



**REGION IV  
ATLANTA**

**Civil Money  
Penalty Reinvestment  
Program Update  
for 2017–2018**

***Putting the Pieces of the Puzzle Together to Foster  
Improved Resident Outcomes and Better Care***

# INTRODUCTION: CMP Reinvestment

We are excited to share with you current and relevant information on the Civil Money Penalty (CMP) reinvestment program and CMP projects in Region IV. A civil money penalty (CMP) is a monetary penalty CMS may impose against skilled nursing facilities (SNFs), nursing facilities (NFs), and dually-certified SNF/NF for either the number of days or for each instance a facility is not in substantial compliance with one or more Medicare and Medicaid participation requirements for Long Term Care Facilities. CMP reinvestment funds are administered by the Centers for Medicare & Medicaid Services (CMS) to states for the implementation of support activities that benefit nursing home facility residents by improving their quality of care or quality of life.

Joint collaboration with internal and external stakeholders since 2012 has resulted in some dynamic projects to benefit residents in certified nursing homes in the Southeastern United States. It is, therefore, our pleasure to share some success stories resulting from CMP reinvestment. What is a success story? A success story shows how the project has made a difference in residents' lives. It describes positive change and benefits. We hope that other certified nursing homes and stakeholders will be encouraged to pursue additional CMP reinvestment opportunities in the future. The CMP coordinators in each Region IV state are provided at the back of this booklet for easy reference, as well as, the national CMP reinvestment website.

Additionally, we provide information on how the CMP reinvestment program has grown and expanded since 2012 with the dedicated support and initiative of our state agency colleagues, the LTC Ombudsman and Region IV Quality Improvement Organizations (QIOs).

From 2012 through 2016, 140 CMP projects were approved to benefit residents, totaling approximately \$17,246,811.63. From 2017 through 2018, 78 new CMP projects were approved to benefit residents, totaling approximately \$20,635,543.84. A summary of newly approved projects for 2017-2018 is included in this report. Once a project is approved by CMS, the entity that has been approved funding develops a contract with the applicable state. Projects pending a contract with the state are highlighted in yellow in [“Summary of State Use of CMP Funds 2017-2018”](#) table found on page 6.



# Background of the CMP Program

Sections 1819(h)(2)(B)(ii)(IV)(ff) and 1919(h)(3)(C)(ii)(IV)(ff) of the Social Security Act (the Act) incorporate specific provisions of the Patient Protection and Affordable Care Act, (the Affordable Care Act) (Pub. L. 111-148) pertaining to the collection and uses of CMPs imposed by CMS when skilled nursing facilities (SNFs), nursing facilities (NFs), and dually-certified SNF/NF do not meet requirements for Long Term Care Facilities. The Act (and 42 CFR §488.433) provides that collected CMP funds may be used to support activities that benefit residents of these facilities including the following:

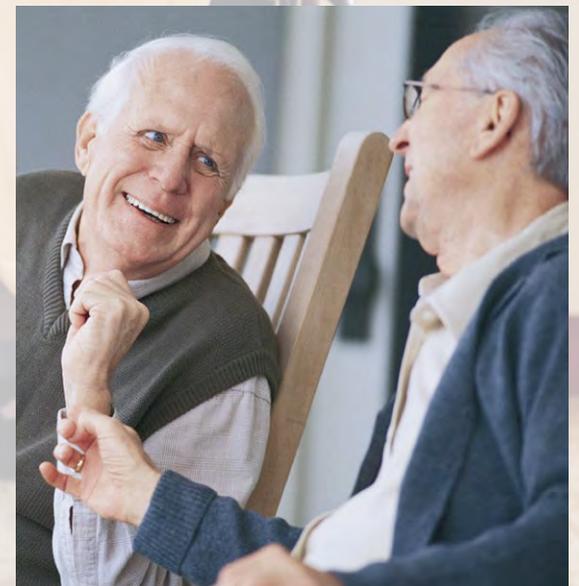
- Assistance to support and protect residents of a facility that closes (voluntarily or involuntarily) or is decertified (including offsetting costs of relocating residents to home and community-based settings or another facility);
- Projects that support resident and family councils and other consumer involvement in assuring quality care in facilities; and
- Facility improvement initiatives approved by the Secretary (including joint training of facility staff and surveyors, technical assistance for facilities implementing quality assurance programs, the development and maintenance of temporary management, and other activities approved by the Secretary).

The specific use of CMP funds collected from Long Term Care Facilities as a result of federally imposed CMPs must be approved by CMS on behalf of the Secretary. CMPs levied for deficiencies that are not federal, and instead are imposed exclusively under State licensure authority, are not subject to the statutory requirements or procedures.

States must obtain prior approval from CMS except for temporary use in the case of sudden nursing home relocations, natural disasters, or similar emergencies. In such emergency cases, the state must seek CMS approval within 10 working days of the emergency use.

States must provide information and obtain prior approval from its CMS regional office for any project for which the state wishes to use CMP funds, and CMS reserves the right to disapprove such projects.

States may target CMP resources for projects or programs available through various organizations that are knowledgeable, skilled, and capable of meeting the project's purpose in its area of expertise as long as the above criteria are met and the use is consistent with federal law and policy.



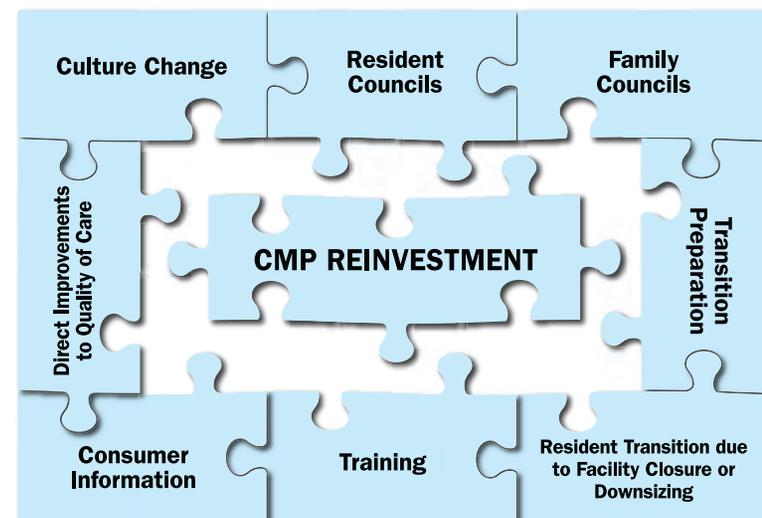
# Appropriate Uses for CMP Funds

Appropriate uses for CMP funds include, but are not limited to:

- **Culture Change:** “Culture change” is the common name given to the national movement for the transformation of older adult services, based on person-directed values and practices where the voices of elders and those working with them are considered and respected. Core person-directed values are choice, dignity, respect, self-determination and purposeful living. CMP funds may be used to promote culture change in projects that involve multiple nursing homes.
- **Resident or Family Councils:** CMP funds may be used for projects by not-for-profit resident advocacy organizations that:
  - Assist in the development of new independent family councils;
  - Assist resident and family councils in effective advocacy on their family members’ behalf;
  - Develop materials and training sessions for resident and family councils on state implementation of new federal or state legislation.
- **Direct Improvements to Quality of Care:** CMP funds may be used for projects designed to directly improve care processes for nursing home residents of multiple nursing homes.
- **Consumer Information:** CMP funds may be used to develop and disseminate information that is directly useful to nursing home residents and their families in becoming knowledgeable about their rights, nursing home care processes, and other information useful to a resident.
- **Resident Transition Due to Facility Closure or Downsizing:** CMP funds may be considered for use for the temporary support and/or protection of residents of a facility that closes or is decertified

(including offsetting costs of relocating residents to home and community-based settings or another facility), or to transition residents to alternate settings for a facility downsizing that requires a reduction in facility census.

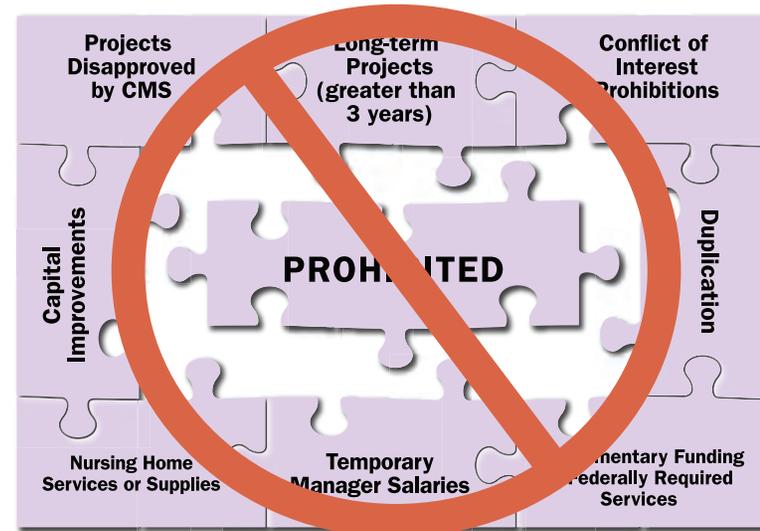
- **Transition Preparation:** CMP funds may be considered for use to fund an initial home visit for a nursing home resident to help him or her evaluate the appropriateness of a potential transition to another living arrangement or home or community-based setting.
- **Training:** CMP funds may be considered for training in facility improvement initiatives that are open to multiple nursing homes, including joint training of facility staff and surveyors, technical assistance for facilities implementing quality assurance programs, training for resident and/or family councils, LTC ombudsman or advocacy organizations and other activities approved by CMS.



# Prohibited Uses of CMP Funds

Prohibited uses of CMP funds include, but are not limited to:

- **Projects Disapproved by CMS**
- **Long-term Projects (greater than 3 years)**
- **Conflict of Interest Prohibitions:** CMS will not approve projects for which a conflict of interest exists or the appearance of a conflict of interest.
- **Duplication:** States may not use CMP funds to pay entities to perform functions for which they are already paid by state or federal sources. Also, CMP funds may not be used to fund state legislative directives for which no or inadequate state funds have been appropriated.
- **Capital Improvements:** CMP funds may not be used to pay for capital improvements to a nursing home, or to build a nursing home, as the value of such capital improvement accrues to a private party (the owner). Federal and state payments also already acknowledge the expense of capital costs, so the use of CMP funds for such a purpose would duplicate an existing responsibility of the nursing home.
- **Nursing Home Services or Supplies:** CMP funds may not be used to pay for nursing home services or supplies that are already the responsibility of the nursing home, such as laundry, linen, food, heat, staffing costs, etc.
- **Temporary Manager Salaries:** CMP funds may not be used to pay the salaries of temporary managers who are actively managing a nursing home, as this is the responsibility of the involved nursing home in accordance with 42 CFR §488.415(c).



- **Supplementary Funding of Federally Required Services:** For example, CMP funds may not be used to recruit or provide Long-Term Care Ombudsman certification training for staff or volunteers or investigate and work to resolve complaints as these are among the responsibilities of Long-Term Care Ombudsman programs under the federal Older Americans Act (OAA), regardless of whether funding is adequate to the purpose. On the other hand, there is no prohibition to an Ombudsman program receiving CMP funds to conduct or participate in approved projects, or to carry out other quality improvement projects that are not within the Ombudsman program's existing set of responsibilities under the OAA. Nor is there any prohibition to Ombudsman program staff or volunteers to participate in training that is paid by CMP funds but open to a broad audience, such as nursing home staff, surveyors, consumers, or others.

# State Use of CMP Funds Summary / 2017-2018

STATE	PROJECT NUMBER	PURPOSE OF THE CMP FUNDING	APPROVED AMOUNT	ORGANIZATION
AL	2017-04-AL-0919	To implement the “Brushing Away Infections” program in seven Alabama nursing homes to educate certified nursing assistants and licensed nurses on how to improve mouth care utilizing evidence-based mouth care practices.	\$1,744,332.00	The University of Alabama Birmingham, School of Nursing Birmingham Nursing and Rehabilitation Center, LLC Brookdale of University Park Fair Haven / Fair Haven North Fairview Health and Rehabilitation Center Oak Trace Care and Rehabilitation Center Terrace Oaks Care and Rehabilitation Center
GA	2016-04-GA-1107	To develop and implement a “Music & Memory” program for 150 Georgia certified nursing homes to enhance the quality of life for residents suffering from Dementia through person-centered care plans.	\$788,850.00	Georgia Health Care Association
GA	2017-04-GA-1219B	To purchase equipment to increase socialization, activity participation, and quality of life for long stay residents.	\$20,413.00	A.G. Rhodes Health and Rehabilitation—Cobb
KY	2016-04-KY-1216	To implement the “Living Intently and Fully Engaged (LIFE)” project with “It’s Never Too Late (iN2L)” adaptive computer technology.	\$49,051.00	Wesley Manor Retirement Community, Inc.
KY	2016-04-KY-1217	To implement the “Fulfilling Residents’ Interest & Encouraging New Discoveries (FRIEND)” project utilizing “It’s Never Too Late (iN2L)” adaptive computer technology.	\$46,485.24	Mountain Manor of Paintsville
KY	2017-04-KY-0828	To provide joint education and training to providers, Minimum Data Set (MDS) Coordinators and state agency surveyors on November 6-7, 2017 and November 9, 2017. At least 180 LTC providers and 20 OIG LTC surveyors were expected to attend each training session.	\$23,497.23	Kentucky Office of the Inspector General

# State Use of CMP Funds Summary / 2017-2018

STATE	PROJECT NUMBER	PURPOSE OF THE CMP FUNDING	APPROVED AMOUNT	ORGANIZATION
KY	2016-04-KY-1202	To implement the “Inspired Living” project in nine Kentucky nursing homes, with “It’s Never Too Late (iN2L)” adaptive computer technology. Goal is to reduce falls, improve balance and gait, increase flexibility and increase upper body, lower body, and core strength, for approximately 1,350 residents.	\$299,727.20	Trilogy Health Services Cedar Ridge Health Campus Forest Springs Health Franciscan Health Care Center Glen Ridge Health Campus Park Terrace Health Campus The Willows at Citation / The Willows at Hamburg / The Willows at Harrodsburg Westport Place Health Campus
KY	2016-04-KY-1205	To train direct care staff in how to implement “Bingocize” in 23 Kentucky certified nursing homes. This project is designed to benefit at least 1,000 residents. Bingocize is an evidence-based health promotion program that combines exercise and the game of bingo, to improve quality of life for residents. The project involves facilitating partnerships between seven universities and direct care staff in the selected Kentucky certified nursing homes.	\$772,730.00	Western Kentucky University Research Foundation, Inc.



# State Use of CMP Funds Summary / 2017-2018

STATE	PROJECT NUMBER	PURPOSE OF THE CMP FUNDING	APPROVED AMOUNT	ORGANIZATION
KY	2017-04-KY-0630	To provide joint education and training to providers and state agency surveyors on August 14-15, 2017 and August 17-18, 2017 on dementia care and antipsychotic drug reduction. The CMP project was titled, "One STOP Dementia Shop Training."	\$73,405.00	Kentucky Office of Inspector General
KY	2017-04-KY-0808	To educate approximately 4,350 providers, certified nursing assistants, surveyors, the LTC Ombudsman, the Quality Improvement Organization (QIO) and other stakeholders on the CMS Final Rule on Emergency Preparedness.	\$2,006,299.00	University of Louisville Foundation, Kent School of Social Work
KY	2017-04-KY-0124	To purchase SuzyQ food service equipment. The food service equipment will be utilized to enhance the dining room program and offer residents more food choices.	\$9,425.51	Cambridge Place
KY	2017-04-KY-0505B	To implement "It's Never Too Late (iN2L)" adaptive computer technology.	\$50,558.98	Dawson Springs Health and Rehabilitation Center
KY	2017-04-KY-0918	To implement the "Creative Community of Caring (CCC)" training program for 12 Signature HealthCare certified nursing homes in Kentucky.	\$766,098.00	TimeSlips Creative Storytelling, Inc. Fountain Circle Care & Rehab Center Lee County Care & Rehabilitation Center Morgantown Care & Rehabilitation Center Oakview Nursing & Rehab Center Riverside Care & Rehab Rockcastle Health & Rehabilitation Center Signature Healthcare at Colonial Signature Healthcare at Heritage Hall Signature Healthcare at Jackson Manor Signature Healthcare of Hart County Signature Healthcare of Spencer County Sunrise Manor
MS	2017-04-MS-1103	To purchase "It's Never Too Late (iN2L)" adaptive computer technology for Dunbar Village and River Chase Village.	\$104,105.00	Sentry Care and Sentry Rehab
MS	2017-04-MS-1121	To implement the "Person Centered Outreach Program (PCOP)" and purchase "It's Never Too Late (iN2L)" adaptive computer technology.	\$48,505.75	Mississippi Care Center of Dekalb
MS	2017-04-MS-0222	To establish two multi-sensory rooms (MSR) in two Mississippi certified nursing homes to improve the quality of life for residents with dementia and Alzheimer's disease.	\$12,350.00	Oxford Health and Rehabilitation Center New Albany Health and Rehabilitation Center

# State Use of CMP Funds Summary / 2017-2018

STATE	PROJECT NUMBER	PURPOSE OF THE CMP FUNDING	APPROVED AMOUNT	ORGANIZATION
MS	2017-04-MS-0712	To provide vivid technology televisions and speakers for residents.	\$84,500.00	Mississippi Care Center of Dekalb
NC	2016-04-NC-1130	For technology enrichment. This CMP project enables the nursing home to purchase flat screen televisions and mounts for resident rooms, wireless headphones, iPads and protective covers.	\$23,773.06	Skyland Care Center
NC	2017-04-NC-0417	To implement “It’s Never Too Late (iN2L)” adaptive computer technology.	\$20,217.00	Capital Nursing and Rehabilitation Center
NC	2017-04-NC-0717	To enhance the dining experience of residents.	\$27,461.47	Countryside Manor, Inc.
NC	2017-04-NC-1016	To implement the “Residents Engaged to Achieve Creative Heights (REACH)” project. The REACH project provides “It’s Never Too Late (iN2L)” adaptive computer technology.	\$41,024.00	Clay County Care Center
NC	2017-04-NC-0616	To implement “Seniors Staying Connected (SSC)” project to implement “It’s Never Too Late (iN2L)” adaptive computer technology.	\$25,495.00	East Carolina Rehabilitation and Wellness
NC	2017-04-NC-0922	To implement the “Engage Together Intergenerational Project.” This project allows residents to establish relationships with children through a partnership with the St. John’s Child Development Center.	\$22,003.30	Lutheran Home: Trinity Oaks Health and Rehabilitation
NC	2017-04-NC-0731	To conduct “Virtual Dementia Tours (VDTs)” in 200 North Carolina certified nursing homes.	\$1,479,261.00	200 North Carolina Nursing Homes
NC	2017-04-NC-0410	To implement “It’s Never Too Late (iN2L)” adaptive computer technology.	\$23,116.00	Woodhaven Nursing, Alzheimer’s and Rehabilitation Center
SC	2016-04-SC-0719	To develop and implement a “Music & Memory” program.	\$2,500.00	Richard M. Campbell Veterans Nursing Home
SC	2017-04-SC-0811	For the 2017 “Spirit of Caring” conference designed to promote sharing of best practices and innovative ideas that South Carolina nursing homes have implemented to improve quality of care and quality of life.	\$6,823.04	South Carolina Spirit of Caring
TN	2017-04-TN-0111	To implement a “Music & Memory” program in five nursing homes, culture change initiatives, person-centered care practices and to reduce unnecessary antipsychotic medication use among nursing home residents.	\$162,210.97	The Whitson-Hester School of Nursing (WHSON) at Tennessee Tech University Overton County Nursing Home NHC Healthcare Cookeville Bethesda Health Care Center Life Care Center of Sparta Life Care Center

# State Use of CMP Funds Summary / 2017-2018

STATE	PROJECT NUMBER	PURPOSE OF THE CMP FUNDING	APPROVED AMOUNT	ORGANIZATION
TN	2017-04-TN-0607	To implement a “Palliative Care Transition Program” in four Tennessee nursing homes affiliated with Saint Thomas Health Foundation.	\$101,212.00	The Health Center at Richland Place NHC Place Cool Springs NHC Place on the Trace NHC Healthcare Murfreesboro
TN	2017-04-TN-0608	To implement “It’s Never Too Late (iN2L)” adaptive computer technology in ten skilled nursing facilities affiliated with Tennessee Health Management, Inc.	\$493,550.87	Applingwood Healthcare Center, Inc. Bright Glade Health and Rehabilitation Center, Inc. Covington Care Nursing and Rehabilitation Center, Inc. Dyersburg Nursing and Rehabilitation, Inc. Harbor View Nursing and Rehabilitation Center, Inc. Humboldt Healthcare and Rehab Center, Inc. McKenzie Healthcare and Rehabilitation Center, Inc. Paris Health Care Nursing and Rehabilitation Center, Inc. Union City Nursing and Rehabilitation Center, Inc. VanAyer Healthcare and Rehab Center, Inc.
AL	2018-04-AL-0216	To implement the “Engage and In Touch” project utilizing “It’s Never Too Late (iN2L)” adaptive computer technology in seven nursing homes.	\$345,489.87	USA Healthcare-Alabama, LLC and Affiliates Cullman Health and Rehabilitation Center The Folsom Center for Rehabilitation and Healthcare Woodland Village Rehabilitation and Healthcare Center Decatur Health and Rehabilitation Center Adams Nursing Home Falkville Healthcare Center Haleyville Health and Rehabilitation Center
FL	2018-04-FL-0619	To implement a program for “Replacing Alarms and Reducing Falls with Better Practices.” This project involves 45 Florida certified nursing homes.	\$90,000.00	Carmen Bowman Edu-Catering: Catering Education for Compliance and Culture Change

Note: Projects pending a contract with the state are highlighted in yellow

# State Use of CMP Funds Summary / 2017-2018

STATE	PROJECT NUMBER	PURPOSE OF THE CMP FUNDING	APPROVED AMOUNT	ORGANIZATION
FL	2018-04-FL-1108	To implement a program titled, "The Electrotherapy System Project" to improve residents' quality of care by reducing pain, leading to an overall increase in their quality of life.	\$5,018.98	Whispering Oaks
FL	2018-04-FL-0712	To implement a program titled, "Transformative Leadership Academy for Person-Centered Care."	\$52,855.00	Senior Resource Alliance & Florida Pioneer Network
FL	2018-04-FL-1018	To implement an online, self-paced, wound care continuing education program titled, "The Florida Wound Care Excellence Program." The goal is to train and certify 350 nurses on critical areas of wound care to foster improvements in the quality of care provided to residents.	\$175,500.00	Vohra Wound Physicians Management, LLC
GA	2018-04-GA-1128	To foster statewide adoption of culture change and the support of person-centered care for Georgia nursing homes.	\$1,646,795.00	Dr. Jennifer Craft Morgan, Georgia State University
GA	2018-04-GA-1219B	To purchase equipment to increase socialization, activity participation and improve quality of life for short and long stay residents.	\$146,081.03	A.G. Rhodes Health and Rehabilitation-Cobb
GA	2018-04-GA-0301	To create and maintain an accessible sensory room, primarily for residents with dementia.	\$2,361.00	Budd Terrace at Wesley Woods <i>(This applicant withdrew the request after approval.)</i>
GA	2018-04-GA-0303	To provide joint education and training to providers, Quality Improvement Organization staff and LTC Ombudsman in how to implement and sustain person-centered care practices.	\$240,687.00	The Eden Alternative, Inc.
GA	2018-04-GA-0302	To implement EASIL: Emory Antibiotic Stewardship to Improve Long Term Care Lives in dually certified skilled nursing facilities located in the eight county Atlanta metropolitan area.	\$98,437.00	Dr. Scott K. Fridkin, Emory University, Office of Sponsored Programs
GA	2018-04-GA-1219	Emergency preparedness for Georgia certified nursing homes.	\$1,617,094.00	Dr. Curtis Harris, Institute for Disaster Management, University of Georgia Research Foundation, Inc.
GA	2018-04-GA-0604	To provide an opportunity infection control training for 50 Georgia certified nursing homes. The course was developed by the University of Nebraska, College of Nursing (UNCN) in partnership with the American Health Care Association. This course provides 23 CEUs.	\$53,344.00	Pam Clayton, Georgia Health Care Association
KY	2018-04-KY-0918B	To implement a program titled, "Pocket Guide to Pressure Ulcers." This project aims to widely distribute a best practices guide for preventing pressure ulcers in nursing homes.	\$44,260.00	NJHA Healthcare Business Solutions

Note: Projects pending a contract with the state are highlighted in yellow

# State Use of CMP Funds Summary / 2017-2018

STATE	PROJECT NUMBER	PURPOSE OF THE CMP FUNDING	APPROVED AMOUNT	ORGANIZATION
KY	2018-04-KY-1008	To provide joint education and training to 200 providers, Minimum Data Set (MDS) coordinators and state agency surveyors on November 27-28, 2018 on MDS 3.0 Coding & Interpretation Basics Training.	\$12,736.49	Kentucky Office of Inspector General
KY	2018-04-KY-0329	Telemedicine will be utilized to provide live programming on a quarterly basis to certified nursing facility advanced healthcare providers on dementia care. The lectures will be broadcast throughout the Commonwealth, with presentations by dementia care specialists followed by interactive Q & A sessions.	\$286,510.00	Sanders-Brown Center on Aging Medical Director, KY Telecare, University of Kentucky College of Medicine University of Kentucky Research Foundation
KY	2016-04-KY-1205	To expand the existing “Bingocize” project to include five additional nursing homes in eastern and northern Kentucky, and two additional university partners, i.e. Eastern Kentucky University and Northern Kentucky University.	\$127,945.00	Western Kentucky University Research Foundation, Inc.
KY	2018-04-KY-0613	To implement the “Enhanced Life” project at two, dually certified nursing homes utilizing “It’s Never Too Late (iN2L)” adaptive computer technology.	\$109,944.00	Christian Care Communities Louisville Christian Health Center Hopkinsville Christian Health Center
KY	2018-04-KY-0615	To implement the “Resident Engagement and Activity Program (REAP)” utilizing “It’s Never Too Late (iN2L)” adaptive computer technology.	\$53,486.62	The Jordan Center
KY	2018-04-KY-0918D	To implement a program titled, “Residents Rights Consumer Education Project.”	\$18,741.00	Ms. Sherry Culp, State LTC Ombudsman, Nursing Home Ombudsman Agency of the Bluegrass, Inc.
KY	2018-04-KY-0918	To implement a program titled, “Connected Affirmation Project,” in the Nazareth Home and Nazareth Home-Clifton Communities. Both campuses will intentionally and uniquely focus on integrating interactive technology into each campus’s current palliative care programming.	\$213,664.00	Nazareth Home Nazareth Home-Clifton

# State Use of CMP Funds Summary / 2017-2018

STATE	PROJECT NUMBER	PURPOSE OF THE CMP FUNDING	APPROVED AMOUNT	ORGANIZATION
MS	2018-04-MS-0425	To implement the “Bedford Cares: iN2L Project” for eight nursing homes in central and south Mississippi.	\$301,784.00	HMP Management Corporation Bedford Alzheimer’s Care Center Bedford Care Center of Hattiesburg Bedford Care Center of Marion Bedford Care Center of Mendenhall Bedford Care Center of Monroe Hall Bedford Care Center of Newton Bedford Care Center of Petal Bedford Care Center of Picayune
MS	2018-04-MS-0426	To implement a program titled, “Adding Life to Living, While Living in an Environment Reminiscent of Home” utilizing adaptive computer technology “It’s Never Too Late (iN2L).”	\$76,273.00	Jaquith Nursing Home – Jefferson Inn
MS	2018-04-MS-1009	To implement a program titled, “Combined Community Technology Program” in five nursing homes for 543 residents.	\$400,960.00	Washington County, LTC Inc. d/b/a Mississippi Care Center of Greenville J.G. Alexander MS Care Center of Alcorn County MS Care Center of Greenville MS Care Center of Raleigh MS Care Center of Morton
NC	2018-04-NC-1228	To implement the “Gardening and Play Program” to increase socialization, provide opportunities for gardening and enjoyable areas for intergenerational activities.	\$54,714.94	Rich Square Nursing and Rehabilitation
NC	2018-04-NC-0126	To purchase “It’s Never Too Late (iN2L)” adaptive computer technology.	\$28,438.90	The Laurels of Green Tree Ridge
NC	2018-04-NC-0502	To implement a program titled, “The Inspirational Garden.”	\$35,652.00	Whispering Pines Nursing and Rehabilitation
NC	2018-04-NC-0316	To help 66 North Carolina certified nursing homes improve the care provided to residents with dementia incorporating compassionate touch into day-to-day dementia care practices.	\$422,900.00	AGE-u-cate Training Institute
NC	2018-04-NC-0706	To purchase a soft serve ice cream machine, floor stand and food service supplies for frozen yogurt and ice cream desserts.	\$14,123.98	Royal Park of Matthews Rehabilitation & Health Center
NC	2018-04-NC-0725	To implement “It’s Never Too Late (iN2L)” adaptive computer technology.	\$27,948.00	Eckerd Living Center, LLC

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# State Use of CMP Funds Summary / 2017-2018

STATE	PROJECT NUMBER	PURPOSE OF THE CMP FUNDING	APPROVED AMOUNT	ORGANIZATION
NC	2018-04-NC-0730	To implement a culture change training program aimed at providing joint education and training to residents, family members, direct care staff and clinicians on how to implement and sustain person-directed care practices.	\$45,000.00	United Church Homes and Services
NC	2018-04-NC-0427	To purchase four WhisperGLIDE swings and accessories.	\$28,369.00	Smithfield Manor Nursing and Rehab
NC	2018-04-NC-0216	To implement a 30-month program titled, "Disseminating Comfort Matters: A Web-based Training Toolkit for Comfort-focused Dementia Care. Six training videos will be developed illustrating best practices for providing dementia care in nursing homes.	\$498,981.00	University of North Carolina at Chapel Hill, Division of Geriatric Medicine
NC	2018-04-NC-0423B	To implement the "Making It Happen" project which enables the nursing home to purchase SMART televisions and stands for residents, iPads, iPods and headphones, iTune cards and two laptops.	\$40,199.33	Durham Rehab Operations d/b/a Durham Nursing and Rehab
NC	2018-04-NC-1219	To purchase recreational supplies, a snow cone machine, a wine cooler, a popcorn popper, and digital piano.	\$14,834.60	Maggie Valley Nursing & Rehabilitation Center
NC	2018-04-NC-1108	To support the "Gastronomical Delights Experience" project, designed to provide new and innovative ways to improve all aspects of the dining experience for residents; create Mom's Diner at Rich Square; increase food choices and encourage socialization at meals.	\$53,994.64	Rich Square Nursing and Rehabilitation
NC	2018-04-NC-1106	To support the "Step Up to the Plate" project in seven Lutheran Services Carolinas nursing homes.	\$171,399.11	Trinity Oaks Trinity Place Trinity Ridge Trinity Village Trinity Glen Trinity Elms Trinity Grove
NC	2018-04-NC-1212	To implement a program titled "Living Actively Using Guiding Hands to Engage Residents (LAUGHTER)" using "It's Never Too Late (iN2L)" adaptive computer technology.	\$19,614.00	UNC Rex Rehabilitation and Nursing Care Center
SC	2018-04-SC-0613	To purchase sensory stimulation equipment, a sensory cart, a smart board and stand, and a juke box for residents.	\$5,000.00	Anchor Rehabilitation and Healthcare
SC	2018-04-SC-0831	South Carolina "Spirit of Caring" conference.	\$6,123.04	South Carolina Spirit of Caring c/o Lexington Medical Extended Care, Lexington, South Carolina

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# State Use of CMP Funds Summary / 2017-2018

STATE	PROJECT NUMBER	PURPOSE OF THE CMP FUNDING	APPROVED AMOUNT	ORGANIZATION
TN	2018-04-TN-0902	To implement a program titled, "LifeBio in Tennessee." The primary goals of the LifeBio project are to help recognize the life stories of each resident and to foster meaningful Intergenerational relationships. CMP funds will be used for ten, Signature Healthcare nursing homes.	\$103,656.97	Signature HC of Greenville/Signature HC of Portland Rehabilitation and Wellness/Signature HC of South Pittsburg Rehab and Wellness Center/Signature HC of Fentress County/Signature HC of Monteagle Rehab & Wellness Center/Signature HC of Rockwood Rehab & Wellness Pickett Care & Rehabilitation Center Standing Stone Care & Rehabilitation Center Spring City Care & Rehabilitation Center Westmoreland Care & Rehabilitation Center
TN	2018-04-TN-0903	To implement a program titled, "Infection, Prevention, Antimicrobial Stewardship and Rapid Response in Southern Middle Tennessee SNFs." This project proposes a three-pronged focus to reduce the incidence and burden of healthcare associated infections: education, management of antibiotic stewardship and deployment of a prototype virtual rapid response team using telemedicine.	\$928,878.07	Maury Regional Medical Center Post Acute Care Network Lewis County Nursing & Rehabilitation Center Life Care Center of Columbia Mt. Pleasant Healthcare & Rehabilitation NHC Healthcare Columbia/NHC Healthcare Lawrenceburg/NHC Healthcare Lewisburg/NHC Healthcare Oakwood/NHC Healthcare Pulaski/NHC Maury Regional Transitional Care Center/NHC Healthcare Scott Signature Healthcare of Columbia
TN	2018-04-TN-0531	To provide Certified Eden Associate training to 50 long-term and skilled nursing home employees, sixteen ancillary employees, and eight residents and family members.	\$29,020.00	Uplands Village/Wharton Nursing Home
TN	2018-04-TN-0904	To purchase a baby grand piano for the main dining room.	\$10,645.00	Signature Healthcare of Putnam County
TN	2018-04-TN-0831	To implement a program titled, "It's Never Too Late for Ave Maria Nursing Home Elders." The applicant aims to utilize adaptive computer technology for residents.	\$60,356.00	Ave Maria Home

Note: Projects pending a contract with the state are highlighted in yellow

# State Use of CMP Funds Summary / 2017-2018

STATE	PROJECT NUMBER	PURPOSE OF THE CMP FUNDING	APPROVED AMOUNT	ORGANIZATION
TN	2018-04-TN-0424	To develop and implement the “Activities, Restorative, and Therapy in Sync (ARTS)” program in nine nursing homes throughout middle and west Tennessee. This project involves approximately 876 residents and 1,115 licensed beds.	\$471,215.29	Tennessee Health Management, Inc. Crestview Health Care and Rehabilitation Center, Inc. Decatur County Health Care and Rehabilitation, Inc. Forest Cove Nursing and Rehab Center, Inc. Lexington Health Care and Rehabilitation Center, Inc. Lewis County Nursing and Rehabilitation Center, Inc. McNairy County Health Care Center, Inc. Northbrooke Healthcare and Rehab Center, Inc. Savannah Health Care and Rehabilitation Center, Inc. Westwood Health Care and Rehabilitation Center, Inc.
TN	2018-04-TN-0423	To implement the “Wash Sense HAI Reduction and Training Pilot” in partnership with the state of Tennessee Department of Epidemiology. This project seeks to significantly reduce healthcare associated infections (HAI), 30-day hospital readmissions, improve antibiotic stewardship and staff adherence to isolation, hygiene, and personal protective equipment (PPE) protocols.	\$89,381.00	Prestige Healthcare Spring Gate Rehabilitation Center
TN	2018-04-TN-0905	To implement “Music & Memory Tennessee” statewide for 147 of 322 skilled nursing homes, to impact the quality of care and quality of life for approximately 2,205 residents.	\$1,000,000.00	Tennessee Arts Commission
TN	2018-04-TN-0709	To develop and implement a statewide system of Regional Healthcare Quality Improvement Collaboratives that bring together Tennessee nursing facilities for quality improvement.	\$495,732.64	University of Indianapolis Center for Aging and Community

Note: Projects pending a contract with the state are highlighted in yellow

# Successful Region IV CMP Reinvestment Projects

- **Reducing Avoidable Hospitalizations Across the Continuum of Care: A Regional CMP Project**
- **Bingocize®**
- **It's Never 2 Late (iN2L)®: Dignity through Technology**
- **Cambridge Place: Suzy Q Food Cart Delivery System**
- **Georgia State University and the Culture Change Network of Georgia: Person-centered Care Project**
- **A.G. Rhodes Health & Rehab**
- **Second Wind Dreams® : Virtual Dementia Tour®**
- **Alzheimer's Education, Resources & Services, Inc. (AERS)**
- **The University of Alabama School of Nursing: Brushing Away Infections**
- **Disseminating Comfort Matters: Web-based Training Toolkit for Comfort-focused Dementia Care**
- **The Saint Thomas Health Palliative Care Transitional Program**
- **Georgia Statewide Music Integration Program for Seniors**
- **Long-term Care Emergency Preparedness (LTCEP) Educational Program**
  - **University of Georgia LTC Emergency Preparedness Training**
  - **University of Louisville, Kentucky LTC Emergency Preparedness Training (LTC2Prepare)**
- **Eden Alternative: Rise Up for Person-directed Care in Georgia**
- **CMS Region IV Quality Improvement Initiative**
- **Residents' Rights Consumer Education Project**
- **TimeSlips' I Won't Grow Up Project**



# Reducing Avoidable Hospitalizations Across the Continuum of Care

Dr. Ruth Tappen, Professor and Eminent Scholar at the College of Nursing at Florida Atlantic University and Dr. David Wolf of Barry University have partnered with CMS and all eight Region IV states to work on reducing avoidable hospitalizations in certified nursing homes in the Southeastern United States.

The cost of hospitalizing a nursing home (NH) resident, both in terms of risk to the resident and cost to the healthcare system, are well-documented. Quality improvement (QI) programs such as INTERACT™ and Evercare™ have been developed to reduce the number of potentially preventable hospitalizations (PPHs) of NH residents that occur. However, these QI programs do not fully address one of the most intractable reasons for PPHs — resident and family insistence on hospitalization (*Lamb, Tappen, Diaz, Herndon, & Ouslander, 2011*).

A research study funded by Patient-Centered Outcomes Research Institute (PCORI) was conducted to develop a resource tool discussing hospitalizations. The Decision Guide, “*Go to the Hospital or Stay Here?*” (referred to as the “Guide”) for residents and their families, provides information on treatment that can be provided in the NH, risks and benefits of hospitalization vs. treatment in the NH and information about advance care planning. The Guide is intended to prepare residents and their families should an acute change in condition occur or the resident is actively dying. Developed with input from residents, families and providers, the Guide has been enthusiastically received by residents, their families and NHs.

Resident and family insistence on hospitalization often contributes significantly to the incidence of PPHs and may put the resident at

increased risk related to hospitalization. The Guide is designed to help residents and their family members engage in informed discussions with their providers when the need for such a decision arises. The purpose of the current project is to widely disseminate the Guide and a smaller Trifold version to every NH in the eight states of CMS Region IV (Alabama, Florida, Georgia, Kentucky, Mississippi, North Carolina, South Carolina, and Tennessee). In Phase I of the project, the Decision Guide was piloted in 16 certified nursing homes in the Southeastern United States and training videos were developed to explain the purpose of the Guide and demonstrate its use. The Guide is available in hard copy and in an electronic version that can be shown to residents on a television screen or tablet ([www.decisionguide.org](http://www.decisionguide.org)).

In Phase II, a complete package of Guides, trifolds and training materials will be sent to every Medicare-certified NH in the eight states of Region IV. Two or three workshops will be held in each state to prepare NHs and their staff to use the Guide effectively. Evaluation of the project will include periodic feedback from our Stakeholder Advisory Committee that includes representatives from each state; NH residents; families and administrators; number of NHs receiving the package of materials and reports of their distribution in the NHs; number of attendees at the workshops and their evaluation of their usefulness; and NH reports of the effect of the Guide on resident and family response to change in resident condition and the question of hospitalization and statewide readmission rates.

In their follow-up calls with the pilot nursing homes, Drs. Tappen and Wolf found that all of those who completed the pilot test intend to make

# Reducing Avoidable Hospitalizations Across the Continuum of Care, cont.

the Guide or smaller trifold a permanent part of their routine. Residents, families and staff have been very receptive to the information in the Guide since most are not familiar with the treatment that can be given in the NH. Many facilities make it a point to include family members in the initial conversation about unnecessary hospital transfers so all are on the same page i.e., understand the care that NHs can provide, the risks and benefits of hospitalization versus remaining in the NH and the futility of hospitalization if the resident is actively dying. A major barrier to implementation has been turnover of the upper level administrative team. The NHs noted that gearing up usually takes a little time, in order to make sure that a plan is in place, medical providers are fully informed, and admissions, nursing and social work staff are familiar with the Guide and the importance of preventing avoidable hospitalizations before fully integrating use of the Guide into facility systems such as resident admissions, planned follow-up with residents and families and inclusion in staff orientation.

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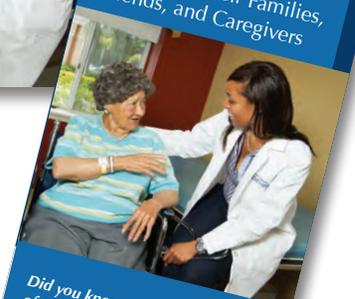
## GO TO THE HOSPITAL OR STAY HERE?

A Decision Guide for Residents, Families, Friends and Caregivers



## GO TO THE HOSPITAL OR STAY HERE?

A Decision Guide for Residents, Their Families, Friends, and Caregivers

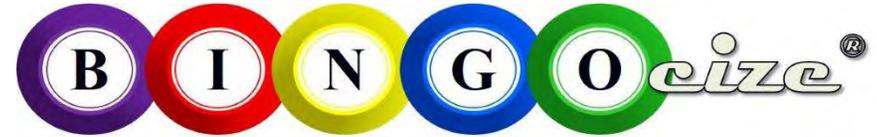


Go to [www.decisionguide.org](http://www.decisionguide.org) to print a hard copy or download an electronic version of the Guide or trifold.

*Did you know that almost half of transfers to the hospital may be avoidable?*

*This Guide will help you understand why these transfers are made and how you can be involved in the decision.*

# Bingocize® (Bingo-Exercise Program for Seniors)



Visit any certified nursing facility and you are likely to hear a resident enthusiastically shouting, “Bingo!” Unfortunately, playing bingo requires little physical movement and there is often little social interaction between the residents. Capitalizing on the popularity of bingo, Western Kentucky University (WKU) Associate Professor, Dr. Jason Crandall, created **Bingocize®** as a way to address these problems. Residents play Bingocize® twice per week for about an hour each session. Led by trained Certified Nursing Facility (CNF) staff members and university students, residents perform gentle strength, range of motion, and balance exercises interspersed with bingo calls. This pattern is continued until a participant wins the game and is awarded a small prize. Our team has shown the program can increase social engagement, improve functional/gait performance, and improve aspects of executive function (*Shake & Crandall, 2018; Falls et al., 2018, Crandall & Shake, 2016; Stevens et al., 2018; Crandall et al., 2015*).

Awarded a three-year Kentucky CMP grant in 2017, our WKU team launched Bingocize® in 28 Kentucky CNFs and partnered with faculty from nine other universities — the University of Kentucky, University of Louisville, Kentucky Wesleyan College, Spalding University, Northern Kentucky University, Morehead State University, Murray State University, Madisonville Community College, and Eastern Kentucky University. After completing an online training program, university students assisted trained CNF staff to implement the program. Faculty and students from multiple academic disciplines have participated including social workers, speech pathologists, psychological scientists, exercise scientists, physical therapists, occupational therapists, and others. So far, hundreds

of university faculty, students, and CNF staff have implemented the program. And most importantly, over 740 CNF residents have enjoyed and benefitted from playing Bingocize®.

Here’s a few examples of the benefits described by students, CNF staff, faculty, and residents:

*“Bingocize® has impacted me as a student by showing me in a real life setting how important physical activity is for stimulating the aging mind and body. Bingocize® gives residents an opportunity to not only exercise and play bingo, but to socialize with other residents and students.*

—Communication Sciences and Disorders students,  
Murray State University



*“Participating in Bingocize® has definitely been a positive learning experience for the students involved and I have also been inspired by the initiative. This hands-on opportunity goes beyond expanding their knowledge of health information — they are making connections, improving communication skills, gaining confidence in working with diverse populations, learning the ins and outs of program planning, working with stakeholders across the community, and understanding autonomy in various career paths.”*

—Dr. Melinda Ickes,  
University of Kentucky Health Promotion Faculty Member,  
Lexington, KY

## Bingocize® , cont. (Bingo-Exercise Program for Seniors)



*“My experience with Bingocize® has been awesome! The whole dynamic of the game of bingo has changed with Bingocize®. My residents are having fun, socializing more and encouraging each other (to exercise) throughout the session. As a lead facility, I am also receiving the added bonus of exercise during each session.”*

—Nolly Brandon, Activities Director,  
Greenwood Nursing and Rehabilitation,  
Bowling Green, KY

*“I am enjoying Bingocize® and look forward to it each week. Bingocize® makes bingo enjoyable by getting people to move and encouraging each other to exercise. I enjoy the socialization with my peers and a feeling of increased flexibility.”*

— Frances Jones, resident,  
Greenwood Nursing and Rehabilitation,  
Bowling Green, KY



*“Bingocize® is very efficient, getting us to exercise and have fun at the same time.”*

— Clara Burns, resident,  
Christian Health Center,  
Bowling Green, KY

Our team is well on the way to achieving our overall goal of improving the quality of life of 1,250 residents while helping train and inspire the future long-term care workforce. We hope to replicate our Bingocize® model in other states, so when you walk down the halls of any CNF you may hear a resident enthusiastically shouting *Bingocize!*



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## It's Never 2 Late (iN2L)<sup>®</sup> : Dignity through Technology



Just because you happen to live in a nursing home, why shouldn't you be able to fly a plane...to visit the Louvre...to have access to your faith...to play games you like...to Skype with your grandkids...to keep learning, and most importantly, to still have fun! That's the power of It's Never 2 Late (iN2L)<sup>®</sup>. For almost 20 years, iN2L has been bringing engagement technology to skilled nursing residents, impacting tens of thousands of lives. iN2L helps each person, no matter where a person is physically or cognitively, to stay connected and stay relevant.

Since 1999, the iN2L engagement technology has been implemented in over 2,500 senior living communities in all 50 states. iN2L provides access to thousands of person-centered, motivational and fun applications and activities that address the unique abilities, interests and needs of all residents.

Since 2010, 236 iN2L Programs have been funded that have significantly impacted residents across the country by:

- Reducing the use of antipsychotics
- Enhancing and improving restorative care
- Improving quality of life and communication
- Reducing the incidence of falls
- Improving quality of care for residents living with dementia
- Increasing staff engagement and expanding their skillset

This interdisciplinary engagement technology program delivers person-centered experiences that engage, empower and reconnect residents with the world at large. iN2L has been shown to decrease social isolation by facilitating enriched resident-staff interactions and by providing easier access to family and friends. The iN2L Program allows the interdisciplinary team and clinicians to improve the quality of care for residents by focusing on their strengths instead of relying on labels; by resolving challenges, such as depression, boredom and loneliness, with appropriate and compassionate solutions and activities; and by fostering better relationships through individualized interactions and experiences. This strengths-based approach to engagement creates a better person-environment fit, which is essential for increasing self-esteem, enhancing confidence and improving the quality of life for all residents. iN2L's engagement technology is intuitive to use and if approached with specific objectives and milestones, the rewards to residents and professional and familial caregivers can be transformative.

The iN2L Program continues to have a deep impact in the organizational culture of thousands of communities. Consequently, program sustainability and customer retention has remained at 97% over the past five years. As iN2L strives to provide increasingly individualized engagement experiences, it continues to encourage creativity, self-expression and continued personal development for residents confronting cognitive and physical challenges and their care partners.

## SUCCESS STORY

*“The implementation of the iN2L system has impacted many lives within our facility located in the beautiful Blue Ridge mountains. Amongst the many positive stories from residents who have engaged with the system, there is one that stands out from the rest.*

*William Freeman, better known as Bill, came to our Care Center in August 2016. Along with 13 others, he was one of our veterans. He served in the Air Force for 22 years. Unfortunately, due to his diagnosis, he was unable to partake in many of the activities he used to enjoy in his lifetime. This caused him to hardly participate, that is, before we received the iN2L.*

*When our iN2L system arrived in February 2018, we had no idea the magnitude of the impact it would have on our residents like Bill. It didn't take long to realize that this innovative technology has the capability to let individuals virtually do anything, even fly a plane.*

*We decided to try to engage Bill in this program due to his past in the Air Force. To our surprise, Bill was able to use the joystick that was included with our iN2L and the joy he felt to be “in the air again” was palpable. His wife assisted in choosing a similar plane to the kind he flew in the air force. We were able to see a great improvement in Bill's quality of life as he expressed less agitation in his day to day interactions with our staff.*

*Bill's diagnosis may have set him back in the past, but thanks to the iN2L system and our activities staff Bill was able to fly a plane and reclaim his deepest set feelings of patriotism and above all else, purpose.*

*While Bill is no longer with us, his story will forever stay in our hearts as we continue to see amazing stories in the making every day with our iN2L systems.”*

— Clay County, North Carolina



## SUCCESS STORY

*“Lola is challenged by living with advanced dementia. She has a love for people, her stuffed animals, cats, and children. Lola also enjoys playing hymns from memory on the piano. Prior to using the iN2L system, she would often drift to sleep in activities and could complete very few tasks with cues. The Activities Department at The Laurels of GreenTree Ridge introduced Lola to the iN2L with hopes of increasing cognitive stimulation and social interaction, but she has shown growth in other areas that were not anticipated.*

*Lola has been more alert and able to participate more effectively in group activities as well as individually with staff and peers. Her daughter, Linda, has observed her being more alert. Linda visits Lola at least once a week at The Laurels. She recently witnessed an improvement with Lola's hand coordination and ability to follow simple cues. She gives Lola a comb and*

## It's Never 2 Late (iN2L)<sup>®</sup> : Dignity through Technology, cont.

*asks her to comb her hair. Linda sweeps her hand like a comb through her own hair to visually cue Lola to do the same. Lola then follows suit. This was not a task that Lola was able to complete before.*

*These small victories and improvement to quality of life are just a few examples of how wonderful the iN2L system is for those who live with dementia and other debilitating illnesses. She is just one of many residents of The Laurels who have benefited from the iN2L experience.”*

—The Laurels of GreenTree Ridge, North Carolina



### Contact information:

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### SUCCESS STORY

*“Mrs. MC is a long-term care resident at Woodhaven Nursing, Alzheimer’s and Rehabilitation Center in Lumberton, North Carolina. She enjoys the Never Too Late System (iN2L) touch screen computer system. The facility received this system through CMP funding from the state of North Carolina and CMS. Mrs. MC enjoys the group games the ‘Price is Right’, ‘Family Feud’ and ‘What does It Cost?’ She really enjoys the interaction from others and especially likes for her children and grandchildren to participate. Mrs. MC recently had an episode with her eyesight which caused her to be blind for a short period of time. Although she could not see, she was still able to participate with the group by listening to the description of the items and make her best guess. The system was a great motivation factor that boosted her morale and kept her motivated to interact with other residents.*

*Mr. RT is a rehab patient on our rehab unit. He has been introduced to the iN2L system in therapy and really enjoyed playing solitary the casino games such as Poker and Lucky 7. He has tried to interact with other rehab patients but after therapy they would go back to their rooms. He has asked the activity staff if he could use the system in his room or in the day area, which he has every day since he has been a resident here. He states it helps pass away the time until he gets to go home!”*

— Kim Bazemore, LRT/CTRS, Activity Supervisor  
Woodhaven Nursing and  
Alzheimer’s Care Center, North Carolina

## Cambridge Place: Suzy Q Food Cart Delivery System



Cambridge Place desired to enhance the dining experience for residents and decrease significant weight loss. The facility utilized CMP funds for the Suzy Q food cart delivery system to increase resident meal choices and options and create a more person-centered dining experience.

In utilizing the Suzy Q cart in 2017-2018, we saw the following improvements:

- We had 10% of significant weight loss in residents who ate in the dining room and that number decreased by 50% to 5% of significant weight loss of residents who ate in the dining room.
- The residents of Cambridge Place who ate in the dining room in 2017-2018 were thrilled with the ability to choose their food and even more thrilled that it was served hotter than from the traditional tray line service. This food delivery system increased socialization of residents and staff because they were engaging in conversations regarding their choice of food and beverage items instead of having their meal tray already determined for them.
- The hotter temperature of the food and the quick service was the largest success of the Suzy Q cart in 2017-2018. Residents didn't have to wait as long for their meal and it is much hotter than the traditional tray line system.
- Resident Council minutes indicate improved satisfaction with overall meal service with the Suzy Q cart.

Overall, implementation of the Suzy Q food cart delivery system increased resident satisfaction and decreased weight loss of residents who ate in the dining room.



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Lexington, KY 40504  
Phone: 859-252-6747

## Georgia State University and the Culture Change Network of Georgia: Person-centered Care Project



Georgia State University's Gerontology Institute received a \$1.6 million joint CMP project award from CMS and the Georgia State Survey Agency to support a three-year training and development project titled "Building Resources for Delivering Person-Centered Care in Georgia Nursing Homes".

This project builds on the momentum of the Culture Change Network of Georgia (CCNG), founded in 2008, whose efforts have been ongoing to support culture change and person-centered care across long-term care services and support organizations. The multiyear project is led by Jennifer Craft Morgan, Associate Professor of Gerontology, and Elisabeth O. Burgess, Director of the Gerontology Institute in the College of Arts and Sciences at Georgia State University.

The team will use CMP funds to develop a sustainable program model aimed at improving the quality of life of nursing home residents, including those living with dementia in Georgia, by providing important resources and staff development and training to the state's 374 nursing homes.

The project will include the following components:

- A three-stage needs assessment of Georgia's nursing homes
- Real-time, web-based information and resources for Georgia's nursing homes
- Stakeholder engagement across the state, providing awareness education on culture change, person-centered care, and living with dementia
- An interactive competency-based online continuing education training for nursing home staff (all levels), residents and informal care partners

For this project, Dr. Morgan and Dr. Burgess have partnered with CCNG. LeadingAge Georgia, led by Ginny Helms, President and CEO, received a subcontract to convene the CCNG and partner with other key stakeholders who will serve as advisers to the project. Project consultants are: Walter Coffey, Co-Founder, CCNG and Managing Director, WD International; Kim McRae, Co-Founder, CCNG and President, Have a Good Life; Rose Marie Fagan, Co-Founder and Founding Executive Director, Pioneer Network; and Joan Carlson, Principal, JMC Consulting.

To date, we have made strides toward accomplishing these project goals:

- Created a partner team with more than 40 members that will serve in an advisory capacity to the project;
- Launched the new and updated Culture Change Network of Georgia website ([www.culturechange.org](http://www.culturechange.org));
- Produced a series of educational videos on person-centered care and culture change and distributed them via a growing list of followers on Twitter, Facebook, LinkedIn and Instagram ([https://www.youtube.com/channel/UCAZ89fyLxS\\_VLXS6qxvozQg](https://www.youtube.com/channel/UCAZ89fyLxS_VLXS6qxvozQg));
- Launched a quarterly newsletter to nursing home staff and stakeholders to update interested parties on project news and goals;
- Conducted six focus groups on barriers to and facilitators for person-centered care with more than 50 Georgia nursing homes staff;

## Georgia State University and the Culture Change Network of Georgia: Person-centered Care Project, cont.



- Held a regional educational summit event on person-centered palliative care in September 2018, which was attended by more than 100 participants including nursing home administrators, nurses, certified nursing assistants and social workers (Recap available: <https://culturechange.org/2018/10/2018-annual-culture-change-network-of-georgia-summit-person-centered-palliative-care-be-the-bridge/>);
- Awarded approximately 50 scholarships to participants attending the Person-centered Palliative Care Summit and/or the Certified Eden Associate Training in Georgia.

In sum, we have been very successful with gaining attention of stakeholders and compiling distribution lists through partners, distributing educational content and beginning the needs assessment as planned. We are confident of continued success in service of creating a sustainable model for improving the quality of life for nursing home residents in Georgia.

### Contact information:

Dr. Jennifer Craft Morgan

Email: [jmorgan39@gsu.edu](mailto:jmorgan39@gsu.edu)

CMP funds have allowed A.G. Rhodes Health & Rehab to implement several important initiatives to benefit residents, specifically those living with dementia:

- **The Simple Companion™** is an intuitive touch-screen application that promotes memory, engagement and better communication for elders. Among many of its capabilities, such as scheduling reminders for activities and mealtimes, staff members have been successfully using it for behavioral interventions to address under-stimulation, sundowning or agitation — all without the use of medications.
- **TalentQuest Learning Management System** is an electronic educational module and interface for staff education. A.G. Rhodes used TalentQuest to create person-directed care training designed specifically for staff to better communicate with residents living with dementia. The training includes eight modules which are customized for A.G. Rhodes and is based on the CMS Hand-in-Hand training. This training is part of our newly-launched “A.G. Rhodes Academy”, which is designed to provide online training in a more convenient and effective manner.
- **Osborne Visual Solutions and SeniorTV** are channels programmed on televisions throughout the community that provide tailored information to enrich the community and encourage increased involvement and engagement among residents. Additionally, televisions have been supplied for all residents and in common areas for stimulation, entertainment and enjoyment.
- **Music Therapy Enhancements** were made possible with additional iPods and computers to support our “Songs for Seniors” program which brings personalized music to elders.

Efforts to transform to a person-directed model of care — which have

been supported by CMP funds — have resulted in publicity and accolades for A.G. Rhodes:

- In October 2018, AIB-TV (Atlanta Interfaith Broadcasters) aired a story featuring A.G. Rhodes for its “LifePlus” show. The story highlighted person-directed care and showed how the use of technology supports elders at all levels of cognitive abilities, and how it’s especially beneficial for those living with dementia. The story also focused on the decision-making process involved in determining when it’s time for a loved one to move to a nursing home or some other level of care, and how you find a community. Watch the show at <https://www.youtube.com/watch?v=DMhqUUJ-AAo&t=1071s>.
- A.G. Rhodes was among several senior care communities featured in a PBS documentary called “Revolutionizing Dementia Care”, which aired in November 2018. The documentary highlighted innovative and improved approaches to taking care of people living with dementia. Watch the documentary at <https://ideastations.org/RevolutionizingDementiaCare>.
- In December 2018, A.G. Rhodes’ Cobb community won LeadingAge Georgia’s 2018 Innovation in Care and Services Award. This annual award recognizes a LeadingAge Georgia member organization for programs and/or services that are models of innovation and excellence and that contribute significantly to the quality of life of the individuals served. A contributing factor for A.G. Rhodes being selected for this award is because of the community’s use of technology to enhance elders’ social connections, intellectual stimulation, physical engagement, spiritual connections, emotional support and vocational interest. Technology has been incorporated into daily life, and these systems have allowed A.G. Rhodes elders, staff and family members to use and benefit from technology — regardless of background, physical or intellectual abilities.

# Second Wind Dreams® : Virtual Dementia Tour®



The Virtual Dementia Tour® (VDT®) is an evidence-based, patented educational tool to assist people in identifying with and better understanding the needs of those living with dementia which results in a relationship between caregiver and resident based on increased understanding. The purpose of the VDT program is to give nursing home staff the opportunity to experience what dementia is like through individualized, experiential learning. This comprehensive program measures behavior, attitude and sensitivity to the treatment of dementia.

During the VDT site visit, a Second Wind Dreams® (SWD®) Nursing Home Certified Trainer (NHCT) will lead staff through the experience of what dementia may be like. On average, a NHCT can train up to 70 staff per day, per nursing home. After being garbed in patented glasses, shoe inserts, gloves and headphones with confusion sounds, individuals are led into the VDT experience room. A trained observer in the room tabulates dementia-like behaviors exhibited by the staff along with the number of tasks completed. At the end of the eight-minute experience, the participants are led to the post-VDT tour room where they are de-garbed and given the same assessment questions as before the tour. After the tour, an in-service is conducted by a NHCT to allow discussion and relate results from the tour.

In 2017 and 2018, the VDT experience was provided to 20,915 residents in 182 Medicare certified nursing homes, located in Georgia, Kentucky and North Carolina. In addition, 11,215 employees received education and training on dementia. The chart below provides a more specific breakdown.

STATE CMP PROJECT 2017-2018	NO. OF FACILITIES SERVED 2017-2018	NO. STAFF RECEIVED VDT TRAINING 2017-2018	NO. OF RESIDENTS IMPACTED BY VDT 2017-2018
GA	122	6,706	14,087
NC	58	4,300	6,500
KY	2	209	328
<b>TOTAL</b>	<b>182 facilities</b>	<b>11,215 staff</b>	<b>20,915 residents</b>

1. Total number of facilities served in 2017 and 2018
2. Total number of staff receiving training on VDT in 2017 and 2018
3. Total number of residents impacted by the VDT experience for 2017 and 2018



## Second Wind Dreams® : Virtual Dementia Tour®, cont.



More than two million people in 20 countries have experienced the VDT. Currently, the VDT is used in over 200 colleges and universities, and in approximately 1,000 nursing homes in three countries.

### SUCCESS STORY — Georgia

#### Story 1

A nurse was observed at meal time showing no eye contact, conversation or affirming touch to a resident. During Dementia Aware Competency Evaluation™ or DACE® coaching at the nursing home, the ADON admitted that, without this assessment, she would not have known the poor quality of care that was being provided to residents by this person. Our trainer then role-played person-centered care for the staff person and ADON by visiting the resident in her room, calling her by her name, making eye contact, gently rubbing the side of her face and smiling at her. Our trainer said, “I thanked her for allowing me to visit her and told her about the beautiful sunshine coming in her window. I told her how pretty I thought her name was and that she was a special lady!” At the end of the visit, our trainer and staff watched a tear roll down the resident’s cheek.

#### Story 2

After returning to a participating nursing home months later for their second site visit, our trainer was pleased to meet the new RN/Education Coordinator, who expressed delight with the VDT program and wanted to sit-in for a time during the Facilitator training. She said how well-equipped and knowledgeable the staff was here about working with residents with dementia. She attributed it much to this program and the level of commitment that the staff has to providing great care! This

perception of quality care was reiterated by a mother and sister who were visiting their son/brother. Diagnosed with dementia, his care at home was already more than what they felt they could provide. The mother and sister both went through the VDT and were very moved by what they came to realize was part of their son/brother’s existence every day. They were so affirming of the level of care provided by the staff and how at peace and ease they were knowing he was at this particular nursing home.

### SUCCESS STORY — North Carolina

At a NC participating nursing home, a CNA tour guide relayed to our trainer about an “Ah ha!” moment that she had the night before Second Wind Dreams did the tour for the staff. She had been through the tour previously. The CNA was working a double shift and was putting a female resident to bed. She started taking the resident’s legs off of her wheelchair and began moving the resident to get her ready to transfer. The resident grabbed her arm and said to her, “Why are you doing this to me? You’re one of the good ones.” The CNA took a moment and realized she had been working without telling the resident what she was doing. She hugged the resident and apologized. The resident kissed her and said “I love you!” She was grateful to have recognized her lack of communication and empathy and thanked the VDT for this teachable moment.

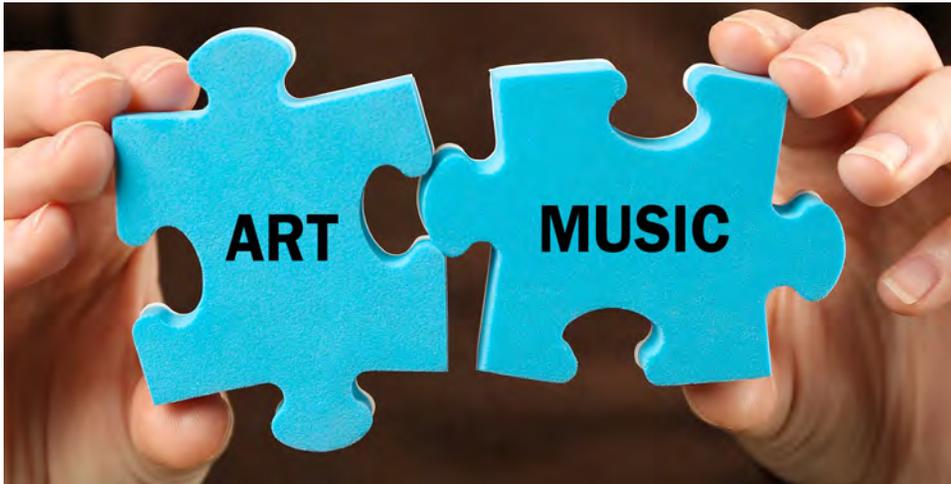
#### Contact information:

P.K. Beville, Founder, CEO Emeritus, Second Wind Dreams

Phone: 678-624-0500

Website: [www.secondwind.org](http://www.secondwind.org)

## Alzheimer's Education, Resources & Services, Inc. (AERS)



According to experts, nearly six million Americans currently have Alzheimer's disease. Over the next seven years, that number could rise to seven million and without new therapies, more than 13 million Americans could develop this condition by the year 2050.

In 2016 Alzheimer's Education, Resources & Services, Inc. (AERS) in Montgomery, AL received CMP funds to implement an art and music program for nursing home residents affected by dementia. The goals of this project were to reduce incidents of disruptive behaviors, anxiety and depression; improve communication and understanding between the residents and caregivers; strengthen residents' sense of self-worth; educate caregivers in techniques which will help stimulate residents' memories to enhance quality of life; and to possibly reduce the use of psychotropic medications.

More than 1,300 residents in 46 Alabama nursing homes were selected to

participate in the project. Each nursing home selected an average of 20 to 25 residents to participate and to be followed and evaluated throughout the project. Many other residents participated in group art and music activities but were not enlisted as project participants.

Each NH was certified in Music & Memory and personal playlists were downloaded onto ipods for the participating residents. The results have been remarkable. For example, Mrs. G, who was in late stage dementia and no longer communicated verbally but yelled and cried out constantly. After listening to 30 minutes of her favorite Southern gospel music, she now mostly listens and sings along, although her words are unintelligible. She rarely yells now, but she does resist when the staff tries to remove her earphones. Another example is Mrs. M, who was crying loudly and inconsolably for her mother and father, causing great agitation among the other residents in the dementia unit. After putting her favorite Motown music on, she immediately began to bounce to the rhythm of the music and then began to intersperse words of the song with her cries. Within a few minutes, she stopped crying altogether and was singing along with the music. These are just two of the many examples of how the music has helped reduce negative behaviors. Life enrichment is also a major part of the music program. In addition to the personalized ipods, regular group musical activities are also conducted. This has brought many residents out of their shells and improved their communication. Residents who don't talk can be seen singing along with the music.

The art program includes conducting at least one weekly art activity in the nursing home, using various media for projects that are developed with the assistance of a consulting certified art therapist. Studies have shown

## Alzheimer's Education, Resources & Services, Inc. (AERS), cont.

that art can enhance communication, brain function and social interaction, trigger dormant memories and emotions, inspiring conversation among the dementia patients who normally struggle to express themselves, and even improve motor skills. During this activity, residents are sharing stories of their childhood, their families, and their past lives. Residents who rarely participated in group activities now look forward to participating in art. Many have developed an improved feeling of self-worth, showing immense pride in their artwork and enjoy having it displayed.

An annual art exhibit is held at each facility — inviting friends, family and the community to visit and view the residents' art. At one facility's exhibit, staff and family members were actually bidding against each other to purchase the residents' art. This not only raised over \$400 to benefit the program but gave the residents a feeling of great pride and joy that people were bidding for their art. Several pieces of the art were also selected from each participating NH and displayed at AERS' annual conference.

An unexpected success story has been the overwhelmingly positive response from the therapy departments. Upon using art and music with their patients, therapists reported a dramatic improvement in the response to therapy by the residents as well as an improvement in the overall atmosphere in the department. Residents are now actually asking to be added to therapy because they see how much everyone is enjoying it. The story of this success has spread to many other nursing homes who are now requesting the program for their residents.

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# The University of Alabama School of Nursing: Brushing Away Infections

**UAB** SCHOOL OF NURSING

The University of Alabama at Birmingham

“Brushing Away Infections” is a unique approach to improving mouth care in long-term care (LTC) communities because it combines three important components: best evidence-based mouth care practices for older adults; scientifically-tested behavioral strategies designed to minimize refusal behavior from persons with dementia; and one-on-one real time clinical coaching for both the licensed and unlicensed nursing staff.

Our specific aims for this project are:

- Provide didactic and 1:1 real-time clinical coaching to a minimum of 90% of certified nursing assistants and licensed nurses. We are striving for 100% saturation, including new hires.
- Improve the overall oral health of all long-term care facility residents.
- Use improved overall oral health as a strategy to reduce pneumonia and other upper respiratory infections.
- Integrate best mouth care practices into each facility’s organizational structure and culture (culture change).

We have almost completed training with our first two LTC communities and have learned a great deal from the CNAs and nursing staff at both places. Their participation and input have allowed us to improve the project for the next facilities. They have taught us how to better integrate the program and have provided a foundation for dealing with the challenges of training and implementing “Brushing Away Infections.” The photographs are from our initial training videos and the quotes were taken from the “lessons learned” notes provided by our nurse coaches.



*“The resident did not speak and initially turned his head away from the toothbrush and grunted. The CNA handled the mild care resistant behavior (CRB) very well: she approached at eye level, and used short, simple commands such as ‘open’, ‘swish’, and ‘spit’. The mouth care session went very well. The CNA did an excellent job.” (The second brush is provided to the resident to trigger procedural memory).*



*“The CNA started by telling the resident it was time to brush her teeth. The resident immediately got very agitated and started saying ‘no’. The CNA just continued to speak to the resident calmly but the resident just got more agitated and started hitting herself. We decided to use pantomime to let her know we just wanted her to brush her teeth. She paused for a minute and then I had the CNA put the toothbrush in her hand. Once the toothbrush was in her hand, she started brushing her teeth. I then instructed the CNA to use hand-over-hand just to ensure she was brushing properly. This resident is known for resisting care, so initially the CNA was a little nervous but she calmed down once she saw it was working.”*

# Disseminating Comfort Matters: Web-based Training Toolkit for Comfort-focused Dementia Care

Disseminating Comfort Matters is an exciting new project being led by an academic-community partnership and supported by the CMP reinvestment program from CMS. The project goal is to develop and disseminate a web-based version of “Comfort Matters” — the nation’s leading evidence-based model for comfort-focused dementia care. The program is made possible by a new and unique collaboration between academic experts in dementia care from University of North Carolina-Chapel Hill, clinical experts who developed “Comfort Matters” methods at the Beatitudes nursing facility in Phoenix, Arizona, executive sponsors and clinical staff of Liberty Healthcare and Rehabilitation Services in North Carolina, and a panel of stakeholder advisors convened by Friends of Residents in Long-Term Care, a community-based advocacy organization.

“Comfort Matters” training teaches core competencies in comfort-focused care for persons with advanced dementia. The training model was developed using research evidence and real-world nursing home experience at the Beatitudes Campus. All nursing home staff are trained using principles of geriatrics and palliative care and empowered with knowledge and skills to support comfort and quality of life for those living with late-stage or advanced dementia. Training content includes basic dementia competencies; communication and teamwork in comfort-focused dementia care; comfort-focused approaches to dementia related psychological distress; assessing and managing pain; promoting quality of life; and creating person-directed care plans.

“Comfort Matters” training has proven to positively impact care quality, resulting in reductions in antipsychotic and sedative medication use, increased use of appropriate pain medication, decreased rates of chronic pain, and improved staff knowledge. As a result, “Comfort Matters” was recognized by *LeadingAge* with the 2010 Excellence in Research and Education Award and distinguished with the Public Trust Award in 2013. By 2014 the “Comfort Matters” model had received national attention, and developers from

Beatitudes were asked to present their remarkable findings at the Institute of Medicine in Washington, DC.

However, this effective training reaches very few U.S. nursing homes. Current “Comfort Matters” training is delivered face-to-face by Beatitudes staff who must travel to each new participating site. The current training approach reaches only 2-3 sites annually and cannot be widely disseminated to many nursing homes due to time and cost constraints.



To increase accessibility of this highly successful model, “Disseminating Comfort Matters” will transition the training to a virtual platform. This 30-month project will tackle three specific aims: 1) to create the web-based “Comfort Matters” training toolkit, including videos covering training content and demonstrations of dementia care skills; 2) to deliver the web-based training to four Liberty Healthcare nursing homes, and evaluate its effectiveness; and 3) to disseminate the web-based “Comfort Matters” toolkit to all nursing homes in North Carolina.

“Disseminating Comfort Matters” will produce free web-based training tools and procedures that can be readily implemented in nursing homes across the state. The online program will promote broad use by lessening dependence on in-person training experts. Additionally, the training will have continuous benefit, since it can be accessed at any time to address staff turnover and updated with advancements in care practices. The anticipated result will be a sustainable and scalable educational program for nursing home staff, a model for the future of training development to support high quality dementia care, and will lead to improvements in the well-being of older adults with dementia across the state of North Carolina.

## Saint Thomas Health Palliative Care Transitional Program



The Saint Thomas Health Palliative Care Transitional Program is an innovative pilot program that ensures the access to and portability of physician ordered life sustaining treatment documents (POLST) for patients during transition to/from hospitals and residency at skilled nursing facilities. The overarching goal of the program is to increase the number of patient care conversations that are conducted with and implemented for palliative care patients/residents during transfers to, and residencies at, skilled nursing facilities.

In the first phase of the pilot, 372 (more than twice the originally proposed number of 176) patient medical records were reviewed and reconciled. This resulted in 100 POLST forms being faxed from four NHC Skilled Nursing Facilities in the metro Nashville area to the Saint Thomas Health Information Management department to include patient DNR status requests in their inpatient electronic medical record.

Saint Thomas Health implemented the second phase of the program at one NHC Skilled Nursing Facility in Rutherford County. Transitional Care Program Coordinator, Susan Parker, APRN, trained NHC staff to work with residents and families to ensure that their Palliative Care and end-of-life-wishes are documented during transitions. Eight classes on the topic of Advance Directives were taught to nursing and nursing assistant staff. Specific resident case studies experienced during the pilot made the learning contextual.

Twelve NHC residents received Palliative Care consults by Ms. Parker at the Murfreesboro facility and several Saint Thomas Rutherford Hospital consults were also requested by the NHC Social Worker. The pre/post

test data on Advance Directives show an overall increase in content understanding for more than 40 participants.

Recently, an NHC Murfreesboro Nurse Manager overheard Ms. Parker speaking with an NHC resident about his palliative care. The Nurse Manager stated: “Sue was very compassionate with the patient and family. The patient’s death was very peaceful and comfortable because of the conversation Sue had with the resident.”



*Susan Parker (left) and Mari Ann Hood (right)*

# Georgia Statewide Music Integration Program for Seniors

Made possible through CMS Region IV and the Georgia Department of Community Health's civil money penalty fund, Georgia's Music Integration Program for Seniors (MIPS), Project # 2016-04-GA-1107, uses the power of personalized music to help residents remain connected with their past and maintain a meaningful quality of life. Integrating the use of instruments, music assisted bathing, and the Music & Memory Certification, centers strive to achieve the following positive effects of music on their residents, especially those effected with dementia.

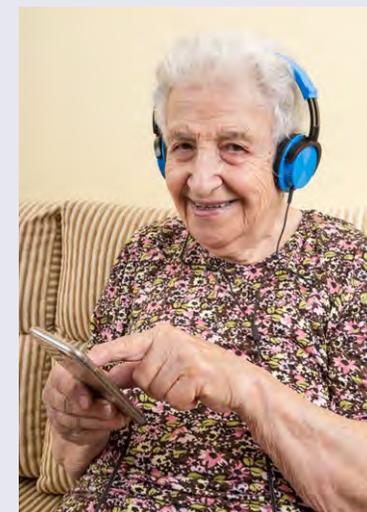
- Improved mood
- Enhanced engagement and socialization
- Reduced use of antipsychotics, anxiolytics, and antidepressants
- Less agitation
- Heightened ability to communicate
- Fewer falls and less resistance to care
- More meaningful interactions

Through a strong commitment to a program focused on the skilled nursing centers' interdisciplinary team and through the inclusion of community members, MIPS continues to impact residents and families throughout Georgia.

## SUCCESS STORY

*“One resident at our center would only respond to questions by saying, ‘yes and yes,’ ‘that and that,’ or ‘no and no.’ She would repeat only those words throughout the day and was unable to answer questions effectively. This resident would become easily agitated and frustrated when she was unable to get her point across. She would also wander and attempt to exit seek. She was placed into the Music & Memory program and was given an iPod, with personalized music, geared toward her musical preferences. She enjoyed listening to a variety of music, but her favorite song was ‘You Are My Sunshine.’ When the resident was listening to her personalized music, she was able to sing every word of the songs she was listening to rather than being limited to ‘yes and yes’ or ‘that and that.’ Once she had her music, she would no longer exit seek, and her agitation would disappear completely. The music calmed and relaxed her. Sadly, this resident has recently passed away. Moved by the positive impact listening to music had on the resident in her final days of life, the resident’s family shared a video of her enjoying listening to her personalized playlist at her funeral. Family members sat in amazement as they watched their loved one singing words to her favorite songs.”*

— Brock Staples  
Westbury Home, Jackson, GA



# Georgia Statewide Music Integration Program for Seniors, cont.



## SUCCESS STORY

*"I have a resident who would become easily agitated and display combative behaviors during periods of agitation. Prior to starting the Music & Memory program, this resident was taking psychotropic drugs. Through the program, a personalized playlist was implemented into his care plan to combat his agitation and combative behaviors. He loves a variety of music, but his favorite artist is B.B. King. When B.B. King is played, he will shout 'Sing it BB!' This resident has had nothing but positive reactions and results when listening to his playlist. During the resident's periods of agitation, the personalized music is implemented, and his behaviors improve. This resident's medication was slowly reduced and, as of today, he no longer takes any psychotropic drugs."*

— Brock Staples  
Westbury Home, Jackson, GA

## SUCCESS STORY

*"One resident, after losing her spouse, refused to attend any parties or events. Prior to the loss, the resident was very active and attended almost every center event. We suggested that she try listening to an iPod with her preferred music. She shared that she would often play the music to help her drift off to sleep while enjoying memories of her departed spouse. After about a month, the resident attended a music event and soon after became a regular attendee at other functions. The resident stated that listening to music helped her release her emotions so that she could attend events without fear of crying uncontrollably."*

— Erin Jones  
Carlyle Place, Macon, GA



# Long-term Care Emergency Preparedness (LTCEP) Educational Program



## UNIVERSITY OF GEORGIA

Georgia's Long Term Care Emergency Preparedness (LTCEP) Educational Program (CMP REQUEST #: 2017-04-GA-1219) kicked off in April of 2018. Long Term Care Emergency Preparedness (Basic Level) has now been delivered five times within the State of Georgia. Completed classes have received excellent participant reviews and, as a result, class sizes are increasing and enthusiasm for the program is growing. Work is already under way to develop the second, more advanced course (to be first delivered in Summer 2019) and utilize new partnerships to strengthen both regional coalitions and state-wide resiliency within the Georgia long-term care community. To date the following healthcare coalitions have hosted the LTCEP Basic Course:

- Region D: October 4, 2018 — Cumming, Georgia
- Region H: October 16, 2018 — Dalton, Georgia
- Region M: October 25, 2018 — Waycross, Georgia
- Region A: November 13, 2018 — Dalton, Georgia
- Region G: November 15, 2018 — Augusta, Georgia

To date, five LTCEP Basic Courses (listed above) have been held (see adjacent chart for percent of certified nursing homes in attendance by Healthcare Coalition Region.) In total, staff members from 62 Georgia certified long-term care facilities have completed the course. Additionally, individuals representing other long-term care organizations and coalition partners have been able to attend as space permits.

## LTCEP – BASIC COURSE CERTIFIED LONG-TERM CARE PARTICIPATION

Coalition Region	A	D	G	H	M
NH in Region	19	41	26	28	14
NH Attended	14	12	13	12	11
<b>PERCENTAGE (%)</b>	<b>73.68</b>	<b>29.27</b>	<b>50.00</b>	<b>42.86</b>	<b>78.57</b>

The team is also tracking impact of these courses by collecting significant feedback, both oral and written. Collected feedback has been exceedingly positive with many noting this was the best course they had been to in years (if ever). Additionally, all participants complete an electronic pre-course and post-course knowledge check to track immediate knowledge gain. In total, participants have demonstrated a 20.572% knowledge gain with regards to LTCEP and CMS Appendix Z (see chart below).

## DEMONSTRATED KNOWLEDGE GAIN BY COURSE

Coalition Region	A	D	G	H	M
Pre-test Score (%)	60.48	67.77	51.05	63.64	57.48
Post test Score (%)	84.67	77.64	76.22	88.15	76.95
<b>KNOWLEDGE GAIN (+)</b>	<b>+23.83</b>	<b>+9.87</b>	<b>+25.17</b>	<b>+24.52</b>	<b>+19.47</b>

One of the greatest challenges for this program has been gaining the participation numbers we desire. Below are some of the noted reasons we are working to overcome:

- Staff members want to attend, but staffing levels at LTC facilities make sending large contingents difficult;

# Long-term Care Emergency Preparedness (LTCEP) Educational Program, cont.



- Real world disasters and events have impacted facilities' abilities to send personnel (Hurricane Florence cancelled one course and Hurricane Michael impacted a second); and/or,
- People have been subjected to non-targeted disaster preparedness courses before and are reticent to sign up for something new without reviews from previous attendees.

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## UNIVERSITY OF LOUISVILLE

University of Louisville's LTC2Prepare program grant funds implementation of a statewide nursing facility preparedness initiative to increase the adoption of emergency preparedness in CNF practices and to support implementation of the CMS Final Rule for Emergency Preparedness statewide towards improving resident quality of life and quality of care. The initiative provides:

- a three-year preparedness training initiative for CNF managers and staff including CNAs, state survey staff, QIO, LTC Ombudsman Programs and partner organizations to create effective and comprehensive emergency preparedness plans with free CEs;
- the first of its kind electronic site-specific CNF Hazard Vulnerability

Analysis (HVA) mapping tool based on objective analysis of actual hazards, their frequency and intensity. The mapping tool allows each CNF to scroll within 7/10ths of one mile of their location and assess the site-specific risks to life safety to enhance the quality of facility planning for optimal response in an emergency and meet Final Rule site-specific HVA requirements;

- the first of its kind catastrophic disaster planning and non-structural mitigation training program specifically for long-term care, based on an earthquake scenario at the New Madrid Seismic Zone with application to many other catastrophic situations. This effort is contracted to CUSEC, the Central U.S. Earthquake Consortium, [www.cusec.org](http://www.cusec.org), to create a CNF-specific hazard mitigation program. Video, print and conference presentation content are being developed to protect from and lessen the potential impacts of a catastrophic event;
- a CNF password-protected website to provide access to all training materials, resources, and tools developed through this grant;
- a KY LTC Ombudsman Program initiative to bring emergency preparedness education to families and residents in CNF with Family Councils.

Evaluation will identify gaps in knowledge, skills and attitudes to implement preparedness and abilities to respond in increasing complex CNF emergency situations. Website usage will also be analyzed and reported for use of the HVA mapping tool, CUSEC materials and the LTC Ombudsman resources.

In its first year, the LTC2Prepare program has trained over 1,100 attendees from 158 CNFs, Office of the SSA, state surveyors, the QIO and LTC Ombudsman.

# Region IV Emergency Declarations / 2016-2018

The Final Rule for emergency preparedness requirements for Medicare and Medicaid participating providers and suppliers was published on September 16, 2016. The requirements apply to all 17 provider and supplier types and became effective on November 15, 2017 to protect the health and safety of all Americans. The table below lists some emergency declarations that have occurred in Region IV states. A website with important links to additional resources and organizations that can assist in developing emergency preparedness plans is <https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/SurveyCertEmergPrep/index.html>.

STATE	TYPE OF DECLARATION	EVENT	DECLARATION DATE	STATE	TYPE OF DECLARATION	EVENT	DECLARATION DATE
AL	Major Disaster	Hurricane	11/5/18	GA	Major Disaster	Hurricane	9/19/17
	Emergency	Hurricane	10/12/18		Major Disaster	Hurricane	9/17/17
	Major Disaster	Severe Storms/Tornado	4/26/18		Fire Management Assistance	Tatum Gulf Fire	11/12/16
	Major Disaster	Hurricane	11/16/17		Major Disaster	Hurricane	10/7/16
	Emergency	Hurricane	10/8/17		Emergency	Hurricane	10/5/17
	Emergency	Hurricane	9/11/17		Major Disaster	Hurricane	10/9/16
FL	Major Disaster	Hurricane	10/11/18		Emergency	Hurricane	10/6/16
	Emergency	Hurricane	10/9/18		Fire Management Assistance	Chestnut Knob Fire	11/18/16
	Emergency	Hurricane	10/8/17		Fire Management Assistance	Party Rock Fire	11/10/16
	Major Disaster	Hurricane	9/27/17		Fire Management Assistance	West Mims Fire	5/7/17
	Major Disaster	Hurricane	9/10/17		Major Disaster	Severe Storms/Tornado/Winds	1/25/17
	Emergency	Hurricane	9/8/17		Major Disaster	Severe Storms/Tornado/Winds	1/24/17
	Emergency	Hurricane	9/5/17	KY	Major Disaster	Severe Storms/Tornado/Floods Landslides/Mudslides	4/26/18
	Fire Management Assistance	Fire	4/22/17		Major Disaster	Severe Storms/Tornado/Floods Landslides/Mudslides	4/12/18
	Fire Management Assistance	Fire	4/21/17		Fire Management Assistance	Southeastern KY Fire Complex	11/19/16
	Major Disaster	Hurricane	10/8/17		Fire Management Assistance	Eagles Nest Fire	11/7/16
	Emergency	Hurricane	10/6/16		Major Disaster	Severe Storms/Tornado/Floods Landslides/Mudslides	8/25/16
	Major Disaster	Hurricane	9/28/16				

# Region IV Emergency Declarations / 2016-2018

STATE	TYPE OF DECLARATION	EVENT	DECLARATION DATE	STATE	TYPE OF DECLARATION	EVENT	DECLARATION DATE
<b>MS</b>	Major Disaster	Hurricane	11/21/17	<b>TN</b>	Major Disaster	Severe Storms/Floods/Winds	1/22/17
	Emergency	Hurricane	10/6/17		Fire Management Assistance	Wildfires	12/14/16
	Fire Management Assistance	South Wenas Fire	6/27/17		Fire Management Assistance	Chimney Top Fire	11/27/16
	Fire Management Assistance	Spromberg Fire	5/22/17		Fire Management Assistance	East Miller Cove Fire	11/18/16
	Major Disaster	Severe Storms/Tornado Floods/Winds	5/22/17		Fire Management Assistance	Smith Mountain Fire	11/10/16
	Major Disaster	Severe Storms/Tornado Floods/Winds	1/25/17		Fire Management Assistance	Flippers Bend Fire	11/8/16
	Major Disaster	Severe Storms/Floods	3/25/16				
<b>NC</b>	Major Disaster	Hurricane	9/14/18				
	Emergency	Hurricane	9/10/18				
	Major Disaster	Severe Storms/Tornado	5/8/18				
	Fire Management Assistance	Chestnut Knob Fire	11/18/16				
	Fire Management Assistance	Party Rock Fire	11/10/16				
	Major Disaster	Hurricane	10/10/16				
	Emergency	Hurricane	10/7/16				
<b>SC</b>	Major Disaster	Hurricane	9/16/18				
	Emergency	Hurricane	9/10/18				
	Major Disaster	Hurricane	10/15/17				
	Emergency	Hurricane	9/6/17				
	Fire Management Assistance	Pinnacle Mountain Fire	10/6/16				
	Major Disaster	Hurricane	10/11/16				
	Emergency	Hurricane	10/6/16				



## Eden Alternative® : Rise Up for Person-directed Care in Georgia



The purpose of this project was to support the efforts of Georgia-based nursing homes to send direct care staff to the 2018 Eden Alternative International Conference in Atlanta, Georgia and build on their conference experience by attending Certified Eden Associate Training. This training is an in-depth educational exploration of what it takes to successfully implement and sustain person-directed care practices.

Beginning on April 27, 2018, this project enabled 195 employees from 56 Georgia-based nursing homes to participate in the Eden Alternative International Conference and/or Certified Eden Associate Training. Grant funds also supported the participation of five state surveyors; fourteen long-term care ombudsmen; and four Quality Improvement Organization (QIO) representatives.

The Eden Alternative had a very short project promotion period. As a result, only 75 people were registered to attend the Eden Alternative International Conference. A project addendum made it possible for additional nursing home employees to attend the Certified Eden Associate Training, even though they had not attended the conference. This more than doubled participation in the project.

Our efforts to gain the participation of Certified Nurse Assistants (CNAs) were noble in theory. Yet, we learned during promotion for the project that the requirement for a CNA to participate was a hindrance for some nursing homes. In our application addendum, we downgraded this requirement to a strong recommendation that a CNA be involved.

During project promotion, we received a call from an Ombudsman in the Americus, GA area, asking if we could bring Certified Eden Associate

Training to her part of the state. We had six locations arranged, and we only had one registration in Savannah. Our team discussed the possibility of cancelling the Savannah event and creating an event in Americus. With approval, we moved the event. The Americus event had the highest attendance of all of the events.

### SUCCESS STORY

One participant of Certified Eden Associate Training shared these powerful reflections about his experience of Certified Eden Associate Training:

*“Eden Alternative Training is life changing. The shift that it represents is going to bring much needed and worthwhile change to all aspects of elder-care.*

*If you’ve been using the buzz words, ‘Person-centered Care’ or ‘Elder-directed Care’ but have not attended Eden Alternative Training, stop what you are doing and take the opportunity to learn how The Eden Alternative can make those terms real to you and others!”*

— David Milner, Jr.  
Heardmont Nursing Home

# CMS Region IV Quality Improvement Initiative

The goal of this project is to improve the quality of care of CMS Region IV nursing facility residents by increasing the knowledge and skills of CNF health care professionals and direct care staff as well as key stakeholders in the access to and application of the Society for Post-acute and Long-term Care Medicine (AMDA) clinical practice guidelines (CPGs). The Initiative is funded by CMP grants from Alabama, Florida, Georgia, Kentucky, Mississippi, and South Carolina providing over 1,900 certified nursing homes access to the Quality Improvement Initiative password-protected website developed and managed by the University of Louisville, Kent School of Social Work.



The website is currently available exclusively to CNF in the above-mentioned six states and key stakeholders providing clinical resources to CNF including CPGs cover 20 clinical conditions ranging from Urinary Tract Infections to Pain Management and Diabetes among 17 other topics. Additional resources from AMDA include a series of templates for CNA and nursing staff (AMDA Know-It-All™) to identify changes in resident condition and communicate

to physicians in an effective, concise manner to expedite diagnosis and/or treatment recommendations, thereby improving quality of care to the resident and lessening the need for hospitalizations.

All CPGs and other AMDA resources are accessed through the website at no charge to direct care CNF staff and health care professionals thus offering cost-effective staff training resources leading to improved health care delivery. Further dissemination of clinical best practices and professional development materials are available on the website to key stakeholders including State Survey staff, LTC Ombudsman programs, Region IV Federal Survey staff and Quality Improvement Organizations. The website provides a portal to a free continuing education program offering CEs for the CPGs to three professions: Nursing, Social Work and Nutritionists/Dieticians for up to 42 CEUs.

The well-being of certified nursing facility residents is improved through increased knowledge and skills in the delivery of health care of residents in Region IV. Access to equivalent training across all levels of certified nursing facility staff can lead to better teamwork and increased person-centered care. Barriers to access to best practices are eliminated and learning preferences are addressed through multi-modalities across the product array.

Outcomes are measured at the levels of (a) website content usage, (b) continuing education examination and evaluation results, (c) degree of application of knowledge gained and skills applied in the delivery of health care post CE certification, d) increase in qualifications and knowledge of

## CMS Region IV Quality Improvement Initiative, cont.

professional staff, e) change in frequency of deficiency citations and CMS quality measures correlated to the CPG topics.

Current website offerings and activities include: Clinical Practice Guidelines (CPG); CPG Implementation Series and CPG Implementation Series Narrated PowerPoints; AMDA's Know-It-All™ and Know-It-All™ Disease Awareness video series; Continuing Education Exams for Nurses, Social Workers and Dietitians/Nutritionists.

The website has been operational since November 2017, and recorded 2,484 website visits. Website usage by role has overwhelmingly been by Administrators, Directors of Nursing, Nurses, State Survey Agencies, CMS Regional Staff, MDS Coordinators, and LPNs. The Continuing Education program is new with completion of 51 examinations recorded. Follow-up surveys have just been issued to exam users to identify impact of the CPGs.

The user IDs and passwords are assigned to facility administrators by the website server so that administrators may share access with staff of their choice. It appears that administrators may not be sharing the resource with sufficient others in the facilities. Continuous marketing efforts by the grant staff and SSA units produce the greatest utilization. Grant staff provide marketing materials for SSA and CNF association newsletters as well as promote the program to professional association conferences.

Centers for Medicare & Medicaid Services Region IV  
Long Term Care Quality Improvement Initiative

Resource  Center

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**Knowledge to give great care**

Long-term care (LTC) professionals and staff need to keep up with emerging clinical knowledge and meet the daily needs of residents with increasingly complex medical conditions.

Now LTC providers in the Centers for Medicare and Medicaid Services (CMS) Region IV have access to free educational resources addressing health conditions experienced by residents living in long-term care.

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# Residents' Rights Consumer Education Project

The purpose of the Residents' Rights Consumer Education Project is to create written material for consumers of Certified Nursing Facilities (CNFs) in Kentucky. The material will be in the form of a booklet focused on residents' rights and regulation revisions. Nursing facility regulations were revised, and a comprehensive revision of the regulations was released in September 2016. The regulation revisions included greater focus on addressing a resident's individual needs and preferences, prompt development of a care plan, more comprehensive care, better protections against abuse/neglect and exploitation, better protection of resident property, increased visitation rights, and transfer and discharge protections for residents. The revised nursing facility regulations offer greater protections for nursing home residents. Providers have received a great deal of information about implementation and intent of the regulatory changes. However, consumers have little access to such information. Residents need access to information about their rights and modern standards of care. The booklet will be printed in large font for residents and include information about their rights (examples include detailed transfer and discharge rights, participation in planning and treatment, etc.), resident and family councils, abuse identification and prevention, emergency preparedness and state agencies that assist residents. LTCO staff and volunteers in the 15 area development districts will distribute and review the booklet at the bedside of CNF residents during regularly unannounced visits and council meetings.

The Kentucky LTC Ombudsman (LTCO) Program will not only deliver hard copies to residents, they will meet one-on-one with approximately 8,000 residents to discuss residents' rights and other information featured in the booklet. Local LTCO will offer presentations to Resident and Family Councils. The LTCO Program hopes to lead discussions about rights using

the booklet at 23 Family Council meetings and 50 Resident Council meetings touching hundreds more residents and families with the information.

The Kentucky LTCOP will offer rights training to facility staff and feature a video recording of LTCO reviewing the materials on the agency's website [www.ombuddy.org](http://www.ombuddy.org).

Many residents are admitted to nursing facilities following a hospital stay and are in process of recovering from acute illness which may not be the most opportune time to learn about their rights. We have identified that residents need additional information about their rights after admission as well as periodically throughout their stay. The need this project will help solve is the need for accurate legible printed information about residents' rights which helps empower residents to be involved in their care and exercise their rights.

Long-term care ombudsmen visited facilities in Kentucky over 13,000 times last year. These visits offer multiple opportunities for ombudsmen to share information with residents, review materials, answer questions and empower residents to be involved in their care. Residents need our support and deserve to receive crucial information from not only facilities but also from the advocates who visit them regularly.



# TimeSlips' I Won't Grow Up Project

“TimeSlips' I Won't Grow Up” is a three-year project addressing the need for person-centered programming that is meaningful to and enjoyable for residents and their support networks — staff, volunteers, and family. We are bringing TimeSlips Creative Community of Care (CCC) training to 12 Signature HealthCare CNFs in rural KY. There are a total of 1,290 elders at the participating sites.

CCC uses the arts to build relationships and community among residents, staff, family and volunteers from the CNFs extended community through collaborative, meaningful art-making. Their efforts culminate in a Creative Festival — a professional and public sharing of the work.

So far, we have witnessed a regional and national team of artists who are working with staff and volunteers to embed creative engagement and community-building techniques into the nursing home community. Staff and volunteers are gradually building confidence in their capacity to guide elders of all abilities through a rigorous and thoughtful art-making process. The nursing homes are actively working towards becoming inventive cultural centers where meaningful programming can engage elders, families, staff and volunteers alike.



## SUCCESS STORY

*“Our elders enjoyed the TimeSlips session. Elders in our memory care unit that usually respond with a nod or raise of a hand communicated verbally with the TimeSlips session. These elders participated, their voices became more prominent and pronounced, as the session continued.*

*The experience of expression and participation with the elders was exciting and rewarding to everyone present.*

*Our elders were engaged, smiled, participated, laughed, used their imagination, created, enjoyed something new. Elders were proud of their creations. TimeSlips opened so many windows for our elders. An open window to exciting new adventures!”*

— Virginia Ratliff, Director,  
Fountain Circle Quality of Life  
Winchester, KY

# TimeSlips' I Won't Grow Up Project, cont.

## SUCCESS STORY

*"I enjoyed the time spent with residents and stakeholders as we came together and used our imaginations. Some of the residents really surprised me that they were that engaged or imaginative. It was a big step for them to share in that large of a group or to break out of the everyday routine and try something new. Some of the residents that don't usually leave their room have caught wind and are excited for this project as well. They want to be a part of it because of how it has changed other residents. We are really excited to start developing the story and see where it takes us. Some residents have asked when the group is coming back. So I think you all were a hit."*

— Jamie Stevens, Director,  
RockCastle Quality of Life  
Brodhead, KY



## SUCCESS STORY

*"The elders have had so much fun with this flying project. First we talked about how great it would be if we could fly anywhere we wanted to go like Peter Pan. Then I asked 'Where would you fly to?' 'Why would you go there?'"*

*One elder said he would fly to Germany because he served three years there while in the army and he wanted to see how much it had changed. Another said she would go to Hawaii and fly right into the beautiful blue water.*

*Talking about places that they would go opened up so many stories and dreams. I love to hear their stories of places they have been and things they have done. But sometimes just asking them is not enough to bring those memories back. It's getting creative and having fun and laughing with friends that opens all those great memories. I love seeing the smiles on their faces as they talk about things that they love, and dream of doing."*

— Misty Montgomery, Director,  
Heritage Hall Quality of Life  
Lawrenceburg, KY

**For more information about this project and the upcoming festivals, please visit:**

<https://www.timeslips.org/about/current-projects>

## TimeSlips' I Won't Grow Up Project, cont.

### SUCCESS STORY

*“Something absolutely magical happened today. I was working on things in our General Store when a couple of the nursing assistants came in. ‘Do you have something for Mable to do? She says she’s bored and she doesn’t want to attend the church service.’ I knew how much Mable loved children so I suggested they take her to where the campers were painting in the activity room. That’s when the magic started.*

*Mable rolled up to the table and closed her eyes. ‘What colors do I see?’ she said inquisitively. She then opened her eyes and began to paint different colors on a piece of canvas. ‘HmMMM, what shall I make next?’ she kept asking herself as she added more colors. ‘I know! I’ll make a shooting star!’ she shouted excitedly — so loud that it startled us and the kids a bit. ‘Now! We all need to add something,’ she said as she handed the camp director Christine and I some paintbrushes. We gladly complied and added our favorite colors into her artwork.*

*After her first piece of artwork was finished, she wanted to immediately create another. We supplied her with another canvas and watched more magic happen. ‘I’m going to do my absolute best this time!’ she exclaimed. She started the artwork off with what looked like a rainbow. What happened next had the camp director and me in tears of joy, and the campers watching her in absolute silence.*

*Mable began to sing as she painted. ‘Somewhere over the rainbow, where it is so beautiful and bright. It’s so pretty up there, over that rainbow. We can all go there.’*

*Her sweet voice warmed all of our hearts. The camp director began playing the song in the background and Mable continued to sing as she*

*painted. ‘It doesn’t get much better than this,’ she said as she finished her second work of art.*

*Mable had participated in an art project recently with our resident artist, Andee, as a part of the IWGU project happening in rural Signature Healthcare nursing homes. She and other elders were asked to create an art piece of how flying made them feel. You could tell she truly enjoyed every second of it, and she wasn’t the only one who opened up and let their creativity shine through. I can already see that this project is going to do amazing things.”*

— Jennifer Franklin, Director,  
Hart County Quality of Life  
Horse Cave, KY



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We appreciate the opportunity to share the success of the CMP Reinvestment Program in Region IV. CMS has created a web page containing basic information about CMP fund reinvestment to serve as a resource for states, ROs, potential applicants for CMP funds, and other stakeholders at <https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/SurveyCertificationGenInfo/LTC-CMP-Reinvestment.html>.



This brochure was compiled by  
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