

# Civil Monetary Penalty Reinvestment Reporting Tool

Please select the report type or types you are submitting for this reporting period. Questions associated with each report type will appear. Please answer each question and/or upload the appropriate documents associated with each question.

Please note that the "Program Expense Report" is included in your contract as Attachment 4 or Attachment 5, depending on when your contract was established. Please reference the CMP Reinvestment Program Instruction Packet if you have any questions related to reporting requirements.

Thank you!

Response was added on 04/26/2021 3:22pm.

Please select the type of report you are submitting. Select all that apply.

- Quarterly Narrative Report
- Quarterly Expense and Budget Report (Expenditure Form)
- Annual Expense and Budget Report
- Follow-up Monitoring Report
- Final Progress Report

Reporting Period:

Jan 1, 2021 - March 30, 2021  
(Example: January 1, 2019-March 31, 2019)

CMS Project Number

2019-04-TN-0625  
(This number can be found on your CMS approval letter.)

TDH Contract Number

GR-20-64495  
(This number can be found on the first page (bottom right hand corner) of your TDH contract.)

Project Name

Compassionate Touch: A Practical Non-pharmacological Approach to Ease Behavioral Symptoms  
(Please enter your specific project name. Do not enter "CMP".)

Project Contact Name

Pam Brandon

Project Contact Email

Pam@ageucate.com

If any agreements or subcontracts were developed to ensure completion of project activities, please attach.

Total number of staff trained during the entire duration of the project (If applicable):

226  
(Only enter a numerical value)

Project Category:

- Direct Improvement to Quality of Care
- Resident or Family Councils
- Culture Change/Quality of Life
- Consumer Information
- Transition Preparation
- Training
- Resident Transition due to Facility Closure or Downsizing
- Other

Focus area(s):	<input type="checkbox"/> Healthcare-Associated Infections <input type="checkbox"/> Emergency Preparedness <input type="checkbox"/> Preventable Hospitalizations <input type="checkbox"/> Improving nursing facilities' overall star rating <input type="checkbox"/> Residents' Rights (Elder Abuse/Neglect or Alzheimer's disease and other dementias) <input type="checkbox"/> Person-Centered Care and/or Trauma-Informed Care <input type="checkbox"/> Distressed and At-Risk Counties <input type="checkbox"/> Quality Measures <input checked="" type="checkbox"/> Culture Change <input type="checkbox"/> Other
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Total approximate number of nursing home residents impacted throughout the duration of the project:	353 (Total number impacted for all reporting periods )
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Total number of nursing homes impacted throughout the duration of the project:	27 (Total number impacted for all reporting periods)
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What success stories have resulted from the project and how do you plan to showcase successes with stakeholders?	<p>AGE-u-cate has shared TN project success stories on LinkedIn with specific acknowledgment to the AHAVA Communities and Beech Tree Manor.</p> <p>The first success is that every participating facility in Tennessee appointed coaches to complete the online coach training. This is very positive because embedded coaches is key to program sustainability.</p> <p>Second, 215 employees attended remote training despite the challenging circumstances with the pandemic. This is evidence of their commitment to continuous quality improvement.</p> <p>The next success to share is that 353 residents throughout the 27 facilities have been receiving CT on a regular basis. This demonstrates the growing commitment of trained facilities to embrace the benefits of expressive touch in caregiving.</p> <p>The feedback received from participants reflects the success of the program implementation.</p>
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Please provide any feedback that has been received from staff, family, or residents as a result of the project.

Received Jan 1 - March 30:

We have an elderly lady that comes to mind who has a diagnosis of Alzheimer's dementia with behavioral disturbances. Her and her family do not believe in conventional medication. She has moments of severe confusion, anxiety and can even become combative. At times, she may believe she is being kept from her family. We have had to get creative in ways to calm and reorient her. The most helpful has been techniques learned through Compassionate Touch. Her family had brought her here for admission since caring for her at home had become overwhelming and difficult. They have attested to a complete change in her temperament. Her family was educated on techniques using Compassionate Touch to see the world from her perspective and how to approach her while in a state of confusion and agitation. The family has stated that they have went from a disease tearing their family apart and feeling they have lost their mother/grandmother to a feeling of direction giving the circumstance and the ability to understand where she is at and how to still have her back on her good days.

I have noticed Residents attitude changes after a nice hand technique, they seem to become very relaxed and have even reminded us that they need CT.

Compassionate Touch has really helped our residents here at Humboldt Nursing & Rehab Center. They really enjoy it and it helps keep them calm and relaxes them.

Our Residents enjoyed the attention they received from this program and looked forward to it and wanted it more often.

CT has been an amazing learning experience.

Previous feedback:

We are still implementing CT with our residents, it has been needed and used now more than ever. The few that participated in the September 21 training have been able to pass along some useful CT tools. It has made all the difference in the world.

Hello, I just wanted to let you all know that this program does work. We are new to the program and have been working with our clients since September 15, 2020. I have a resident who was grinding her teeth, and yelling out. She is located not far from my office, so I did select her as one of our 10 Residents. I have been doing hand technique with her and singing to her. I have already began to see a decline in her yelling. She seems to rest better and the grinding of the teeth stops when I am working with her. I haven't gotten her to sing with me yet, but I feel it is going to happen any day now. I am so pleased with the new program.

It is so exciting this program is about to launch in our Tennessee communities. I LOVE this program and can certainly see the benefit.

Please attach any materials, meeting minutes, or attendee lists that have resulted from the project. Examples: toolkits, process documents, training materials, marketing materials, photos, etc.

[FILE: Test- CT Beach Tree LIn.png]

Do you have additional materials to upload?

Yes  
 No

Please upload any additional materials.

[FILE: Compassionate Touch Implemen...COVID.pdf]

Please upload any additional materials.

[FILE: scheduled remote CT training...ssions.pdf]

What do you consider to be the greatest impact(s) of the work performed utilizing CMP funds?

Opening the eyes of the staff that human connection is good medicine for everyone. By in large, the care provided to elders in SNF tends to be very task focused. Using our two hands to sooth, calm, comfort, connect and communicate to elders that someone cares about their personhood is vitally important. It can restore the humanity in caregiving. AGE-u-cate's mission is to change Attitudes and Actions. These CMP funds have impacted a large number of caregivers to think differently about the process of caregiving.

What best practices resulted from the project and how can other facilities or other organizations duplicate the project?

The outcome results demonstrate once again that expressive touch is effective in responding to and preventing behavioral expression in persons with dementia.

It is efficient and cost effective for other organizations or facilities to duplicate this project. Facilities can select coaches to complete the online training, and that equips them to teach their co-workers the CT techniques. ATI also offers virtual and onsite trainers.

What activities have occurred to ensure sustainability since the completion of the project?

1. We are working with one community to provide a video testimonial of CT in action.
2. TN Coaches have been invited to attend two webinars since 3/30/21.
3. TN Coaches received an ATI newsletter.
4. ATI holds a quarterly CT Coach Connect webinar.

We make a concerted effort to keep trained facilities connected and supported.

Describe any plans for moving forward and what, if anything, you will do differently.

It was a challenge to keep facilities moving forward during the pandemic. On-site training carries the most successful for full implementation and sustainability. There were some valiant efforts on behalf of many TN facilities to implement this program in the midst of very difficult times. We have modified the method for collecting status reports and resident outcomes from the facilities. We need to make this as simplified as possible to get good participation.

Please list the major goals and objectives of the project and answer the following questions for each:  
 -Did you meet the outlined goal or objective? Why or why not? Please provide a detailed response.  
 -What impact did your activities targeted at meeting the outlined goal or objective had on nursing home residents in the facility or facilities?

1. 95% of CT Caregiver Training and Coach online training will score 90% or better on training competency tool provided by ATI.  
This goal is met: 91%.
2. 95% of coaches will have conducted in-house training for staff.  
This goal is not met.
3. 10% reduction in physical behavioral expression in residents.  
This goal is met. Reports received from 15 facilities, representing 353 residents, indicates that staff observed a decrease in behavioral expression in 33% of the residents.
4. 10% reduction in verbal behavioral expression in residents.  
This goal is met. Facility reports indicates staff observed a reduction in verbal behavioral expression in 42% of the residents.
5. 10% reduction in other behavioral symptoms (over-all illbeing).  
This goal is met. Facility reports indicate staff observed a reduction in illbeing in 64% of the residents.
6. 10% reduction in rejection of care.  
This goal is met. Reports indicated an observed reduction in 37% of the residents.
7. 50% of TN surveyors, ombudsman and QIO advisors will have participated in CT training. 44 were trained throughout the grant period.  
In this especially difficult time, offering nursing home employees a tool to calm, sooth, and help residents be connected with their surroundings is very impactful. We've been told that using expressive touch in the process of care is also a stress reducer for employees, in addition to the residents.

Please list any project deliverables that are outlined in the project description and answer the following for each:

-Did you meet the project deliverable? Why or why not? Please provide a detailed response.

-What impact did your activities targeted at achieving the project deliverable have on nursing home residents in the facility or facilities?

1. 27 nursing homes will have integrated CT into their facility's dementia practices. 100% of the 27 facilities appointed up to three persons to become Compassionate Touch Coaches. All facilities received CT training supplies via shipment. 48/68 people completed coach training among 19 of the 27 facilities. The pandemic hit some facilities harder than others, so project implementation in 100% of the enlisted facilities was significantly slowed by the pandemic.
2. AGE-u-cate could not provide onsite training due to the pandemic. However, we delivered virtual training for 215 employees from 7 TN facilities. AGE-u-cate scheduled two remote training sessions each week starting in January 2021. Facilities were invited to involve employees in the training.

In addition, every facility will be provided with unlimited subscriptions to our one-hour device enabled Compassionate Touch training course to encourage continued employee training and sustainability.

3. Conduct surveyor/ombudsman training. This was accomplished in several sessions: 2/13/20, and two sessions each on 8/20/20 and 8/28/20. Total trained is 41.
4. On-line Coach Training. The ATI project manager worked with each facility to have them appoint up to three persons to become Compassionate Touch Coaches. Technical questions were dealt with immediately so that training was not delayed. The ATI project manager monitored coach completions, and reached out to the facility administrator and/or designated coaches to provide encouragement to complete the course. In many cases, there was turnover in designated coaches, so facilities were given the opportunity to appoint another person.
5. The ATI project manager held quarterly coach support webinars. In addition, twice weekly remote training sessions were offered to support coach efforts to train employees.
6. Outcomes tracking and reporting. The TN facilities were responsive in providing regular feedback to ATI regarding implementation and outcomes. A more efficient process was established via a Microsoft Survey Tool to collect implementation and resident outcomes for purposes of this final report. This significantly improved the facility response rate.

Impact: Based on the outcomes reporting and testimonials from the facilities, the impact to the nursing home residents is evident.

Compassionate Touch provided a new way for employees to relate to residents, in a most difficult time. Feedback from the 15 responding facilities revealed the following:

1. 28% reported that communication with residents improved.
2. 25% said staff better understand resident behaviors.
3. 66% said relationships with residents improved.
4. 33% said the staff are better equipped to respond to resident behaviors.

Results Measurement(s): Please indicate what measurement methods you utilized to track progress and project success. Please provide a summary of measurable project results.

ATI's learning management system tracks completion status of coach training. A weekly report was given to the grants manager to monitor and respond accordingly.

ATI has a database that tracks all aspects of project implementation.

Measurable project results:

1. 27 enlisted facilities
2. 19 facilities have at least one completed coach.
3. 226 nursing home employees have been trained to use the Compassionate Touch techniques.

Results Measurement: Please upload any relevant data or graphs related to project final outcomes and/or success. Please segment all data as appropriate.

[FILE: TN Final Report Outcomes Graphs 2021.pdf]

Examples:

- Unidentified MDS data for residents participating in the program before and after implementation;
- Infection rates at baseline and after project implementation;
- Number of participating residents each quarter;
- Pre and post survey results;
- Costs savings.

Do you have additional results measurement documentation to upload?

- Yes  
 No

Please provide any additional information you would like to include in your final report.

Despite the limitations presented by the pandemic, AGE-u-cate is pleased with the commitment demonstrated by many TN communities to move forward with this project.

We pivoted quickly and responded to the changing conditions presented by the pandemic to keep the project moving forward.

1. To adapt to the employee turnover, ATI expanded the number of CT coaches per facility so that new staff could take the online training.
2. To adapt the mandated resident isolation, ATI educated TN facilities on using modified CT techniques during isolation.
3. ATI added twice weekly virtual employee training to support CT coach training efforts.

AGE-u-cate is pleased to have been a part of helping SNFs in TN address the emotional needs of their residents during this very difficult time.

Please upload any additional documentation you would like to share in your final report.