Examples of Approved CMP Reinvestment Fund Projects

1. **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. Examples:

   **Louisiana** - CMPs funded a workforce and culture change project focusing on achieving staffing stability in nursing homes, and a culture change conference in the State.

   **Illinois** - enabled the Long-Term Care Ombudsman Program (LTCOP) to promote the Pioneer Movement.

   **New York** - funded projects that facilitated nursing homes’ implementation of culture change.

   **Georgia** –
   - Conducted a “Culture Change in Nursing Homes Symposia” to educate providers and develop public policy recommendations; for scholarships on behalf of long-term care ombudsman to attend Culture Change summit of Georgia; and for development of web-based training modules for ombudsman staff and volunteers focused on culture change principles and practices
   - Conducted Changing the Culture of Death and Dying in the Nursing Home Setting: Pre-Bereavement Planning and Physician Orders for Life-Sustaining Treatment (POLST) Discussions
   - Implementation of a Green Space for Residents
   - Implementation of a Virtual Dementia Tour designed specifically for LTC staff and personnel as well as residents and resident family members
   - Building a model to provide resources and training accessible to all nursing homes in Georgia (374) to improve the quality of life for their residents, including residents living with dementia

   **Massachusetts** - used CMP funds for a State-wide culture change coalition conference, a culture change newsletter and a 2-year project with several nursing homes on Quality Improvement and consistent staff assignments.

2. **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;

   For example, CMP funds could be used to support facilitators, involvement of knowledgeable experts in council meetings, or other initiatives to engage residents and families in the development and implementation of quality improvement programs.
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Examples:
Maryland - provided a multi-year grant to the National Citizens’ Coalition for Nursing Home Reform (NCCNHR, now “Consumer Voice”) to support the development of family councils in the State, including resources and information such as a DVD on family councils and an informational booklet.

Minnesota - used CMP funds to host a conference for family members that highlighted quality improvement success stories in MN nursing homes for consumers.

Connecticut - used CMP funds to support their VOICES program which brings together presidents of resident councils to share their thoughts and to bring the concerns and ideas of residents to the attention of public officials who can assist in addressing problems.

3. 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. Examples:

New York:
• Hiring of independent consultants to train nursing home staff on four “life enrichment modules:” Therapeutic Small Group Activities, Soft Sensory Programming (to relate to dementia residents through aromatherapy, music and gentle touch), Roving Cart Activities (provide individualized activities to residents) and a Dignity and Sensitivity Boot Camp (exposes staff to life as their residents experience it).
• A project to improve resident balance and mobility and decrease falls using innovative exercise and balance programs that include Tai Chi and Yoga.
• Several projects to enable facilities to substantially improve their residents’ dining experiences. One project funded a fine dining project. The facility committed its own funds for renovations, while the project funds paid for training of all staff in fine dining procedures, steam tables, music systems for the dining rooms, elegant linens, etc. The project incorporated staff, resident, and family satisfaction.

Georgia:
• Developed a Curriculum and Training Program for Clinical Practitioners and Staff on The Younger Adult in the Long-Term Care (LTC) Setting
• Implemented a Quality Improvement Initiative using the American Medical Director’s Association (AMDA) Clinical Practice Guidelines for LTC
• Reducing the incidence of adverse effects of unnecessary antibiotic use in long-term care facility residents through antimicrobial stewardship enhancements


4. 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. Examples:

• Use CMP funds to develop and distribute printed and Web-based toolkits for residents, families and caregivers on how to identify mental health issues, such as depression and anxiety, and
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treatment options so that individuals can overcome stigma, understand their options and take control of their mental health care.

- **Ohio** - funded start-up of Ohio’s consumer guide Website [http://www.ltcOhio.org/consumer/index.asp](http://www.ltcOhio.org/consumer/index.asp).

5. **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. Example:

   **Michigan** - funded a CMP project to pull together a workgroup (1½ years) to figure out the underlying factors of facility closure and come up with creative ideas to address closure issues and their impact on residents.

6. **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. See S&C Memorandum 11-12-NH for more details.

**Georgia**-
- Dissemination of Resident and Family Decision Guide, Go to the Hospital or Stay Here?

7. **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. For example, this effort might include a statewide pressure ulcer or fall prevention collaborative that includes joint training of surveyors and facility staff from multiple nursing homes that are committed to implementing effective fall prevention programs.

**Georgia**-
- Implementation of a Culture Change to Person-Director Care at various nursing homes
- Implementation of a Music and Memory Person Centered Care Model, to include a Certification Program
- Facilitation of Person-Centered Care Training, to include a Certification Program
- Long Term Care Emergency Preparedness Educational Program
- Implementation of Infection Control Certification Training