete their job duties.		
<b>Wisconsin</b>	\$58,300.00	February 1, 2017 – January 31, 2018 (12 months)	Noah's Landing Program	Establish a program to enhance quality of life by encouraging resident relationships with pets.	Lutheran Homes of Oshkosh, Inc.	This project will enhance the lives of nursing home residents by making pets available as a part of the	Introduce dogs and cats into the facility and into nontraditional therapy.	Direct Improvements to Quality of Life	No data available

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						nursing home environment and by encouraging interaction with animals.			
Wisconsin	\$25,000.00	November 1, 2016 – October 1, 2018 (23 months)	Social Media and Brochure Project	Statewide campaign to educate nursing home staff of the potential for violations of resident rights and caregiver misconduct by using handheld devices.	Wisconsin Department of Health Services	This project will benefit nursing home residents and facility staff in Wisconsin.	Each nursing home will receive: two videos for staff training, two laminated, international standard sized large posters (to post in break rooms), and brochures for employees to receive when they are hired and at ongoing training events. Reduce the number of misconduct incidents related to sharing photos or videos of	Training	No data available

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							residents on social media.		
Wisconsin	\$40,141.00	January 2017 – December 31, 2017 (12 Months)	The SNOEZ-ELEN Room	Provide a SNOEZELEN Multi-Sensory Environment room to offer residents with Alzheimer's disease and dementia a relaxing place to stimulate their senses through tactile, olfactory and visual stimuli and reduce distress. Atrium Post-Acute Care is contracting with the University of Wisconsin Oshkosh Center for Career Development to conduct an evaluation to measure the impact on the well-being of residents using the multi-sensory environment room.	Atrium Post-Acute Care of Little Chute	Residents of the nursing home; University of Wisconsin Oshkosh Center for Career Development	Residents of the nursing home will benefit from the tactile, olfactory and visual stimulation and a sense of calm and well-being.	Direct Improvements to Quality of Life	Final Report <a href="https://www.dhs.wisconsin.gov/regulations/qai/f01593-12-1-15.pdf">https://www.dhs.wisconsin.gov/regulations/qai/f01593-12-1-15.pdf</a>
Wisconsin	\$5,000.00	February 15, 2017 –	Fitbits to Monitor	This project will use Fitbits to help nursing	Brewster Village	The project will assist in	The project will help distinguish fall	Direct Improvements	No data available

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		February 14, 2018 (12 months)	Sleep/Wake Patterns	staff assess sleep patterns (with minimal disruption to residents).		the health and sleep quality of nursing home residents; nursing home staff	patterns and assist with medication adjustment for residents based on their sleep patterns.	to Quality of Care	
<b>Wisconsin</b>	\$192,200.00	April 1, 2017 – March 31, 2019 (24 months)	Statewide Expansion of the Student Volunteer Program	a) This program connects high school and college student volunteers with a local nursing home certified by Music & Memory to assist in implementation and continuity of the Music & Memory program. b) Residents benefit from increased access to personalized music through the extra set of hands provided by students, enhanced socialization	Music & Memory, Inc.	All participating Wisconsin nursing homes certified by Music & Memory	Reduced reliance on antipsychotic and anti-anxiety medication, reduced agitation, and improved quality of life for participating residents is anticipated. Overall, residents will improve their social environment and lifestyle.	Direct Improvements to Quality of Care	Results pending

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				opportunities, and a variety in daily routine. Reduced reliance on anti-psychotic and anti-anxiety medication, reduced agitation, and improved quality of life is also anticipated. c) Overall, residents will improve their social environment and lifestyle.					
Wisconsin	\$29,300.00	August 15, 2017 – August 14, 2018 (12 months)	Leadership & Systems Implementation 101 Workshop Program	The Wisconsin Director of Nursing Council will provide 7 day-long workshops for teams of Nursing Home Administrators and Directors of Nursing to focus on developing leadership skills, principles of systems implementation, and systems maintenance.	Wisconsin Director of Nursing Council-Education Forum	This project will help participating nursing homes improve performance and quality care for nursing home residents.	The project will provide education and interactive guidance regarding leadership skills, principles of systems implementation and systems maintenance, and will include development of an action plan for process improvement in their nursing	Direct Improvements to Quality of Care	No data available



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							homes.		
<b>Wisconsin</b>	\$46,700.00	August 1, 2017 – March 31, 2019 (20 months)	Alzheimer's Poetry Project Program	Over a three-month period, 20 nursing homes will be trained in the methods and techniques of the Alzheimer's Poetry Project (APP). This is a unique and innovative program that uses the power of the spoken word and builds on the long tradition of poetry as an oral art form. This project will allow for nursing home residents to express themselves creatively.	Center for Community Stewardship	20 participating Wisconsin nursing homes	This innovative, non-pharmacological intervention communication tool is designed to help improve the quality of life of residents with dementia and other psychosocial needs. At the end of the training, the 20 nursing homes will be certified in the APP program.	Direct Improvements to Quality of Life	Results pending
<b>Wisconsin</b>	\$14,040.00	September 1, 2017 – August 31, 2018 (12 months)	Pressure Redistribution System	a) Purchase a pressure mapping system to assess pressure distribution for residents to reduce the prevalence of pressure ulcers and create a better quality of	Dove Healthcare - West	Other Wisconsin nursing homes who learn about the program from Dove	This project is expected to assist in reducing the prevalence of pressure ulcers while creating a better quality of life for the	Direct Improvements to Quality of Life	No data available

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				life. b) The mapping will show exactly what cushions or mattress to use in order to properly redistribute the individual's pressure point(s). c) This project will improve the quality of life for nursing home (NH) residents.		Healthcare-West nursing home staff; nursing home staff involved in the selection of cushions or mattresses appropriate to properly redistribute a resident's pressure points	residents.		
<b>Wisconsin</b>	\$23,000.00	September 1, 2017 – June 30, 2019 (22 months)	Stop, Starting It	The project will provide 10 workshops across the state, with participation of 30-40 caregivers at each training session. The training will assess attitudes, reframe	North Central Health Care	Participating Wisconsin nursing homes	Participants will learn how to promote an overall environment of positive language and behaviors when working with people with dementia. Pre-	Direct Improvements to Quality of Life	Results pending

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Region 5**

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				perspectives, and practice interpersonal skills for working with people with dementia. The workshop will expose caregivers to new experiences and practices that will change attitudes and behaviors toward individuals with dementia, having a direct impact on their quality of life.			and post-test information will be collected at each presentation and will be used to evaluate the effectiveness of the training.		
<b>Wisconsin</b>	\$44,820.00	October 1, 2017 – June 30, 2018 (6 months)	Performance Improvement Civil Money Penalty (CMP) Funds Project	The Wisconsin Center for Performance Excellence will hold five workshops across the state for staff from 105 nursing homes with a one or two-star rating from the Centers for Medicare & Medicaid Services. The workshops are designed to improve their performance using	Wisconsin Center for Performance Excellence	Participating nursing home facilities and staff; the project will help nursing homes improve performance and quality	Participants will develop corrective action plans as part of the workshop and, four weeks later, will participate in a two-hour, interactive group webinar to facilitate their transition into individual action	Direct Improvements to Quality of Care	No data available

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				the Eight Disciplines method.		of care for nursing home residents.	projects.		
<b>Wisconsin</b>	\$7,500.00	December 1, 2017 – May 1, 2018 (5 months)	Write Your Life	This program brings together residents, students, and community members to listen to residents tell their life stories and help them record their memories, creating a keepsake to share with their loved ones. The Life Stories will be printed into a book and presented to each resident and their families. The founder of the "Write Your Life Seminar" will spend three afternoons working with residents to share her program of creative	Park View Health Center	Park View Health Center nursing home residents; students; community members	As a result of this program, nursing home residents will improve their level of cognition, experience less depression, and improve their behavioral functioning. An additional benefit is the development of intergenerational relationships that are created as a result of this project.	Direct Improvements to Quality of Life	No data available

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				expression. This project gives residents the chance to creatively express their memories. This project will help nursing homes improve performance and quality of care to nursing home residents.					
<b>Wisconsin</b>	\$200,000.00	December 1, 2017 – November 30, 2019 (24 months)	Nursing Home Lighting to Improve Resident Health and Lower Fall Rates	The Midwest Lighting Institute will conduct a pilot study in two Wisconsin nursing homes to determine if the installation of energy-efficient LED lighting will improve health. The project is an opportunity to understand how the right spectrum of light may improve the lives of nursing home residents.	Midwest Lighting Institute, Inc.	Two Wisconsin nursing homes	The project will track if the installation of energy-efficient LED lighting will: 1) help residents maintain better daytime alertness and cognitive function, 2) improve sleep and reduce their symptoms of depression, and 3) improve safety by helping residents see	Direct Improvements to Quality of Life	Results pending

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Region 5**

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							better and move around more easily.		
Wisconsin	\$1,159,200.00	July 2017 – July 2019 (24 months)	Caregiver Career Program	The program is designed to encourage individuals to enter caregiver careers. The program includes a comprehensive marketing and recruitment plan, highlighting the program and the rewarding aspects of working as a nurse aide. Nurse aide training and testing are provided by the program at no cost to the student, and a \$500 retention bonus is paid by participating nursing homes to nurse aides after six months on the job. Regular webinars will be provided for nursing homes offering best	Wisconsin Department of Health Services	Wisconsin nursing homes	The project will increase the number of nurse aides in Wisconsin nursing homes by 3,000, highlight the rewarding aspects of working as a nurse aide caring for elders, and hold regular webinars for nursing home staff, featuring nationally recognized speakers who will share staff recruitment and retention best practices.	Direct Improvements to Quality of Care	Results pending

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Region 5**

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				practices for staff recruitment and retention.					
Wisconsin	\$67,373.00	December 2016 – March 2017 (4 months)	Cycling Without Age	Implement a rickshaw cycling program at Lutheran Homes of Oshkosh to expand possibilities and experiences for people living in nursing homes, including persons living with severe physical limitations and dementia.	Lutheran Homes of Oshkosh, Inc.	People living in nursing homes including persons living with severe physical limitations and dementia; volunteers; other skilled nursing facilities in Wisconsin; Nursing Home staff; University of Wisconsin - Oshkosh	Implementation of the "Cycling Without Age" program in the nursing home, including the creation of video and informational handouts to share with volunteers and other nursing homes, and purchase of a transport trailer to carry a rickshaw to other nursing homes to raise awareness of the program. Nursing staff will partner with the University of Wisconsin - Oshkosh to conduct research to determine the outcomes of the	Direct Improvements to Quality of Life	Final Report: <a href="https://www.dhs.wisconsin.gov/regulations/qai/f01593-11-30-2017.pdf">https://www.dhs.wisconsin.gov/regulations/qai/f01593-11-30-2017.pdf</a>

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							program and create capacity to support development of the program in other skilled nursing facilities in Wisconsin.		
Wisconsin	\$100,000.00	September 1, 2016 – August 31, 2017 (12 Months)	TimeSlips Creative Storytelling	The TimeSlips company will provide training to nursing home staff, families and volunteers in the use of symbolic and emotional language arts through storytelling. The storytelling strengthens communication and relationships with residents with dementia and increases engagement between staff and residents, while reducing challenging behaviors and the use of antipsychotic drugs. At the end of the grant period, TimeSlips will analyze the feedback from the surveys completed by participants and report the results to the	TimeSlips Program	Residents of participating nursing homes; nursing home staff; families; volunteers	Residents of the participating nursing homes will benefit from the increased engagement and sharing of stories between residents, families and staff.	Direct Improvements to Quality of Life	Final Report: <a href="https://www.dhs.wisconsin.gov/regulations/qai/f01593-8-31-17.pdf">https://www.dhs.wisconsin.gov/regulations/qai/f01593-8-31-17.pdf</a>



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**Region 5**

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				Department of Health Services.					

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Region 6**

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Arkansas	\$360,000.00	July 2017 – June 2018 (12 months)	Quality Assurance and Performance Improvement (QAPI) Based Approach to Meaningful Life, Empowered Staff, and Real Home	Residents living in nursing home communities should have increased quality of life, not only at the nursing home, but also within the provider community at-large.	Progressive Eldercare Services-Green, Inc. d/b/a; The Green House Cottages of Belle Meade	Residents will benefit from improved care transitions between providers and have a reduction in unnecessary medications and overall pharmacological interventions	This project will advance improved quality of care through improved communication about individual plans of care.	Direct Improvements to Quality of Care	No data available
Arkansas	\$560,000.00	January 1, 2017 – June 30, 2018 (18 months)	Best Practices for the Continued Reduction of Antipsychotic Medication	Antipsychotic use among nursing home residents should be reduced; minimize adverse drug effects and provide individualized interventions to improve quality of life.	Arkansas Health Care Foundation	Nursing home residents will benefit from decreased antipsychotic use and more	Improved quality of care through decreased use of antipsychotic medications and development of individualized interventions.	Direct Improvements to Quality of Care	No data available

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						individu- alized care.			
Louisiana	\$278,766.00	October 1, 2016- September 30, 2018 (24 months)	Education and Training to Reduce the Incidence of Facility-Acquired Pressure Sores	a. Pressure ulcer prevention training in 50 NFs b. On-site education for NF direct care staff in pressure ulcer prevention c. Improved wound identification and prevention	Louisiana State University Health Sciences Center	No data available	No data available	No data available	Decrease in facility acquired pressure ulcers.
Louisiana	\$19,096.00	July 2017 – June 2018 (12 months)	It's Never Too Late (iN2L) Technology	The goal of this project is to improve resident activity programming through the use of iN2L, an interactive, touch screen computer system.	St. James Place of Baton Rouge (nursing home)	Residents of St. James Place	Project aims to increase the number of residents who participate in individual and group activities.	Direct Improvements to Quality of Life	Increased resident involvement in activities.
Louisiana	\$19,500.00	July 1, 2017 – June 30, 2018 (12 months)	It's Never Too Late (iN2L): Living Life to the Fullest	The goal of this project is to improve resident activity programming through the use of an interactive, touch screen computer system (iN2L).	Villa Feliciana Medical Center	Residents of Villa Feliciana nursing home	Project aims to increase resident participation in group and individual activities.	Direct Improvements to Quality of Life	Increased resident participation in group and individual activities.

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<b>Louisiana</b>	\$42,550.00	July 2017 – June 2018 (12 months)	Scholarships for Registered Nurse (RN) Preparation Program for Certification in Gerontological Nursing	Identify and support 30 RNs through an online gerontological nursing certification preparation course.	Louisiana State Nurses Association	The project is being administered by the Louisiana State Nurses Association (LSNA). The budget allows for LSNA to purchase American Nurses Credentialing Center (ANCC) preparation courses offered by the University of Nebraska and to pay	Scholarships for 30 RNs.	Training	No data available

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						certification examination fees to the ANCC.			
Louisiana	\$101,733.00	July 1, 2017 – June 30, 2018 (12 months)	Antipsychotic Reduction	The goal of this project is to reduce the reliance on antipsychotics by providing on-site training to nursing facilities with high percentages of residents who are prescribed antipsychotics.	SBAFA, Inc. (Shirley Barbara Freche Anthony, RN Consultant)	Louisiana nursing homes	Reduction in the use of antipsychotics in the facilities where on-site training is delivered.	Training	Decrease in reliance on antipsychotic medications.
Louisiana	\$177,103.00	July 1, 2017 – June 30, 2018 (12 months)	Recollection Toolkits and Specialized Dementia Training	The goal of this project is to improve care to residents with dementia through staff training and specialized activities.	Alzheimer's Services of the Capital Area	50 Louisiana nursing homes	On-site training in 50 nursing facilities and the dissemination of kits that are specially designed to assist in the delivery of activities to individuals living with Alzheimer's disease.	Training	To date, 223 staff members at 16 different nursing homes have received training. Improved understanding of dementia and improved activity program.
Louisiana	\$5,000.00	March 29, 2017	24th Annual	This project underwrote the expenses of a	Alzheimer's Services of	Conference attendees	Conference attendance and	Training	Conference attendees included

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		(1 day)	Conference on Alzheimer's Disease and Dementia	national expert, who provided education and training to nursing home staff members about understanding and coping with Alzheimer's disease.	the Capital Area		evaluation.		37 social service designees; two activity therapists; and seven administrators. 94% of all attendees rated the conference as "excellent."
Louisiana	\$19,492.00	July 1, 2017 – June 30, 2018 (12 months)	Broadband Computer Club	The goal of this project is to improve resident quality of life through improved activity programming and social engagement through the use of an interactive, touch screen computer system - It's Never 2 Late.	Broadway Elder Living and Rehab	Nursing home residents of Broadway Elder Living and Rehab	Increase in resident participation in activities; increased social connections via Skype.	Direct Improvements to Quality of Life	Increased participation in social activities and positive feedback from residents and staff.
Louisiana	\$19,492.00	July 1, 2017 – June 30, 2018 (12 months)	Hashtag Residents on Computers	The goal of this project is to improve resident quality of life through improved activity programming and social engagement through the	Eastridge Nursing and Rehab	Residents of Eastridge Nursing Home	Increase in resident participation in activities; increased social connections via Skype.	Direct Improvements to Quality of Life	Increased participation in social activities and positive feedback from residents and staff.

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				use of an interactive, touch screen computer system - It's Never 2 Late.					
Louisiana	\$19,492.00	July 1, 2017 – June 30, 2018 (12 months)	Encore's Cajun Clickers	The goal of this project is to improve resident quality of life through improved activity programming and social engagement through the use of an interactive, touch screen computer system - It's Never 2 Late.	Encore Healthcare and Rehab	Residents of Encore Healthcare	Increase in resident participation in activities; increased social connections via Skype.	Direct Improvements to Quality of Life	Increased participation in social activities and positive feedback from residents and staff.
Louisiana	\$19,000.00	July 1, 2017 – June 30, 2018 (12 months)	Growing and Maintaining Haven Household Culture	The goal of this project is to enable staff to help grow and maintain the skills needed for the facility's households.	Haven Nursing Center	Haven nursing home staff	75-85 staff will participate in Household Basic Training; 12-15 staff will participate in Household Leadership Development.	Training	Increased staff understanding of the household model.

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<b>Louisiana</b>	\$19,500.00	July 1, 2017 – June 30, 2018 (12 months)	JoEllen Smith Spa Retreat	The goal of this project is to improve the bathing experience for residents by creating a spa- like bathing environment and providing staff training.	JoEllen Smith Living Center	Residents and staff of JoEllen Smith Living Center	Increased resident satisfaction.	Direct Improvements to Quality of Care	Increased resident choice and satisfaction in bathing options.
<b>Louisiana</b>	\$12,881.00	July 1, 2017 – June 30, 2018 (12 months)	Living Design Bird Aviary	The goal of this project is to improve resident quality of life through the introduction of a bird aviary.	Port Allen Care Center	Residents of Legacy Port Allen nursing home	Installation and maintenance of a bird aviary; increased resident social engagement.	Direct Improvements to Quality of Life	Reduced disruptive behaviors
<b>Louisiana</b>	\$17,540.00	July 1, 2017 – June 30, 2018 (12 months)	Greener Memories	The goal of this project is to improve resident quality of life by providing an outdoor space that invites social engagement and activities.	Nexion Health At Many North	Residents of Many Healthcare	Increased resident and family satisfaction.	Direct Improvements to Quality of Life	Increased time spent outdoors by residents
<b>Louisiana</b>	\$19,500.00	July 1, 2017 – June 30, 2018 (12 months)	Joy in Bathing	The goal of this project is to improve the bathing experience for residents by creating a spa- like bathing environment and	Regency House	Residents of Regency House	Increased resident engagement in bathing.	Direct Improvements to Quality of Care	Increased resident choice and satisfaction in bathing options.



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				providing staff training.					
<b>Louisiana</b>	\$18,881.00	July 1, 2017 – June 30, 2018 (12 months)	Creating and Utilizing Innovative Therapies to Improve Our Residents' Activities of Daily Living (ADLs) and Functionality	The goal is to improve resident ADL function through the use of an interactive, touch screen computer system, It's Never 2 Late.	St. Luke's Nursing Facility	Residents of St. Luke's	Increase the number of residents engaged in rehabilitation; decrease the number of residents with ADL decline.	Direct Improvements to Quality of Life	Increased duration of therapy sessions; positive feedback from residents.
<b>Louisiana</b>	\$40,000.00	December 1, 2017- May 31, 2018 (6 months)	Louisiana Enhancing Aging through Dignity, Empowerment and Respect (LEADER)	Provide training about best practices in nursing home culture change.	LEADER (Culture Change Org) Summit	Conference attendees	Conference attendance and evaluation.	Training	Positive conference evaluations.

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			Summit						
New Mexico	\$17,351.61	June 2017 – September 2017 (3 months)	Empowerment of the Frontline Caregiver Project	Build leaders, motivate, and educate front line nursing care staff.	New Mexico Healthcare Association (NMHCA)	Seven scholarships were awarded to seven nursing home Certified Nurse Aides (CNAs) to attend the National Association of Health Care Assistants Conference in Washington, DC on September 6-7, 2017. All seven	National Association of Health Care Assistants Conference held on September 6-7, 2017. Each candidate submitted a short essay, outlining their commitment to quality and resident satisfaction, along with three letters of recommendation.	Training	All seven CNAs are still employed in long-term care facilities. Participants reported feeling more empowered and part of a team from attending the conference. The participants also reported feeling that they were better able to communicate with their peers and supervisors as a result of the conference attendance.

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						recipients' experiences were presented at the 2018 NMHCA Conference.			
<b>New Mexico</b>	\$94,378.00	July 1, 2017 – March 1, 2018 (8 months)	Infection Control: Enhancing Quality of Care in Long- term Care Facilities in New Mexico	Provide Fundamentals in Long- term Care Infection Control training to currently designated infection preventionists in New Mexico long-term care facilities. The purpose of the project is to increase long-term care staff knowledge in infection control prevention, surveillance, and reporting.	Infection Control Consultants of New Mexico	Residents and staff in New Mexico long-term care facilities	This will lead to improved patient safety and reduced performance deficiencies.	Training	35 long-term care staff and five long-term care state surveyors attended. Data from the surveys and small group calls indicates that the training supported professional development and retention in long-term care settings. Providing ICO with basic infection control knowledge increased

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									confidence and supported projects aimed at improving processes and outcomes in this setting.
<b>New Mexico</b>	\$33,000.00	2016 – 2018 (24 months)	Engaging Residents with Real Life at the Good Samaritan Society Homes of New Mexico- Las Cruces Village	Provide education and encouragement to eliminate alarms and prevent falls by helping residents to engage with life. Staff will be educated on proactively anticipating residents' needs, such as getting to the bathroom when needed. This leads to the elimination of alarms acting as a crutch or giving the message that ignoring residents is okay. Other anticipated outcomes include reducing antipsychotic	Good Samaritan Society Communities: Las Cruces Village, Four Corners Village, Aztec, Grants, Manzano del Sol, Albuquerque, Socorro, Betty Dare at	Good Samaritan Society Communities: Las Cruces Village, Four Corners Village, Aztec, Grants, Manzano del Sol, Albuquerque, Socorro, Betty Dare	Deliver 4 educational workshops: Alarms, Replacing Alarms, Eliminating Alarms, Moving Beyond Memory Care. Workshops delivered by Carmen Bowman: "Eliminating Alarms and Preventing Falls by Engaging with Life."	Direct Improvements to Quality of Care	All 7 Good Samaritan Society homes achieved "alarm free" status. More individualized care plans were implemented, as well as increased resident engagement in activities, reduction in pressure ulcers, decreased use of physical restraints, use of better fall prevention practices, decreased use of

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				medications, falls, pressure ulcers, and incontinence episodes. Staff will also be educated on facilitating meaningful activities to improve the residents' quality of life.	Almagordo and Lovington	at Alma-gordo and Lovington			anti-psychotic medications, decreased incontinence episodes, increased mobility, and decrease in boredom.
<b>Oklahoma</b>	\$160,275.00	January 1, 2017 – December 1, 2019 (35 months)	Oklahoma State Department of Health (OSDH) Joint Provider Training	Oklahoma State Department of Health will provide training. Provide joint education for surveyors and providers on regulations and best practices. Provide funding for two, full-day joint trainings each calendar year.	OSDH Joint Provider Training	Residents and nurses from facilities that participate in the training	The training of staff will provide higher quality of care for nursing home residents.	Training	Results pending
<b>Oklahoma</b>	\$1,800,422.01	November 4, 2014 – June 30, 2017 (32 Months)	Partnering to Reduce Healthcare Acquired Conditions, Phase II	This project's purpose is to improve the quality of care through the reduction of quality measures (QM) outcomes for nursing	Oklahoma Foundation for Medical Quality	Nursing homes and resident/family councils	The training will include: mentoring full quality assurance and performance improvement (QAPI) implementation;	Direct Improvements to Quality of Care	Workshops: 4 regional meetings or workshops were held, with an above average satisfactory rating from

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			and Phase III	home (NH) residents in poor performing NHs. This project will expand Phase I focus (self-reporting pain and falls with major injury in the long-stay population) to include QMs for immunizations, pressure ulcers and urinary tract infections (UTIs).			assuring identification of appropriate measures for improvement; guiding the QAPI team in data collection and monitoring for improvement; and providing associated education, tools, and resources. As part of the project, will host two regional meetings in four locations (for a total of 24 meetings). Will also host, record, and post two webinar trainings per contract year.		participants. Recruitment: recruited 85 NHs, goal was to recruit at least 40 NHs. Quality Measures: improvements in all 4 measures. The results for UTI reduction, in particular, were very encouraging with over 95% of the homes working on this measure showing improvement and have reduced UTIs by over 40%. The percentage of homes showing improvement from baseline remains over 60% for all four

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									measures. Adequate information regarding vaccines was not available at the end of the contract period to provide measurement data.
Oklahoma	\$2,672,525.91	April 1, 2017 – March 31, 2020 (36 months)	Transform Long Term Care	This project will recruit and assist up to 60 facilities and provide intensive, on-site technical assistance.	Oklahoma Foundation for Medical Quality	These virtual and regional events will facilitate the spread of best practices to improve quality of care for nursing home (NH) residents. Audience beyond NH residents	The training will include: mentoring full quality assurance and performance improvement (QAPI) implementation; assuring identification of appropriate measures for improvement; guiding the QAPI team in data collection and monitoring for improvement; and providing associated education, tools, and	Direct Improvements to Quality of Care	Results pending

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						includes staff from participating NHs.	resources. As part of the project, will host two regional meetings in four locations (for a total of 24 meetings). Will also host, record, and post two webinar trainings per contract year.		
Oklahoma	\$164,445.00	April 1, 2017 – February 1, 2018 (10 months)	Nurses Improving Care for Health System Elders (NICHE)	Nurses improve care for NICHE population.	Geriatric Collaborative Care Nursing Services	This will improve nursing home residents' quality of care. Nurses who participate in the training will benefit from the project.	The project will implement Phase III of the NICHE in Long Term Care Community project.	Training	No data available
Oklahoma	\$797,026.35	April, 1 2017	Less Is	This project is focused	Oklahoma	Residents	This project aims to	Training	Results pending



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		– March 31, 2020 (36 months)	More	on the optimization of medication systems (reducing antipsychotics and unnecessary medications). The Eden Alternative, a global non-profit focused on providing innovative approaches to care, has developed an educational initiative, “Less Is More: Well-being Before the Med Cart” to address the optimization of medication systems.	Foundation for Medical Quality; Eden Alternative; Oklahoma University College of Pharmacy	and staff from participating nursing homes	recruit up to sixteen nursing homes, with each facility attending five Institute for Health Improvement Breakthrough Series Collaborative sessions. The project goal is to see a reduction (from baseline) in the use of medications on the Beers Criteria for Potentially Inappropriate Medication Use in Older Adults list by the end of the project.		
Oklahoma	\$408,028.00	April 1, 2017 - March 31, 2019 (24 months)	Person Centered Oral Care	This project will recruit 40 nursing homes for education and will provide oral health screenings for ten residents in each home.	TMF Health Quality Institute	This will improve oral health and quality of care for nursing	The project’s key objectives are to: 1. Establish a statewide OROCAG to address older adult oral health challenges; 2.	Direct Improvements to Quality of Care	Results pending

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						home (NH) residents. Audience beyond NH residents include staff of participating NH facilities, Oklahoma Resident Oral Care Advisory Group (OROCAG), hospitals, Oklahoma state data repository.	Improve nursing home staff knowledge, engagement in and skills for advancing person-centered oral care for residents; 3. Improve nursing home residents' oral-related activities of daily living; 4. Improve nursing home resident weight stability; 5. Provide an oral health toolkit that facilities will utilize to improve resident oral health care; 6. Reduce the incidence of oral health-related hospitalizations; 7. Gather oral health surveillance data via the Basic Screening		

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							Survey (BSS), which will strengthen the Oklahoma state data repository gauging oral health burden; 8. Develop a sustainability plan to continue training and expand the project statewide.		
Oklahoma	\$787,783.00	September 1, 2017 - June 30, 2019 (22 months)	Step Up for Dementia Care	This project will provide dementia-specific training to build daily care skills, knowledge, and empathy among direct care health professionals in 120 nursing homes (NHs).	Oklahoma University College of Public Health; Oklahoma Foundation for Medical Quality	This training will improve quality of care for NH residents; Audience beyond NH residents include direct care health professionals in participating	To achieve the project's goal of improving the quality of dementia care in Oklahoma nursing homes, the project will: 1) Use an evidence-based, dementia-specific training curriculum, "Walking Through Dementia"; 2) Use an evidence-based training tool, "Bathing	Training	Results pending

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						NHs.	Without Battles,” to provide dementia-specific skills training on bathing (which is a high-anxiety, high-risk activity among direct care health professionals); 3) Establish sustainable access to skills- and empathy-building trainings by providing “train-the-trainer” education and curricular materials to selected nursing facility staff; these staff would then be responsible for future dissemination of the knowledge, attitudes, and skills imparted by the curricula.		
<b>Texas</b>	\$8,481.73	April 5,	Ice Cream	Through this project, the	Cartmell	Residents of	Usage of ice cream	Direct	One machine was

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		2017 – July 31, 2017 (3 months)	Socials	facility will utilize one ice cream machine in its primary activity department and the other in the secondary activity location in the Alzheimer's neighborhood (a secured environment).	Home for Aged, Inc.	Cartmell Home for Aged	machines for ice cream social activities; final report submission	Improvements to Quality of Life	placed in the activity area in a secure neighborhood of ~ 35 residents. This neighborhood has a dedicated activity director who used the machine weekly for residents to enjoy ice cream treats. The second machine was placed in the primary activity department, which is the gathering location for the broader resident population (~135). In this location, ice cream treats are served on average of three times/week. The machines are definitely a benefit to

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									the seniors living here, especially for those who need help in achieving and maintaining weight goals.
<b>Texas</b>	\$3,716.69	July 1, 2017- September 30, 2017 (3 months)	Memory Garden	This project will enable the creation of a garden activity program that includes a memory garden in the outdoor area of the memory care wing. This will enhance the lives of residents in the 32-bed memory care wing. The garden will incorporate vivid colors and aromatic smells, which will help stimulate residents' sensory brain function and serve as a catalyst in enriching cognitive function. The outdoor activity will also	Shady Acres Health and Rehabilitation	Residents of Shady Acres	Purchase/acquire/deliver materials for project; begin site preparation work and mark ground for new structures. Open garden to residents; submit final report	Direct Improvements to Quality of Life	The project resulted in the development of a garden activity program, made possible by constructing four outdoor raised planters, which residents can access at their height. Through the project, we learned that assigning a single project manager who can see the project through to completion would

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				provide residents a fun and engaging area in which to benefit from being outdoors.					have worked best. Additionally, hiring an outside party to construct all work is recommended.
<b>Texas</b>	\$15,000.00	June 1, 2017- September 14, 2017 (4 months)	It's Never Too Late (iN2L) Program	This project will implement It's Never Too Late (iN2L) technology. This will increase activity levels, providing positive living for facility residents.	Green Oaks Skilled Nursing Facility, L.L.C.	Residents of Green Oaks Rehab and Nursing	Order, install, and purchase licensing for iN2L technology; train staff, residents, and families; provide final introductory training; submit final report	Direct Improvements to Quality of Life	Received positive feedback from residents. Usage ranged from 154 to over 305 hours in a single month. Residents who are restless or yelling out are able to focus on the jukebox or possibly a reminiscing game. iN2L has been used for: cognitive stimulation, Facebook, emailing friends/family, residents are able to use fine motor skills

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									in several activities by painting on the screen and choosing screen options. In terms of lessons learned, the facility was able to reach out to residents with music when unable to reach them in other ways. Having access to programs of interest to residents helps capture their attention and stimulate their minds.
<b>Texas</b>	\$7,163.55	July 1, 2017 – October 31, 2017 (4 months)	Residents Scream for Ice Cream at Carriage House Manor	Through this project, Carriage House Manor will install a soft serve ice cream machine to enrich the dining experience for residents who associate	Carriage House Manor	Residents of Carriage House Manor	Purchase and install soft serve ice cream machine; monitor the effects of the ice cream machine on resident weight	Direct Improvements to Quality of Life	The ice cream machine was ordered and delivered to the facility. It has been a huge success with



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				ice cream with their heritage and to help prevent resident weight loss.			maintenance and resident satisfaction.		residents. Residents generally use an entire mix of soft-serve by the end of the day. The residents request it with meals and as midnight snacks. The facility offers it to residents who have little food preference to combat weight loss. Several socials have been hosted using soft serve for residents.
<b>Texas</b>	\$25,475.33	August 2, 2017 –July 31, 2020 (36 months)	"What Matters to Me": A Person-Centered Care Video Training	a) This project will produce six person-centered care training videos to improve quality of life and quality of care. b) This will provide facilities with a training	Health and Human Services Commission ; OSLTCO	No data available	Creation of six short training videos to improve direct caregiver skill in providing person-centered care using the following Texas	Improvement to Quality of Care and Life; Culture Change, and Training	Results pending

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			Series	tool that models skills for improving communication between nursing home direct caregivers, facility management, and residents. c) In turn, resident quality of life and care will be enhanced through improved person-centered care practices. The training videos will be available through the Office of the Texas Long Term Care Ombudsman (OSLTCO) website, the National Long-term Care Ombudsman Resource Center website, and Texas nursing homes.			Health and Human Services training academies: Director of Nursing Academy; Texas OASIS Dementia Training Academy; and Nurse Aide Training and Competency Evaluation Program (NATCEP).		
<b>Texas</b>	\$550,651.60	August 2, 2017 – July 31, 2020	Music and Memory Initiative,	a) This project aims to certify an additional 200 Texas nursing homes as	Health and Human Services	Texas Nursing Homes	The Music and Memory program is intended to: aid in	Direct Improvements to Quality of	48 nursing facilities (NFs) have participated in this

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		(36 months)	Phase Four	Music and Memory certified facilities. b) The project is a two-phase initiative. Phase One will certify 100 nursing facilities, and Phase Two will certify an additional 100 nursing facilities. The rollout of this project will ensure that participants engage in the program in its entirety and that all webinars and training events are attended. c) This will allow staff to provide better quality of care to nursing home residents.	Commission Quality Monitoring Program		reducing the reliance on antipsychotic medications; reduce agitation and sundowning; enhance resident engagement and socialization; reduce the number of falls; provide a way to bring pleasure to residents with dementia; foster a calmer social environment; offer an enjoyable and fulfilling person-centered activity for any resident; reduce the resistance to care, which may ultimately boost the morale of NF staff; and increase the quality of care provided to the NF	Life and Care, and Training	phase

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							residents, which in turn increases the quality of their lives.		
<b>Texas</b>	\$223,597.60	June 1, 2017 – March 15, 2019 (22 months)	Intellectual and Developmental Disability (IDD) / Mental Illness (MI) Training Academy	a) This project will provide comprehensive education and training on caring for nursing facility residents with various intellectual and developmental disabilities, as well as those with mental illness. b) Eight regional face-to-face trainings will be held across the state. Upon completion of regional trainings, evaluations will be reviewed to identify any content areas that need to be revised. Once revisions are made, parts of the curriculum will be converted into a computer-based training	Health and Human Services Commission (HHSC) Quality Monitoring Program	Trainings held in Corpus Christi, Laredo, Houston, Abilene, Austin, San Antonio, Tyler, Fort Worth, Houston, and Richardson	Address the following areas: an introduction to IDD and MIs; the unique needs of those with IDD, MI, or both; co-occurring disorders; trauma-informed care for those with IDD/MI; challenging behaviors in this resident population; other medical diagnoses associated with IDD/MI; abuse and neglect prevention, recognition, and intervention; human interaction, and communication; identification of	Improvement to Quality of Care and Life; Culture Change; Transition Preparation and Training	Curriculum development has been completed. The training was made available to 2,000 individuals throughout 10 regional trainings. The training will be sustained as a computer-based training (CBT) as well as on an individual nursing facility basis, provided by QMP staff. The CBT course has been developed and is ready to be reviewed by HHSC

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				module, while the remainder will be taught by Quality Monitoring Program (QMP) staff (as requested by nursing home providers). Facilities will be able to access all tools and job aides created for this project (at no cost) on the Health and Human Services Commission Quality Monitoring Program website. c) This will help staff provide a higher quality of care for nursing home residents.			specialized services needs, and providing for the necessary specialized services; local supports available; and state oversight and monitoring and all required forms, meetings, services, and interventions an individual with an IDD or MI may experience.		Preadmission Screening and Resident Review (PASRR) specialists. The next step will be to complete a revision of the Participant Manual and update the CBT course with the feedback received. The manual will be printed, and the CBT course released in the Winter of 2019.
<b>Texas</b>	\$6,250.00	July 2, 2017 – July 31, 2018 (13 months)	Virtual Dementia Tour (VDT)	a) This project will enable three staff members to attend the VDT-Certified Trainer Program and become certified to conduct VDT trainings within the facility. b) The	Oaks Nursing Center	Oaks Nursing Center	Designated staff to become certified in the VDT facilitator process to offer the VDT.	Training	The facility's dementia care education policy was updated on January 15, 2018. The facility had a VDT on the following dates: May

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				VDT program will help raise awareness of the effects of dementia on a person's life and create an educational "safety net" within the Oaks Nursing Center community to better understand and help those who suffer from any type of dementia or cognitive decline. c) This will help staff provide higher quality of care for nursing home residents.					5, 2018; June 14, 2018; and July 5, 2018 (company leadership). Project results have raised awareness about the effects of dementia on the population we serve. It has shifted many employees' approach to those with dementia in a positive way. It's hard to determine exactly the direct impact on care, but a general observation is that the overall approach to dementia comes from an even more empathetic angle. The primary lesson learned is how

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									difficult it can be to get a training session scheduled with all staff, as well as a community event.
<b>Texas</b>	\$366,962.24	October 1, 2017 – February 28, 2020 (29 months)	Train-the Trainer Program: Handfeeding Techniques for Nursing Facility Residents	a) This project aims to teach nursing facility staff the skills needed to reduce the risk of weight loss in all residents experiencing the type of functional decline that warrants feeding assistance with meals. b) As part of this project, four regional training sessions will be conducted. Each regional training will be comprised of 10 facilities (20 staff per session). The trainings will combine information sharing,	Health and Human Services Commission Quality Monitoring Program	40 nursing facilities (NFs) to participate in trainings	Improve the quality of life and the quality of care related to mealtimes for residents living in Texas nursing homes by training NF staff on effective handfeeding techniques.	Improvement to Quality of Care and Life; Culture Change and Training	Results pending

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				small group role plays, and hands-on skills training. Participating facilities will be required to participate in regional follow-up debriefing webinars within four to six weeks after they are trained. Participating facilities will also be required to conduct training sessions in their own facilities within two months of participating in the training session. c) This will give staff the training needed to improve quality of care for nursing home residents.					
<b>Texas</b>	\$12,099.00	November 1, 2017 – October 31, 2018	It's Never Too Late (iN2L)	a) This project will implement It's Never 2 Late (iN2L) technology. b) This will provide	Whitehall Rehab and Nursing	Whitehall Rehab and Nursing	Enhance patient independence; decrease in use of psychotropic	Direct Improvements to Quality of Life and	Noted trends include increase of health and wellness videos, audio books and the



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		(12 months)		opportunities for social involvement, recreation, and cognitive training for facility residents with dementia. iN2L will enable the facility to improve quality of life and care for residents with behavioral and psychological symptoms (in a non-pharmacological manner, through engagement with technology). c) This will reduce the use of as needed (PRN) antipsychotics.			medications; increase cognitive stimulation; improve socialization; enrich communication with family and community.	Culture Change	jukebox. Activity Directors continue to utilize weekly for group and in-room treatments. Webinars being completed by interdisciplinary team (IDT) members quarterly and monthly as they appear. iN2L discussed and success stories told every month in monthly newsletters of resident achievements and their progress.
<b>Texas</b>	\$25,974.59	November 1, 2017 – October 31, 2018 (12 months)	It's Never Too Late (iN2L)	a) This project will implement It's Never 2 Late (iN2L) technology. b) This will provide opportunities for social	McAllen Nursing Center and Rehab	McAllen Nursing Center and Rehab	Decreased use of psychotropic medication; improved socialization; enriched communication with	Direct Improvements to Quality of Life and Culture	Baseline QCL (Likert Scale) surveys completed for residents identified

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				involvement, recreation, and cognitive training for all facility residents. The project will assist with decreasing antipsychotic medication use and negative behavioral outbursts. c) It will improve quality of life for all residents and increase staff knowledge regarding resident needs and abilities.			family and community; enhanced patient independence; increased cognitive stimulation; help initiate other programs within facility.	Change	by the interdisciplinary team (IDT). Trends included nonparticipation in activities due to poor interest, and negative feelings/ behaviors (including hopelessness). Likert Scale re-administered at 6 months and annually to determine positive outcomes in mood/behavior and increased interest in activities. iN2L training conducted October 1, 2018 and included IDT - administrator, nursing, social worker, case managers, speech,

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									occupational and physical therapy staff, and activities director.
<b>Texas</b>	\$64,603.60	November 1, 2017 – October 31, 2018 (12 months)	It's Never Too Late (iN2L)	a) This project will implement It's Never 2 Late (iN2L) technology. b) This will provide opportunities for social involvement, recreation, and cognitive training for facility residents with dementia. c) iN2L will enable the facility to improve quality of life and care for residents with behavioral and psychological symptoms (in a non-pharmacological manner, through engagement with technology). This will reduce the use of as needed (PRN)	Advanced Healthcare Solutions	Advanced Health and Rehabilitation of Garland; Wedgewood Nursing and Rehab; Colonial Manor Nursing Center; Parkview Care Center	Decreased use of psychotropic medication; improved socialization; enriched communication with family and community; enhanced patient independence; increased cognitive stimulation; help initiate other programs within facility.	Direct Improvements to Quality of Life and Culture Change	Four facilities participated in this project. For each, during the first 30 days, the observable trends were reduced behaviors when interacting via iN2L for patients with diagnosis of dementia. Casino Games and Solitaire were some of the favorite options chosen on the iN2L that assist in reducing behaviors. The Jukebox was popular on the iN2L, so the patients could

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				antipsychotics.					choose their favorite genres of music. As a result of the iN2L implementation, all facilities have seen positive outcomes in mood/behavior and increased interest in activities with their patients.
<b>Texas</b>	\$12,099.00	November 1, 2017 – October 31, 2018 (12 months)	It's Never Too Late (iN2L)	a) This project will implement It's Never 2 Late (iN2L) technology. b) This will provide opportunities for social involvement, recreation, and cognitive training. The project will serve all residents, including residents with behavioral and psychological symptoms; the project will assist with decreasing antipsychotic	Community Care Center of Crockett	Community Care Center of Crockett	Decreased use of psychotropic medication; improved socialization and quality of life; enriched communication with family and community; enhanced patient independence; increased cognitive stimulation.	Direct Improvements to Quality of Life and Culture Change	At seven months, surveys had been completed quarterly to ensure quality and client satisfaction; continual process of creating user buttons and pages; activities department began incorporating the iN2L into weekly activities calendar; firm usage dates set for Thursdays and

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				medications and negative behavioral outbursts that affect others. c) Overall, the program aims to decrease use of psychotropic medications, improve socialization and quality of life, enrich communication with family/friends/community, enhance resident independence, and increase cognitive stimulation.					as needed (PRN); discussed with nursing to include weekend usage as well as nights; webinars announced to emails and printed for display, so all staff is aware of upcoming webinars.
<b>Texas</b>	\$17,660.99	November 1, 2017 – October 31, 2018 (12 months)	It's Never Too Late (iN2L)	a) This project will implement It's Never 2 Late (iN2L) technology. b) This will provide opportunities for social involvement, recreation, and cognitive training. c) The project will: help	Whispering Oaks Rehab and Nursing	Whispering Oaks Rehab and Nursing	Decreased use of psychotropic medication; improved socialization; enriched communication with family and community; enhanced patient independence;	Direct Improvements to Quality of Life and Culture Change	Training and device went up on January 25, 2018; flyers sent to local MD's March 26, 2018. My Page buttons and My Story digital biographies-initiated

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				decrease use of psychotropic medications, improve socialization and quality of life, enrich communication with family and community, enhance resident independence, increase cognitive stimulation, and initiate other programs within the facility.			increased cognitive stimulation; help initiate other programs within facility.		January 25, 2018. In March 2018, begin highlighting iN2L activities on the Activities Calendar.
<b>Texas</b>	\$17,660.99	November 1, 2017 – December 31, 2019 (26 months)	It's Never Too Late (iN2L)	a) This project will implement It's Never 2 Late (iN2L) technology. b) The program aims to improve quality of life, as well as how residents with behavioral and psychological symptoms are cared for in a non-pharmacological manner. c) The project will help decrease use of	Southeast Nursing & Rehabilitation Center	Southeast Nursing & Rehabilitation Center, LLC.	Decreased use of psychotropic medication; improved socialization and quality of life; enriched communication with family and community; enhanced patient independence; increased cognitive stimulation.	Direct Improvements to Quality of Life and Culture Change	Results pending

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				psychotropic medication, as well as improve socialization and quality of life. In addition, it will enrich communication with family and community, enhance resident independence, and increase cognitive stimulation.					
<b>Texas</b>	\$17,660.99	November 1, 2017 – October 31, 2020 (36 months)	Dignity Through Technology at Palo Pinto Nursing Center	a) This project will implement It's Never 2 Late (iN2L) technology. b) The program provides opportunities for social involvement, recreation, improved motor functioning, and cognitive linguistic stimulation. c) The project also helps facilitate communication with patients and their families and decrease the need for	Palo Pinto Nursing Center	Palo Pinto Nursing Center	Decreased use of psychotropic medications; improve socialization and quality of life; facilitate orientation with seasonal content; enrich communication with family and community; enhance patient's independence; improve motor functioning; decrease	Direct Improvements to Quality of Life and Culture Change	Results pending

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				antipsychotic medications for patients with behavioral and psychological symptoms. Additionally, the program aims to decrease the amount of assistance a patient needs to participate in activities of daily living, resulting in an improved sense of autonomy and personal confidence.			the amount of assistance a patient needs to participate in activities of daily living, resulting in improved sense of autonomy and personal confidence.		
<b>Texas</b>	\$20,800.00	November 15, 2017 – November 30, 2018 (13 months)	Chair Tai Chi Residents Classes	a) This project will contract with a chair Tai Chi instructor in order to implement Chair Tai Chi classes, five days a week, two times a day, for 12 months. b) Participation in these classes will increase resident well-being, strength, and	Methodist Retirement Community (MRC) Towncreek	MRC Creekside	Help with strength and balance, as well as mobility; range of motion; ease pain and tension from joints; decrease stress; increase flexibility.	Direct Improvements to Quality of Life	It appears that the overall well-being, including reduction in falls, has continued to improve over the course of the funding period. All the participating residents have experienced benefits from the Chair Tai



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				independence. c) It will also lower resident risk of falls, thus decreasing injuries from falls.					Chi classes.
<b>Texas</b>	\$17,620.20	December 1, 2017– November 30, 2020 (36 months)	It's Never Too Late (iN2L)	a) This project will implement It's Never 2 Late (iN2L) technology. b) It will work to improve quality of care of residents with symptoms of dementia, stroke, and psychological symptoms. c) By using technology (a non- pharmacological method), the use of antipsychotic medications may be reduced.	Mesquite Tree Nursing Center	Mesquite Tree Nursing Center	Increase cognitive stimulation; increase attention span; increase range of motion (ROM) in order to perform activities of daily living; increase standing tolerance; improve the quality of care.	Direct Improvements to Quality of Life and Culture Change	Results pending
<b>Texas</b>	\$11,012.70	November 15, 2017 – May 15, 2018 (6 months)	Gazebo	a) The goal of the project is to increase the availability of meaningful outdoor activities for residents who use wheelchairs or Geri-	Silsbee Oaks Healthcare, LLP	Silsbee Oaks Healthcare, LLP	Gazebo completed.	No data available	Delays were experienced due to electrical work demands and weather. "The project is a delight to

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				chairs. b) This will be accomplished through installation of a gazebo for outdoor activities, encouraging residents to remain active. This will enhance resident quality of life and provide meaningful activities. c) This addition will allow residents who are in wheelchairs and Geri-chairs to be brought outside to enjoy fresh air and sunlight, and to socialize with others.					our residents...They love taking their leisure there and visiting with family there." Gardening activities have been incorporated into the gazebo. Patio furniture has been added. Would allow more time for unforeseen circumstances, such as workforce and weather.
<b>Texas</b>	\$17,660.99	November 28, 2017 – October 31, 2020 (35 months)	Bettering Lives Through Technological Advancements at	a) This project will implement It's Never 2 Late (iN2L) technology, providing opportunities for social involvement, recreation, improved motor functioning, and	Seymour Rehab and Healthcare	Seymour Rehab and Healthcare	Decreased use of psychotropic medications; improve socialization and quality of life; facilitate orientation with seasonal content;	Direct Improvements to Quality of Life and Culture Change	Results pending

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			Seymour Rehab and Healthcare	cognitive linguistic stimulation. b) The program will facilitate easy access to electronic and Internet-based communication and will help facilitate communication with residents and their families. c) The program will also decrease the need for antipsychotic medications for patients with behavioral and psychological symptoms and will decrease the amount of assistance a resident needs to participate in activities of daily living (resulting in an improved sense of autonomy and personal confidence).			enrich communication with family and community; enhance patient's independence; improve motor functioning; decrease the amount of assistance a patient needs to participate in activities of daily living, resulting in improved sense of autonomy and personal confidence.		

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Texas	\$1,419.88	November 16, 2017 – May 30, 2018 (7 months)	Interactive Companion Pets	<p>a) Through this program, 12 Interactive Companion Pet dolls (cats and dogs) will be purchased.</p> <p>b) These dolls provide comfort and added companionship to residents with limited communication ability and cognitive deficits. Residents will be monitored for agitation, anger, crying, and other displays of sadness.</p> <p>c) The pets will be introduced at those times with the goal of reducing resident distress.</p>	Methodist Retirement Community Cornerstone	Cornerstone Retirement Community	Interactive Companion Pets consistently used by nine residents.	No data available	Companion pets were introduced to 31 residents, of which eight showed no significant interest; 13 residents showed some, but not consistent, interest and 10 residents use and enjoyed the pets. Positive outcomes: residents demonstrated reduced anxiety or agitation from interaction with pets; appeared to find joy, pleasure, and comfort from engagement with the pets; the pets provided companionship to

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									residents who were pet lovers; and the residents demonstrated a true sense of pride in their pet.
<b>Texas</b>	\$105,439.00	December 1, 2017 – November 30, 2020 (36 months)	It's Never Too Late to Connect	<p>a) This project will implement It's Never 2 Late (iN2L) technology, including utilization of six interactive units and bike simulator.</p> <p>b) The project provides engagement with friends, family, and community.</p> <p>c) It aims to improve quality of life, reduce usage of as needed (PRN) antipsychotic medications, and reduce the incidence of behavioral and psychological symptoms of dementia.</p>	Cleveland Health Care Center	Cleveland Health Care Center	Residents living with dementia will be able to stay engaged and connected through thousands of computer-based experiences and life enrichment activities.	Direct Improvements to Quality of Life	Results pending

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<b>Texas</b>	\$69,629.00	December 1, 2017 – November 30, 2020 (36 months)	Resident Engagement and Calming Technology (REACT)	a) This project will implement It's Never Too Late (iN2L) technology, an interactive and adaptive computer system that will provide a person-centered experience. b) Through one-on-one and group recreational and leisure activities, iN2L helps enhance the quality of care and decrease the use of antipsychotic medications. c) The project also aims to provide connection to residents' family members and engage residents on many dimensions of the wellness protocol.	Methodist Retirement Community: Crestview	Methodist Retirement Crestview	Provide person-centered experience that will enhance the quality of care and reduce the use of antipsychotic medications through specifically designed, one-on-one and/or group recreational and leisure activities; residents with dementia will be able to stay engaged.	Direct Improvements to Quality of Life and Culture Change	Results pending
<b>Texas</b>	\$25,076.46	December	Snoezelen	a) This project will create	Monarch	Monarch	Improved	Direct	All items were

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		1, 2017 – July 31, 2018 (8 months)	Room & Family Transitions : Resident Quality of Care Improvements	a therapeutic environment and allow for additional seating for larger families who are visiting residents. b) The project aims to enhance the quality of behavioral care by offering residents an enhanced activity area. Key elements include visual, tactile, and movement-oriented products. The family transitional space will include additional seating and space for larger families. c) This will allow nursing home residents a better opportunity to see family.	Pavilion Rehabilitation Suites	Pavilion Rehabilitation Suites	communication between caregiver and resident; decreased sadness and fear; reduced agitated behavior; calm restlessness; reduce yelling or shouting; increased eating, smiling, and laughing.	Improvements to Quality of Care	purchased, and delivery was scheduled for May 3, 2018. No data provided due to furniture delivery schedule.
<b>Texas</b>	\$59,778.00	December 1, 2017 – November 30, 2020	Resident Engagement and Calming	a) This project will implement It's Never 2 Late (iN2L) technology, an interactive and	Methodist Retirement Community: Pinecrest	Pinecrest Retirement Community	Provide person-centered experience that will enhance the quality of care and	Direct Improvements to Quality of Life and	Results pending

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		(36 months)	Technology (REACT)	adaptive computer system that will provide a person-centered experience. b) Through one-on-one and group recreational and leisure activities, iN2L helps enhance the quality of care and decrease the use of antipsychotic medications. c) The project also aims to provide connection to residents' family members and engage residents on many dimensions of the wellness protocol.			reduce the use of antipsychotic medications through specifically designed, one-on-one and/or group recreational and leisure activities; residents with dementia will be able to stay engaged.	Culture Change	



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Iowa	\$160,610.88	December 1, 2016 – December 31, 2017 (12 months)	Fall Prevention – Halcyon House (Wesley Life)	This project seeks to implement a fall prevention program. This will be done through use of: wider mattresses to prevent falls from bed and an integrated exercise program with an emphasis on improving balance.	Wesley Life Halcyon House	No data available	Decrease the number of falls, as measured by the number of falls recorded on the fall log/incident report; improve functional use of ankles, hips, and knees as measured by range of motion score on the Fullerton Advance Balance Scale; improve confidence in stability/avoiding falls, as measured by the Activities-Specific Balance Confidence Scale.	Direct Improvements to Quality of Care	Decrease in falls from bed 63% by the end of the contract term; residents are sleeping much better, longer, and more soundly; and short-term stay residents saw an 18% increase in improved locomotion.
Iowa	\$387,826.79	October 2, 2017 – November 30, 2019 (26 months)	Targeted Training Interventions 360	The project extends implementation of Targeted Training Interventions (TTI) 360 in Iowa Long-Term Care (LTC) facilities. TTI 360	The Alzheimer's Association	No data available	No data available	No data available	Results pending

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				would provide training and support for all levels (360 degrees) of the LTC facility team (i.e., medical director, pharmacy consultants, administrator, director of nursing, and paid caregiving staff). The training would also address and teach philosophical, person-centered approaches to quality care and quality of life using the Eden Alternative model. Included in the training are skills-based training for caregiving staff and side by side coaching by experts in dementia care.					
Iowa	\$78,995.96	December 1, 2016 – December 31, 2017	Increase Resident Participation in	This project aims to: engage residents in fun and meaningful activities; improve activities of daily	Sunrise Terrace Nursing and Rehabilita-	Nursing home residents at Sunrise	Maintain or improve the number of residents who have behaviors and	Direct Improvements to Quality of Care	The It's Never 2 Late (iN2L) system allowed residents to improve and

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		(12 months)	Activities and Fall Prevention: Sunrise Terrace Nursing and Rehabilitation Center	living (ADLs) scores; reduce falls; reduce antipsychotic medication usage; and improve resident independence and happiness. In order to achieve these goals, the project will use: a comprehensive Fall Prevention Education/Training Program; the interactive computer system, "It's Never 2 Late" (iN2L); and a visual motor and neuro- cognitive rehabilitation training device called "Dynavision D2" (to improve cognitive processing ability, balance, and functional mobility amongst residents). Through this project, the facility will	tion Center	Terrace Nursing and Rehabilitation Center	symptoms that affect others to less than or equal to the state average. Maintain or improve the number of residents who have a decline in ADLs to less than or equal to the state average. Decrease the length of stay of those whose ability to move independently worsened to below the state average. Reduce falls within the facility to less than or equal to the state average. Reduce the use of antipsychotic medication to be less than or equal to the state average.		maintain their individual skills game scores through regular interaction with the system. Participation in group activities, computer activities, and connectedness to other residents increased and had an overall effect on resident satisfaction and activity engagement. Over the one-year period, 34% of residents increased their participation in group activities by 25%. Quarterly resident satisfaction surveys improved, which indicates that the

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				also use "RehabStation" equipment to allow residents to receive strengthening, endurance, balance, ADL function, gait, and flexibility activities. The facility will also use "RehabHarness" equipment, which utilizes a ceiling rail system and a resident safety harness to provide support for balance and gait training.					iN2L system contributed to an increase of resident quality of life. The RehabStation contributed to an increase in mobility and functionality in self-care (by 18.7%) and upper and lower body (by 10.7%) dressing. There was also improvement in transferring for toileting, bathing, and chair to bed. The goal to increase weight bearing activities and challenge residents' base of support, which would result in four or less falls a month, with the

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									RehabHarness was not met, but the fall and falls with major injury were below state average. Overall, patients displayed improvements in their balance throughout the course of treatment. The Dynavision increased ability for eye-hand coordination, reaction time and use of right upper extremity, which led to residents becoming independent in the facility. Of the residents tested, an average of 86%

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									showed improvement in their scores.
Iowa	\$30,820.62	December 1, 2016 – March 31, 2018 (16 months)	Increase Resident Participation in Activities and Social Engagement	This project will utilize person- based technologies to: improve resident quality of life by providing activities that address the needs and strengths of each individual, enrich their social relationships through opportunities to stay connected with family, friends, and the community, and address the behavioral and psychological symptoms of dementia (BPSD) through a non-pharmacological method, thereby potentially reducing the use of as needed (PRN)	Spurgeon Manor (48 total residents)	No data available	Over a 12-month period: residents will increase their participation in group and/or one-on-one activities per person by up to four activities per person per month. 20 personalized, resident personal “pages,” and digital biographies reflecting the residents’ preferences and interests, will be created. We plan to reduce PRN antipsychotic use by 35% or more.	Direct Improvements to Quality of Life	Individual accounts have been maintained for all nursing facility residents. Nursing facility has 0% PRN antipsychotics. The iN2L system has been one of our tools to help accomplish this. Group activity usage increased from 15 groups in the first quarter to 106 groups in the fourth quarter. iN2L has continued to be used daily at Spurgeon Manor. iN2L has greatly assisted in

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				antipsychotics. The facility will use the computer system, "It's Never 2 Late" (iN2L), to offer ongoing activities led by frontline and administrative staff, as well as utilized by families and volunteers, to attain resident engagement and socialization outcomes of improved well-being. Three mobile units, four hours of onsite training, and the 12-month subscription service will be acquired.					the social engagement among residents, which also helps maintain mental sharpness.
Missouri	\$145,000.00	November 1, 2017 – October 31, 2018 (12 months)	Enhanced Leadership Development Academy (ELDA)	The purpose of ELDA is to strengthen leadership capacity, improve nurse retention, and improve quality of care in long term care facilities. The	University of Missouri-Columbia, Nursing Outreach and	Missouri nursing homes	Through this project period, the University of Missouri - Columbia will provide two complete sessions of the ELDA program.	Training	Goal: ELDA graduates, as well as those with whom they work, will report increased leadership capacity after

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				ELDA training program is a professional development certificate program for registered nurses (RNs), Missouri Nursing Home Administrators (NHAs), and Social Service Designees (SSDs) working in Missouri long term care facilities. ELDA uses a proven curriculum to improve leadership behaviors, combining face to face meetings and two webinars. Offered over seven months, ELDA features an innovative and evidence-based curriculum with a strong focus on application to practice and peer consultation.	Education		Each session is open to all nursing homes in Missouri. In the first year ELDA was implemented (November 1, 2016 - October 30, 2017), 64 participants went through the program. This project is expected to develop better prepared leaders, who see themselves as highly competent for the job demands, are more likely to be reinforced by the job, see it as a career, and are less likely to leave the facility. Ultimately, retention of this type of highly qualified leader leads to higher		completing the 50-hour course and remain with their employers for up to 18 months after graduation. 1. Statistically significant increase in confidence in their leadership competencies from before to after the ELDA - their perspective of themselves as leaders changed and they viewed themselves as more competent, confident, and effective leaders (perspective transformation is a goal of the ELDA).



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							performing nursing homes and better care outcomes.		<p>2. Statistically significant difference in the frequency of effective leadership behaviors from before to after the ELDA using the Leadership Practices Inventory (self-reports and reports of up to 7 individuals with whom they work).</p> <p>3. ELDA graduates recognize the tremendous value of teamwork, relationships and communication. They view their staff as an indispensable asset to be involved in decision making and contribute</p>

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									<p>toward improved resident outcomes, regardless of the generational differences they may encounter.</p> <p>4. Improved quality of resident care and clinical outcomes, team work, communication, relationship building and administrative outcomes (cost savings) based on the Performance Improvement Projects that are required for graduation.</p> <p>5. Retention rates of ELDA graduates in their LTC setting rivals both state and</p>

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									<p>national averages. (Cohort 1-6 months follow up retention rate was 92%. Rates will also be determined at 12- and 18-months post-graduation).</p> <p>Goal: Continue to achieve a 3.0 or higher (on a 4-point scale with 4 being the highest) on the overall evaluation of each day of the ELDA.</p> <p>Outcomes: 1. The daily class evaluations received almost all "excellent" with a few "good" ratings (3.5 on a 4-point scale)</p>

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									<p>regarding speakers, teaching methods, organization and usefulness of content, learning objectives, overall evaluation of the day, and the relevance and likelihood of incorporating the content into their practice.</p> <p>2. Verbatim comments were consistent with the high quantitative ratings: "Provided great examples and real-world problem-solving skills and approaches." "Concrete examples." "Useful</p>

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									<p>and illuminating.”  “Wow! Very intense, lots of reference materials. Lots of useful info to take away. No wasted words.” “LOVED learning about CAS (complex adaptive systems) and how relationships are such an important part.” “So much stuff to take back and practice!”</p> <p>Goal: Graduates of the ELDA will undergo a change in their perspectives regarding LTC leadership, their role as a leader, and the relationship between</p>

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									leadership, quality outcomes and staff turnover. Outcomes: 1. Qualitative feedback from every ELDA graduate suggested some degree of perspective transformation as documented in their written feedback for the Graduation Booklet, daily class evaluations and verbal feedback in class and online.
Missouri	\$540,000.00	July 1, 2017 – June 30, 2018 (12 months)	The Quality Improvement Program for	a) The purpose of QIPMO is to work directly with long-term care nursing facility staff to help them learn best clinical practices,	University of Missouri Sinclair School of Nursing	Long-term care nursing facilities and hospital-based skilled nursing units	Provide a Quality Improvement Project for Missouri for long-term care nursing facilities and hospital-based skilled nursing	Direct Improvements to Quality of Care	These support groups have been extremely helpful for MDS coordinators as a service provided by the nurses'

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			Missouri (QIPMO)	improve care delivery, and improve the outcomes for nursing home residents. The QIPMO program accomplishes this purpose by conducting Resident Assessment Instrument- Minimum Data Set (RAI/MDS) workshops and training, conducting Minimum Data Set (MDS) support groups, providing quality improvement-related consultation and by conducting educational workshops/trainings on long-term care nursing best practices, clinical topics, and MDS topics as requested by the long-term care industry and stakeholders. An		throughout the entire state of Missouri	units throughout the entire state of Missouri. Provide MDS education and support to long-term care nursing facilities and hospital-based skilled nursing units. Provide education on Quality Improvement/Quality Assessment and Performance Improvement (QAPI) processes to long-term care nursing facilities and hospital-based skilled nursing units.		program. The use of webinars is growing among busy nursing leaders. These help busy administrators keep up on important topics while remaining in their buildings, accessible for their staff and emergencies. For the fiscal year ending June 30, 2018, 5,933 contacts were made with individual long-term care facilities in addition to 166 group conferences, webinars, and other training sessions. The services are highly used by

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				additional component of QIPMO is the Leadership Coaching for Nursing Home Administrators program. This program was created to assist nursing home administrators and key operational leaders in meeting the leadership challenges of the long-term care industry. The services offered focus on helping administrators deal effectively with the complex management issues faced each day in the business and personnel operations of long-term care facilities. b) The QIPMO program is expected to result in improved care and resident outcomes in					nursing homes in the state and evaluations completed with the services by staff of facilities are extremely positive. Site visits and other contacts were made, mostly phone and electronic communication of requested guidance from an Administrator Coach. Corporations frequently request a group site visit, bringing administrative staff from several facilities together for assistance on the same topic. A new



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				<p>participating facilities, which will be reflected in improved quality measures/quality indicators and better surveys in the individual facilities.</p> <p>c) Long-term care facilities that participate in QIPMO encourage staff to develop quality improvement programs and to identify “best practices” for the care of residents in areas such as fall prevention programs, continence restoration, pressure ulcer prevention, mobility improvement, care planning, managing behavioral symptoms, nutritional improvement, and pain management,</p>					<p>service is emerging with Nursing Home Administrator “support groups” which are held regionally so that administrators can receive much needed peer and coaching social support and encouragement as well as information on key important topics such as regulation changes, new survey processes, new ideas for human resources (recruitment and retention), and others. The support groups have been</p>

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				which can truly improve the quality of care and outcomes of their residents. The leadership coaching services expect to result in the following improvements: prevention of nursing home closure and resident relocations, reduced administrator turnover, reduced staff turnover, reduced citations, improved business "bottom lines," and improved job satisfaction. Ultimately, with these improvements, there are better working conditions for staff and that sets the stage for improved care delivery to nursing home residents. Continued					very helpful for MDS coordinators as a service provided by the nurses in the QIPMO service of the QIPMO program. The use of webinars is growing among administrators. These help busy administrators keep up on important topics while remaining in their buildings, accessible for their staff and emergencies. The services are highly used by nursing homes in the state and evaluations completed with the services by administrators of

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				benefit to nursing home residents after training and technical assistance, whether through onsite visits, webinars, face-to-face training, group visits, or support group meetings, is accomplished by providing resources, manuals, archiving webinars, and providing a comprehensive website for facilities to continue to benefit from QIPMO services. The QIPMO program also maintains a website ( <a href="https://nursinghomehelp.org/">https://nursinghomehelp.org/</a> ) that provides all facilities the opportunity to benefit from educational resources, including past, present,					facilities are extremely positive. In an analysis completed in 2018, following administrator coaching site visits, there is a trend toward improvement in scope and severity of survey deficiencies and licensed nursing home administrator turnover. These are extremely important outcomes for nursing home residents and staff. Leadership turnover is a major disrupter in organizations, resulting in direct care staff turnover

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				and future webinars. Facilities can access these materials and webinars at any point in time.					and lower quality of care. Finding potential cost-effective solutions to administrator turnover, such as the Administrator Coaching Service, could likely be one of these much sought after solutions.
Missouri	\$77,265.00	December 1, 2017 – June 30, 2019 (19 months)	Restorative Sleep Vitality Program (RSVP)	a) The goal of this project is to support residents' health and well-being by helping them to have a more restful and refreshing sleep throughout the night. b) Provide technical assistance and support to homes in regional learning sessions and phone consults to help	Missouri Coalition Celebrating Care Continuum Change (MC5)	Missouri nursing homes	Obtain corporate level commitment from a minimum of 40 homes to provide resources and support to implement an RSVP quality improvement project in their home. Provide technical assistance and support to these homes in meetings to	Direct Improvements to Quality of Life	Results pending

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				them implement an RSVP program in their home. Utilize sleep trainers and consultants on this project, utilizing the quality improvement methodology of the Institute for Health Improvement (IHI) Collaborative Model and Quality Assurance Performance Improvement (QAPI) tools to coach homes through the needed changes. Each home will engage a multi-disciplinary team that includes direct care staff to successfully implement and operationalize five operational interventions to reduce sleep			help them implement an RSVP program in their homes. Utilize the quality improvement methodology of the IHI Collaborative Model and QAPI tools. Track pre- and post-project four quality measures in each home to determine depth of improvement: Depression, Behaviors, Pain in Long Term Residents, Use of Antipsychotics, and Pressure Ulcers.		

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				disturbances and three interventions to keep residents awake and engaged during the day. c) Quality sleep is essential for nursing home residents to maintain general health, but also to enhance their quality of life. Lack of sleep increases risk for falls, sensitivity to pain, as well as depression and memory loss. It can also reduce hastily prescribed and unnecessary prescriptions for sleep or agitation, which have side effects and can be habit forming. A good night's sleep was proven to reduce falls. Articles support reduction in					

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				agitation and combative behavior. This project has the potential to greatly improve the residents' overall quality of life and to support person-centered care planning practices of the homes.					

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<b>Colorado</b>	\$20,000.00	March 28, 2016 – March 28, 2017 (12 months)	Eliminating Alarms and Falls, Cycle 7	Educate provider communities about the correlation between alarms and falls; introduce care teams to strategies for reducing the use of alarms.	Edu Catering	Nursing home staff and residents in participating facilities	Monthly reports; communication materials with/for participants; program information; presentation and survey; summary report and presentation.	Training	As a result of the project, a substantial reduction in alarms was seen in participating facilities.
<b>Colorado</b>	\$20,941.00	March 11, 2016 – March 11, 2018 (24 months)	Create and Update Information Resources for the MOST (Medical Orders for Scope of Treatment)	The project will create and update MOST.	Colorado Advance Directives Consortium	This will help improve quality of care for nursing home residents.	Monthly reports and invoices; communication with participants; program promotion, presentation, and survey; summary report and presentation. This program aims to increase awareness of utilization of the MOST program.	Training	No data available
<b>Colorado</b>	\$11,860.00	February 11, 2016 –	Provide Comfort	This project is focused on provider adoption of	Christian Living	Christian Living	Monthly reports and invoices; final	Training	The training was well received by



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		February 11, 2017 (12 months)	Matters Dementia Program Training to Providers	person- centered dementia care approaches.	Communi- ties (currently d/b/a The Suites at Someren Glen)	Community residents and staff	presentation.		providers, who retained discussion points about strategies for interacting with individuals experiencing dementia symptoms.
Colorado	\$13,104.00	February 11, 2016 – February 11, 2018 (24 months)	Eden Education Training	The Eden Education Training program will be implemented.	Eben Ezer Lutheran Care Center	This will provide better quality of care to nursing home residents. Target audience beyond nursing home residents: nursing home facility staff	This project will provide the Eden Education Growth Program training on approaches to care.	Training	No data available

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<b>Colorado</b>	\$9,872.00	February 23, 2016 – February 23, 2017 (12 months)	Develop a Certified Nursing Assistant (CNA) Program	This project will expand the availability of CNAs, enabling more consistent assignments.	Spanish Peaks, Huerfano County Hospital District	Nursing home residents in Huerfano County	Monthly reports and invoices; communication with participants; program promotion, presentation, and survey; summary report and presentation.	Training	Five full time (FTE) and five as needed (PRN) staff added to staffing pool.
<b>Colorado</b>	\$28,257.00	February 12, 2016 – February 12, 2018 (24 months)	Increase the time that food is available for residents, decrease the use of artificial supplements, and decrease weight loss	This project will work towards the utilization of a habitation model of care. The project focuses on food and its ability to improve the well-being of those living with dementia.	Brookshire House d/b/a Conifer Care Communities, LLC	As part of this project, person-centered dementia training will also be provided for all staff and care partners.	This project is designed to educate and enable care partners to provide “real food when and where elders want it” in order to: 1) change the environment in which those living with dementia obtain their daily meals, and 2) help decrease use of supplements and weight loss in those living with dementia.	Direct Improvements to Quality of Life	No data available

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Colorado	\$54,000.00	June 30, 2016 – June 30, 2018 (24 months)	Intergenerational Summer Camp	A group of elders will be trained to guide the experience and/or parts of the camp with the youth attending camp. Focus Consultation and Edu-Catering will provide on-site facilitation, support, and direction for each camp.	Focus Consultation	Elders; youth attending camp	An intergenerational camp facilitator's guide will be drafted at the onset of the project and revised after each of the camps, based on lessons learned.	Direct Improvements to Quality of Life	No data available
Colorado	\$38,793.00	November 15, 2016 – November 15, 2018 (24 months)	Person-Centered Dementia Care: Reducing Anxiety and Agitation to Improve Well-Being, Cycle 8	This project will provide training and consultation on reducing resident anxiety and agitation for staff and families at six skilled care communities in the Denver Metropolitan area.	Alzheimer's Association Colorado Chapter	Bear Creek Center; Bethany Rehab Center; Forest Street Compassionate Care Center; Garden Terrace; Health Center at Franklin	Expected deliverables for staff and families include greater knowledge of: identifying triggers for behaviors; the process for assessing challenging behaviors; and strategies to address common dementia-related behaviors. As a result of the training, staff and families will	Training	No data available

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						Park; Julia Temple Health Care Center	have more confidence in their skills and abilities.		
<b>Colorado</b>	\$146,875.00	November 22, 2016 – June 30, 2019 (31 months)	Music and Memory Program	There will be a creation of a Music and Memory program.	Colorado Health Care Association	This will lead to higher quality of care provided for nursing home residents.	Through this project, items necessary for implementing the Music and Memory program will be purchased and deployed.	Direct Improvements to Quality of Life	Results pending
<b>Colorado</b>	\$33,662.00	November 2016 – November 2017 (12 months)	Restorative Sleep Vitality Program	The project seeks to improve the lives of residents by utilizing approaches that will improve the quality of their sleep. Through this project, three variables will be introduced: reduction in noise, light, and inactivity during waking hours. These will be introduced in an	Vivage	Nursing home residents of three Colorado long-term care facilities	Data will be collected on the changes made through this project and will help identify what improves sleep, enabling new night-time practices to be extended throughout Visage's communities. Sleep patterns will be measured, and each	Direct Improvements to Quality of Care	There was documented reduction in sleep disturbances and reported improvements in well-being. The facility discovered and eliminated industrial level noise at night in some areas of the facility.

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				attempt to mitigate the negative aspects that these variables have on the quality of residents' sleep. This project is designed to provide person-centered training for residents, families, and staff in order to reduce resident falls, pain, behaviors, and pressure ulcers.			of the three participating communities will measure indicators that they believe will be affected by this project (considering their unique populations). These indicators are: falls, pain, and pressure ulcers.		
<b>Colorado</b>	\$13,857.00	January 1, 2017 – November 3, 2018 (22 months)	Centers for Medicare & Medicaid Services (CMS) Dementia Care Focused Survey	CMS dementia care focused survey training will be provided.	Edu-Catering	This will provide knowledge to provide higher quality of care to nursing home residents.	11 workshops will be conducted throughout the state; communication with participants, monthly reports, and invoices will be delivered; and survey, summary report, and presentation will be provided.	Training	No data available
<b>Colorado</b>	\$7,521.85	January 12,	Promote	This intergenerational	Green	Residents of	Monthly project	Direct	Residents and

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		2016 – January 12, 2017 (12 months)	Stronger Relationships Across Generations	program uses gardening as a means to build relationships and shared knowledge.	House Homes at Marisol	Green House Marisol	progress reports (including information on any setbacks or lessons learned), as well as invoices for purchased supplies will be submitted.	Improvements to Quality of Life	children who participated provided positive feedback. Residents now have small garden areas for each home.
<b>Colorado</b>	\$1,000.00	November 1, 2017 – June 30, 2018 (8 months)	Meaningful Ways to Honor Death in Long-term Care Communities	The project aims to identify meaningful ways to honor death. This project seeks to develop best practices for honoring death in long-term care facilities.	Larimer County Area on Aging	This will provide more sensitivity training and better delivery of care to nursing home residents.	This will provide more sensitivity training and better delivery of care to nursing home residents.	Consumer Information	No data available
<b>Colorado</b>	\$7,437.00	December 1, 2017 – June 30, 2018 (7 months)	It's Never Too Late (iN2L) – Alzheimer's Unit	This project will enable a rural facility to purchase iN2L system for their Alzheimer's unit.	Southeast Colorado Hospital District	This will improve nursing home resident quality of	Through the program, the facility aims to reduce sundowning. The facility will also compare usage of iN2L in the	Direct Improvements to Quality of Life	No data available

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						care. Target audience beyond nursing home residents includes rural facilities.	Alzheimer's unit with usage of the existing system in other areas.		
<b>North Dakota</b>	\$12,000.00	July 5, 2017 – November 30, 2017 (5 months)	Infection Control in Long Term Care Facilities	This two-day presentation by Karen Hoffman and Evelyn Cook was specifically planned to address the requirement of the infection preventionist at each nursing facility. The content of the presentation was directed at infection prevention staff and covered all aspects of nursing home infection control.	Karen Hoffman; Evelyn Cook	All nursing home residents in North Dakota	Two-day presentation was attended by 100 staff from the 80 nursing homes in North Dakota. We plan to monitor the infection control citations into the future to see if they are affected by the increased training opportunity.	Training	70 of North Dakota's 80 nursing homes had representation at this two-day training that took place on October 26 and 27, 2017. All State Agency surveyors were at the presentation. Many questions were answered by the presenters, and the post presentation evaluation was

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									positive.
<b>South Dakota</b>	\$8,586.00	September 27, 2017 – September 28, 2017 (2 days)	Project to improve person-centered care within long-term care (LTC) facilities in South Dakota	South Dakota Healthcare Association 66th Annual Fall Convention Educational Sessions on the New Requirements of Participation (ROPs): The purpose of these sessions is to ensure that long-term care centers understand the person-centered care regulations in the new ROPs that are scheduled to be implemented in the fall of 2017. The sessions will feature presentations by Carmen Bowman, a nationally recognized leader and expert in the long-term care regulatory environment and implementing change in long-term care centers.	South Dakota Health Care Association	All (109) long-term care facilities in South Dakota	The attendees will be tracked by scanning name badges at the sessions, ensuring that only those who were in attendance receive continuing education credit. After the Convention is complete, evaluations will be distributed to the attendees to gather feedback from the various disciplines and ensure completion of the objectives for the sessions.	Person-Centered Care	The projected outcome is increased understanding in long-term care providers about the CMS definition of person-centered care, and the reinforcement of culture change in centers. The sessions will discuss the regulatory requirements, as well as what's new and what remains constant in the regulations, and the culture change aspect of person-centered care. In addition, long-term



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				The educational sessions will be in-person, face-to-face learning opportunities. The session objectives have been identified as follows: providers will be able to list the new Centers for Medicare & Medicaid Services (CMS) requirements in regard to person-centered care, providers will be able to describe culture change best practices that enhance compliance with the ROPs, and providers will be able to assess their center's compliance with the new regulations.					care centers will be given educational materials around these topics to take back to their centers, giving them a resource to draw on as they implement changes.
<b>South Dakota</b>	\$4,800.00	November 15, 2017 – May 31, 2018	South Dakota Association of	Goal: To address the overarching view of person-centered care. Objective: Provide	SDAHO	64-member providers of the SDAHO	Expected outcomes include: Information and techniques to apply at	Training	No data available

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		(7 months)	Healthcare Organizations (SDAHO) Long Term Care Educational and Training Sessions	focused guidance on resident rights; resident councils; services and programming for residents with dementia; abuse and neglect; interventions to reduce antipsychotics; care planning and discharge planning; and behavioral services.			the facility level to implement the new requirements. Interventions and best practices to implement to improve resident care through the activities and social services departments. Continuing education would be provided to attendees. Following the seminar, further education will be planned as needed by the attendees and provided in the seminar feedback. Measures: Attendance at the seminar. Post-survey for participants to		

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							evaluate seminar.		
Utah	\$200,000.00	July 1, 2017 – June 30, 2018 (12 months)	Oral Health Project	Provide a one-year oral health program to 10 certified long-term health care facilities. The project's staff will work to create an oral health program to benefit nursing home (NH) residents.	Senior Charity Care Foundation	The project's staff will work to create an oral health program to benefit NH residents.	The project will impact approximately 600 residents by giving them access to care that otherwise may have been out of reach or financially unreasonable.	Direct Improvements to Quality of Care	The Senior Charity Care Foundation provided dental care to 224 patients at nine different nursing care facilities in Utah. This included over 2,700 evaluations, X-rays and procedures for these patients. All of the provided dental care procedures were not covered by Medicaid or any other payment source.

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Arizona	\$100,000.00	July 1, 2015 – June 30, 2017 (24 months)	Music and Memory Program for Improving Dementia Care	This project will implement the Music and Memory program to decrease behavioral symptoms of dementia and advance better quality of life for residents.	13 Arizona nursing homes	Residents and staff of the participating long-term care facilities	A decrease in the use of some medications is expected.	Direct Improvements to Quality of Life	The prevalence of antipsychotic use for long-stay residents in Arizona decreased by 1.4% from 2016.
Arizona	\$18,000.00	June 9, 2017 (1 day)	Long-Term Care (LTC) Health Care-Acquired Infection Conference	Through this one-day conference, current best practices for infection control will be identified, with an emphasis on <i>Clostridium difficile</i> infection.	Arizona Department of Health Services (ADHS) Bureau of Long-term Care Licensing; ADHS Healthcare Acquired Infection Program (LTC Sub-committee);	Residents and staff of participating Arizona long-term care facilities	APIC will present this conference, advancing better awareness of infection control. An expected measure is the reduction of infection control citations (which in turn leads to a healthier LTC resident population).	Training	With an intensive one-day training, the goal was for the long-term care facilities to reduce the number of infection control citations. The number of citations for infection control stayed consistent from 2016 to 2017.

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					Association for Professionals in Infection Control and Epidemiology (APIC) Consulting				
<b>California</b>	\$1,445,573.00	July 1, 2015 – June 30, 2018 (36 months)	Music and Memory Program for Improving Dementia Care	This project will help advance the campaign to improve dementia care in California's skilled nursing facilities by using the Music and Memory program, which uses personalized music for residents.	State of California; California Association of Health Facilities (CAHF)	At least 300 participating skilled nursing facilities will benefit from the project; this correlates to 4,500 residents. Additionally, up to a total of 1,200 facilities can benefit from	Improve dementia care and quality of life for residents and identify quality assurance performance improvement (QAPI) practices that sustain the program's longevity at participating facilities. The University of California-Davis School of Nursing principal researcher will be measuring the	Direct Improvements to Quality of Life	The study did not include resources or training on how to continue the program evaluation, though facilities can manage change and monitor progress through the resident care plan. Facilities were encouraged to use QAPI practices to maintain program quality and expand the program to interested families

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						available materials on the CAHF website.	residents' improvement throughout the course of the study only. The final report will be available to all participating facilities and posted to CAHF's website for the balance of the 1,200 facilities.		and residents.
<b>California</b>	\$1,102,342.00	July 1, 2017 – December 31, 2020 (41 months)	Improving Quality of Dietary Services in California Skilled Nursing Facilities	Help advance campaign to improve dietary services care in California's skilled nursing facilities through the use of good diet for residents. Improve dietary services and quality of life for residents and identify quality assurance performance improvement (QAPI)	California Association of Health Facilities	Nursing home residents; dietary services staff	At least 300 skilled nursing facilities participating in the study will benefit if they follow through and continue using the program after the study concludes; this correlates to 4,500 residents. Additionally, up to a total of 1,200 facilities will benefit if they	Direct Improvements to Quality of Life	Results pending

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				practices that sustain the longevity of the program at facilities.			participate in the program.		
Hawaii	\$4,995.00	June 2016 – May 2017 (12 months)	Translation of the Physician Orders for Life-Sustaining Treatment (POLST) Form	In an effort to broaden the understanding and use of the POLST form in Hawaii, this project will translate the POLST form into a variety of local languages.	Kokua Mau	All nursing facilities; home health agencies; and hospitals in Hawaii	POLST form translated into 10 local Hawaiian languages.	Consumer Information	Translations of the POLST form were made into the 10 most-needed languages (as determined by the State Office of Language Access). The translations are available on the Kokua Mau website: <a href="http://www.kokuamau.org/languages">www.kokuamau.org/languages</a> . The grantee has received positive feedback on the translations and plans to survey people about their use. Social workers, nurses, and doctors

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									report that they like to have the translations available to help work through the documents with patients and families. The grantee has also received calls from family members who share positive feedback about working with the form.
<b>Nevada</b>	\$821,323.00	May 1, 2016 – April 30, 2018 (24 months)	Decrease Falls in Skilled Nursing Facilities (SNFs)	a) This project aims to decrease falls in selected Nevada SNFs by 25%. b) The Comprehensive Resident Safety and Prevention Program (CRiSP) program is comprised of four key pillars, which contain a collection of best	Health-Insight	13 nursing homes	The project led participating nursing homes through the use of the CRiSP program, which is comprised of four key pillars, containing a collection of best practices to guide facilities in improving	Direct Improvements to Quality of Care	13 SNFs were recruited to participate in the CRiSP program with a goal to reduce falls and falls with injury. The results were mixed. Four SNFs have seen a significant decrease



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				practices to guide facilities in improving their organizational systems through education and quality improvement. c) This will improve nursing home resident quality of care.			their organizational systems through education and quality improvement. These pillars are Culture Change (commit across the organization, develop team skills, adopt safety culture); Leadership (support the front lines, provide coaching and mentoring, establish vision and expectations); Safety (customize care plans, observe and monitor, conduct safety briefings); Measurement (collect data, monitor performance, integrate with QAPI).		in falls with major injury since implementing many of the strategies promoted by CRiSP. The nursing homes that have not achieved the desired reduction in falls and falls with major injury have had a more difficult time with a consistent, standardized approach to changing systems and processes related to identifying residents at-risk for falling, to identifying the true reason for falls when they occur and aligning fall prevention strategies

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							On-site visits were conducted, data analysis conducted, including baseline data and data submitted by participating nursing homes; staff education on CRISP, including identifying fall prevention and reduction intervention strategies.		with the root cause of the fall.
<b>Nevada</b>	\$180,794.00	December 31, 2016 – December 31, 2018 (24 months)	Music and Memory	The goals of the Nevada Music & Memory Initiative included: 1) Enhanced engagement and socialization. 2) A reduction in resident agitation and sundowning. 3) Further reduction in the off-label use of anti-	Nevada Health Care Association; Perry Foundation	18 nursing homes	This project will implement a Music & Memory program in participating nursing homes to enhance engagement and socialization, reduce resident agitation and sundowning, and further reduce off-label use of anti-	Direct Improvements to Quality of Care and Life	The overall conclusion is that the Nevada Music & Memory initiative had a positive outcome for those living with Alzheimer's and other dementia related diseases in Nevada's nursing

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				psychotic medications.			psychotic medications. Participating facilities were asked to complete a quarterly resident assessment on each of their program participants and submit the data to the Perry Foundation for analysis.		facilities. The results showed that residents had a positive response to the interventions for the goal of enhanced engagement and socialization; a high positive response related to a reduction in resident agitation and sundowning; and participants self-reported a 52% reduction in the use of anti-psychotic medications.
<b>Nevada</b>	\$418,246.00	August 1, 2016 – July 31, 2018 (24 months)	Antimicrobial Forecast Project	This project will create a consolidated, integrated, and comprehensive view of antimicrobial resistance patterns in the	University of Nevada, Reno	5 nursing homes	Education and training was provided and included topics such as describing the nature of the	Infection Control/ Antibiotic Stewardship	The system known as Statera (formerly known as ARIS) is now deployed in a live clinical setting,

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				State of Nevada. This will allow for nursing home residents to have a higher quality of care.			current situation in Nevada regarding drug resistance, addressing the prescriber side of inappropriate antibiotic use, and clinical outcomes of stewardship. Clinical guidance was produced, including empiric prescribing guidelines.		where a consulting pharmacist is using the capability with two skilled nursing facilities to promote antimicrobial stewardship in compliance with the new Centers for Medicare & Medicaid Services standards for stewardship. It was also notable that these facilities have struggled with Clostridium difficile outbreaks, and fluoroquinolone use is a known risk factor. The involved medical director changed his prescribing practice, and the consulting

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									pharmacist has been monitoring the culture and sensitivity results from these residents.

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Alaska	\$48,000.00	October 15, 2016 – January 30, 2017 (4 months) Conference held: January 9-10, 2017	Long Term Care (LTC) Leadership Conference to Improve Resident Quality of Care	The intended outcome of this conference is for leadership to learn new, emerging information and best practices and bring this knowledge back to their facilities. This will enable them to implement changes in their facilities, leading to improved services (which will have a positive impact on residents).	State of Alaska's Health Facilities Licensing and Certification	18 long-term care facilities in Alaska	Conference registration; materials; air fare; lodging for three nights; and transportation.	Training	The 18 facilities participated, and the conference was successful. Information was shared from several state divisions, the Quality Improvement Organization (QIO) and the LTC association. The leadership of the LTC facilities actively participated and have shared that the event enabled them all to learn of upcoming changes and available resources all at one time.
Idaho	\$49,312.28	2016 – 2018	Oneida County	This project focuses on the implementation of a	Oneida County LTC	No data available	No data available	Direct Improvements to	No data available

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		(24 months)	Long Term Care (LTC) Facility Technology Grant	variety of technologies for improving the quality of life for residents of the Oneida County LTC facility. Through this grant, technology will be used to deliver an assortment of activities, as well as provide each resident with personalized digital music and photos.	Facility			Quality of Life	
<b>Idaho</b>	\$48,044.18	2016 – 2018 (24 months)	Idaho State Veterans Home Boise (ISVH-B) Long Term Care Technology Grant	Through this project, technology products will be purchased; these technologies will foster independence for residents with visual and/or auditory impairments by making information available in large, clear, glare-free print, and/or loud volume. The project's intended	ISVH-B	No data available	Secure three SMARTboard interactive white boards, accompanying portable stands, and dedicated computers, as well as three sets of flight simulators with accompanying hardware. Additionally, ISVH-B	Direct Improvements to Quality of Life	No data available

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				outcomes include increased cognitive function and decreased anxiety of residents. The project is part of ongoing efforts to foster independence, improve quality of life, and provide person-directed care for ISVH-B residents.			will secure 25 iPads with carrying cases and screen protectors.		
<b>Idaho</b>	\$49,172.00	2016 – 2018 (24 months)	Idaho State Veterans Home Lewiston (ISVH-L) Long Term Care Technology Grant	The objective of this project is to purchase technology products that enable improvements in the quality of life and care that residents receive daily.	ISVH-L	No data available	No data available	Direct Improvements to Quality of Life	No data available
<b>Idaho</b>	\$49,415.63	2016 – 2018	Idaho State	Through this project, technology products will	ISVH-P	No data available	Secure three SMARTboard	Direct Improvements	No data available



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		(24 months)	Veterans Home Pocatello (ISVH-P) Long Term Care Technology Grant	be purchased; these technologies will foster independence for residents with visual and/or auditory impairments by making information available in large, clear, glare-free print, and/or loud volume. The project's intended outcomes include increased cognitive function and decreased anxiety of residents. The project is part of ongoing efforts to foster independence, improve quality of life, and provide person-directed care for ISVH-P residents.			interactive white boards, accompanying portable stands, dedicated computers, as well as three sets of flight simulators with accompanying hardware. Additionally, ISVH-B will secure 25 iPads with carrying cases and screen protectors.	to Quality of Life	
Idaho	\$43,399.00	2016 – 2018 (24 months)	It's Never Too Late (iN2L)	Through this project, Bingham Memorial will purchase and install iN2L	Bingham Memorial Skilled	No data available	Implementation and usage of the iN2L software and therapy	Direct Improvements to Quality of	No data available

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			Long-Term Care Technology Project	software and therapy equipment, making computer activities accessible and enjoyable for residents. iN2L provides a variety of adaptive and engaging computer-based experiences for residents. iN2L systems are particularly well-suited for dementia engagement programming, as well as innovative therapy interventions.	Nursing & Rehabilitation Center		equipment.	Life	
Idaho	\$4,790.13	2016 – 2018 (24 months)	SMART Table Technology for Residents	This project will improve quality of care and life for residents through the use of technology. In particular, technology will be utilized (in lieu of medication or alternate placement) in order to	Kindred Nursing and Rehabilitation Mountain Valley	No data available	Through this project, a SMART table will be deployed at the facility. The PHQ-9 depression assessment will be administered to ascertain whether a	Direct Improvements to Quality of Life	No data available

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				address behavioral disturbances from residents (specifically those with dementia and depression). The SMART table will provide residents with a variety of options to interact with family members (including the ability to enlarge family pictures, watch home videos, etc.), play games, learn and review educational lessons, listen to audio books, and play trivia. This project aims to decrease: the amount and severity of behaviors noted, especially from the facility's dementia population, and depression symptoms expressed during the			decrease in depression symptoms occurs.		

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				Patient Health Questionnaire-9 (PHQ-9) depression assessment interview.					
Idaho	\$35,048.92	2016 – 2018 (24 months)	It's Never Too Late Long-Term Care Technology Project	The purpose of this project is to provide person-centered care and improve resident self-esteem and overall quality of life (including relieving feelings of hopelessness, loneliness, and boredom). Residents will use iN2L to stay engaged and connected through the use of wellness and engagement content and stay connected applications. This project also aims to reduce anti-psychotic medication use and the risks of debilitating side effects of	Desert View Care Center of Buhl	No data available	iN2L adaptive technology.	Direct Improvements to Quality of Life	No data available

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				anti-psychotic medication. It also seeks to address behavioral and psychological symptoms of dementia and traumatic brain injury, which include verbal and physical aggression, wandering, confusion and agitation.					
Idaho	\$40,000.00	May 4, 2017 – May 5, 2017 (2 days)	Resident Safety and Quality Improvement Conference	This project will provide scholarships for the following people to attend the Idaho Resident Safety and Quality Improvement Conference, “Thriving Through Change: A Rx for Resilience”: up to four staff from skilled nursing facilities (SNFs) and SNF/Nursing Facilities (NFs) (a direct care staff member, Administrator,	Idaho Board of Examiners for Nursing Home Administrators	Up to four staff from SNFs and SNF/NFs; the State Ombudsman ; LTC state agency survey staff	Each scholarship includes conference registration, as well as hotel, travel, and meal costs.	Training	No data available

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				Director of Nursing, and Quality Assurance/ Quality Improvement Coordinator); the State Ombudsman; and long-term care (LTC) state agency survey staff.					
Idaho	\$46,898.00	October 27, 2017 (1 day)	Pressure Ulcer Prevention Coalition (PUPC) Conference	This project will provide a scholarship for each skilled nursing facility to send two staff (a registered nurse and/or a licensed practical nurse) to attend the Idaho PUPC's 11 <sup>th</sup> Annual Consensus Meeting in Boise, Idaho. At the meeting, the staff will receive information and education, and will network with peers regarding how to reduce the number of avoidable, high-risk pressure	Idaho Health Care Association; PUPC	No data available	Venue, catering, speakers, continuing education, advertising, event planning services.	Training	No data available

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				injuries in residents residing in skilled nursing facilities/nursing facilities (with resulting improvement in care and quality outcome measures).					
Idaho	\$34,335.07	Summer 2017	Mini-technology	To enhance facility technology to improve quality of care and life for residents through the use of technology. To address behavioral disturbances from our residents, specifically those with dementia, depression, and behaviors, utilizing technology in lieu of medication or alternate placement. To decrease the amount and severity of behaviors noted,	Mountain Valley of Cascadia	No data available	Beams Professional Edition-Music therapy, Yamaha Acoustic Grand piano, Q-pads, smart TV, TV cart, Headphones, Xbox.	Direct Improvements to Quality of Life and Care	No data available

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				especially from our dementia population, as well as a decrease in depression symptoms expressed during the Patient Health Questionnaire-9 (PHQ-9) depression assessment interview. The table enables residents a multitude of options to interact with family members (including the ability to enlarge family pictures, and watch home videos), play games, learn and review educational lessons, listen to audio books, and play trivia.					
<b>Oregon</b>	\$200,128.00	October 17, 2017 – July 30, 2019 (22 months)	Extensions for Community Health	The Geriatric Mental Health Long-term Care ECHO Program in Oregon utilizes the	Oregon Health & Science University,	Residents with challenging mental	Intended outcomes of increased resident placement stability, resident satisfaction,	Direct Improvements to Quality of Life	Results pending



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			Outcomes (ECHO) Nursing Facility Behavioral Health	evidence-based success of the University of New Mexico's Project ECHO. This innovative format uses "hub-and-spoke" networks led by a "hub" of experts using multi-point videoconferencing to conduct virtual clinics with community providers. The University of Rochester has used the ECHO model to effectively telementor 50 nursing facilities in 10 counties in New York state, providing access to geriatric mental health experts to long-term care providers. Goals: The immediate goal of the ECHO Program is increasing the knowledge, skills, and	acting by and through its Oregon Rural Practice-based Research Network	health and behavioral care needs; nursing facility care teams	improved quality of assessments and care plans, and staff statements of growing confidence in providing behavioral care. Long-Term Goals and Benefits: The long-term goal of the ECHO Program is the creation of a stable knowledge base in facility care teams, evidenced by consistent development of person-centered care plans, reduction in emergency hospital transfers for behavioral crisis, denial of right to return-readmit-		

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				confidence of the nursing facility care teams to quickly detect and effectively treat mental health and behavioral care needs, employing person-centered psychosocial interventions and appropriate psychopharmacology. Improvement is expected in the competency of care provided to current residents with challenging mental health and behavioral care needs, with intended outcomes of increased resident placement stability, resident satisfaction, improved quality of assessments and care			involuntary transfer, willingness to admit individuals with mental health and behavioral care needs, and staff statements of confidence and satisfaction in providing behavioral care. Intended long-term outcomes include: (1) Knowledge and skills to recognize the signs and symptoms of common geriatric mental health issues, such as dementia, depression, anxiety, substance abuse and behavioral issues. (2) Knowledge of broad classes of		

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				plans, and staff statements of growing confidence in providing behavioral care. Long-Term Goals AND Benefits: The long-term goal of the ECHO Program is the creation of a stable knowledge base in facility care teams, evidenced by consistent development of person-centered care plans, reduction in emergency hospital transfers for behavioral crisis, denial of right to return-readmit-involuntary transfer, willingness to admit individuals with mental health and behavioral care needs, and staff statements of confidence			medications used to treat mental health conditions. (3) Skills to conduct psychosocial assessments through both structured forms and information gathering. (4) Skills to provide psychosocial and behavioral interventions that enhance coping skills of nursing facility residents and their families. (5) Strategies to meaningfully engage nursing facility residents. (6) Self-care skills for nursing facility staff. (7) Job satisfaction		

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				and satisfaction in providing behavioral care.			and retention of nursing facility staff. (8) Collaboration among nursing facility staff. (9) Increased expertise with person-centered care and individualized decision making		
Oregon	\$149,580.00	October 1, 2017 – September 30, 2018 (12 months)	Voicing Importance and Experience for Well-Being (VIEW), Portland State University, is an instrument that seeks and	Portland State University's Institute on Aging is developing a tool to assess person-directed care from the point of view of residents, called the Resident VIEW. This previously was called the "Person-Directed Care Instrument for Residents." When completed, the Resident VIEW can be used as an instrument and tool in	Portland State University Institute on Aging 506 SW Mill, Portland OR 97201	Residents who are not receiving support that is important to them; staff in any long-term care setting	By staff in any long-term care setting to identify areas in which residents are not receiving support that is important to them and to use that information to address shortcomings through service plan changes, training or program changes. -Ensure individual residents are	Direct Improvements to Quality of Life	No data available

State Civil Money Penalty Reinvestment Projects Funded in Calendar Year (CY) 2017

Region 10

State	Total amount of State CMP funds obligated for each project (all years)	Anticipated project duration	Title of each approved project funded in whole or in part with State CMP funds	Brief description of the goals and objectives of the project	List entity (ies) that received funding and will carry out the project	List entity (ies) that will benefit from the project	Expected deliverables or metrics for the project	Project category	Results of the project
			collects data related to the resident's perspective on their care	multiple ways, such as: By staff in any long term care setting to identify areas in which residents are not receiving support that is important to them and to use that information to address shortcomings through service plan changes, training or program changes; To assess progress toward reducing institutionalization and supporting autonomy, choice and dignity; By surveyors to determine if residents are getting the type of care that is important to them; and By researchers to gather evidence of best			receiving care in ways that are meaningful and important to them. -Facility staff to develop more person-centered, comprehensive care plans. Identify gaps in care and develop training topics for staff to address these gaps. Assess progress toward reducing the institutional milieu of many nursing homes by supporting autonomy, choice, and dignity. Measure resident satisfaction and quality in a meaningful and		

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				<p>practices in person-directed care.</p> <p>Benefits to nursing home residents: The Resident VIEW tool will help Ensure individual residents are receiving care in ways that are meaningful and important to them.</p> <p>Facility staff to develop more person-centered, comprehensive care plans.</p> <p>Identify gaps in care and develop training topics for staff to address these gaps.</p> <p>Assess progress toward reducing the institutional milieu of many nursing homes by supporting autonomy, choice and dignity.</p>			<p>person-centered way. Researchers gather evidence of best practices in person-directed care in nursing homes and identify specific ways to improve practices to meet CMS person-centered care guidelines and identify resident preferences and concerns. Increase attention to resident voices to guide planning and care.</p>		

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				<p>Measure resident satisfaction and quality in a meaningful and person-centered way. Researchers gather evidence of best practices in person-directed care in nursing homes and to identify specific ways to improve practices to meet Centers for Medicare &amp; Medicaid Services (CMS) person-centered care guidelines and identify resident preferences and concerns.</p> <p>Increase attention to resident voices to guide planning and care.</p> <p><i>Non-Supplanting</i></p> <p>The use of the Resident VIEW instrument does not supplant facilities'</p>					

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				responsibilities to meet the Medicare/Medicaid requirements. It will give the nursing home an additional tool to measure and enhance the ability to measure quality of care and quality of life of residents. <i>Consumer and other Stakeholder Involvement</i> The initial tool was reviewed by members of Making Oregon Vital for Elders (MOVE), Oregon's Pioneer Network-affiliated collaborative. Included were representatives from the Oregon Patient Safety Commission, the Oregon Long Term Care Ombudsman, the Oregon Health Care Association,					



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				and Health Insight Oregon.					
Washington	\$124,486.50	September 15, 2017 – May 1, 2019 (20 months)	Music and Memory	The project will provide funds to 42 facilities in Washington State for the implementation of a Music & Memory program.	LeadingAge Washington	45 facilities in Washington state	The funds will be used for training, equipment purchase, and purchase of a Music & Memory certification.	Direct Improvements to Quality of Life	Results pending