

CMP Fund Grantee	CMP Fund Grant Awarded Amount	Project Period	Project Category	Project Title and CMP Grant Fund Project Number	Project Purpose, Goals and Objectives	Expected Deliverables or Metrics for the Project	Results of the Project	Lessons Learned
American Medical Directors Association (AMDA), Inc. (Gwenn Murray)	\$293,524.00	March 27, 2015-August 31, 2017	Direct Improvements to Quality of Care	The Younger Adult in the LTC Setting 2014-04-GA-AMDA-1006	The purpose and goal of this project is for AMDA to provide services to improve the quality of care and quality of life for younger adults utilizing long term care services. This is a regional CMP award that authorizes training to be provided in the participating Region IV states of Alabama, Georgia, Florida, Mississippi and South Carolina. The project objectives are: A. Develop training curriculum and training program for clinical practitioners and staff on the young adult in the LTC setting. The curriculum will be developed using a three-pronged training strategy: (1) online component; (2) face to face component; and (3) virtually, in a learning collaborative; and B. Educate and train the Medical Directors, nursing home staff, HFRD surveyors, the LTC Ombudsman and members of the Quality Improvement Organizations on how to provide better care for the young adult in LTC.	1. Creating the Younger Adult in the LTC Setting educational curriculum and materials 2. Web-based course creation and launching of the web-based training 3. Webinar production 4. Video production 5. Conduct 13 Live trainings in Region IV (7 per year) 6. Launch the learning collaborative 7. Dissemination of findings	AMDA completed and delivered a successful project. (1) The Young Adult in the LTC Setting educational curriculum and materials (training curriculum, training workbook and supporting tools and documents) have been completed and are available for use. (2) The web-based course was created and the web-based training was launched. The online training platform went live on April 14, 2017 and was promoted and deployed to the states that had completed in-person trainings (GA, MS and SC). On July 1, 2017, the online training module was made available and promoted to the remaining three states (AL, KY and FL) to allow them the opportunity to register and complete the training, prior to the end of the grant period. Learning resources were available on the online training website through the end of the project period (August 2017). The Younger Adult DVD (targeted at the Skilled Nursing Facilities (SNF) Certified Nursing Assistants (CNA) population was finalized and completed), which is an abbreviated version of the Younger Adult curriculum in a DVD format, features narrated course material, select videos and has been configured into 15-20 minute modules to facilitate delivery to CNA staff. (3) The webinar was developed and delivered. (4) Video production was completed and ten videos are imbedded within the curriculum. (5) 13 Live Trainings were conducted in Region IV. Two live trainings were conducted in each of the five states and three live trainings were conducted in FL. Six trainings were conducted in 2016 and seven trainings were conducted in 2017. (6) The learning collaborative was launched during the 4th quarter of 2016. On December 7, 2016, the first webinar was conducted and Dr. Hudson Garrett presented an hour-long webinar on, "Preventing Antibiotic Resistance in the Younger Adult in the Post-Acute/Long-Term Care Setting: Strategies for Stewardship." (7) Findings were disseminated via quarterly reports, annual reports, Insight Policy Research reports and the final report.	There were some challenges in successfully completing this project. The biggest challenge was the difficulty of managing the project across the multiple states with different contract effective dates as well as deliverables. In the future, for regional projects, the hope is to ensure consistency with the contract effective dates and deliverables (as much as possible) across the different states.
Avalon Health and Rehabil6:16itation Center (Miram Deberry)6:14	\$47,339.50	June 10, 2016-April 14, 2017	Culture Change	Avalon's Green Space 2016-04-GA-0128	The purpose and goal of this project is to create a green space that all Avalon Health & Rehabilitation Center residents can utilize to be able to engage in outdoor activities that they enjoy. Specifically, the green space will include a pergola, garden, seating for residents, a walkway as well as fencing and lights around the perimeter of the green space. The green space will be used as an intervention when residents become anxious or have destructive behaviors.	Measures of success will include: 1 A decrease of 20% in the usage of psychotropic medications compared to the previous three (3) years* to address agitation and anxious behaviors; 2. A decrease of 20% in staff interventions for behaviors that arise between residents and themselves; and 3 An increase of 20% in the overall resident satisfaction and contentment with the center implementation of the new green space. *Years 2013-2015 Year #of Medications 2013 578 2014 493 2015 476 2016 391 2017 400	The Avalon Green Space is completed and residents are able to walk freely up to the doors that allow them uninhibited access into the green space. Based on the resources needed to fulfill the project and anticipated costs, the project received a savings of \$674.99. The project was a complete success, to include an overall decrease of at least 20% in the usage of psychotropic medications as compared to years 2013-2015 (from 476 (2015) to 391 (2016) and 400 (2017); a decrease of at least 50% in staff interventions (from 25 (1/1/2016) to 13 (1/1/2017) ); and an increase of at least 50% of overall resident satisfaction regarding the Green Space implementation (from 30% (12/2016) to 80% (06/2017).	Since the introduction of the green space and beautiful weather, activities have occurred including planting of flowers and vegetables, reminiscing outside, exercise and gatherings. Residents have also taken loved ones to spend quality time outside for a more intimate setting and for special occasions. The walking trail also allows for all forms of ambulation and plenty of seating for taking breaks.

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University of Georgia Research Foundation, Inc. (Dr. Toni Miles)	\$176,032.00	June 16, 2016-September 1, 2017	Culture Change	Promoting Quality Bereavement Care 2016-04-GA-0205	The purpose and goal of this project is to produce standardized practices and in-service training to add quality bereavement care to the Long Term Care (LTC) setting. Project Objectives: a) Conduct qualitative interviews with individual residents, their families, staff and facility leadership. b) Develop a process for facilitating advance care planning and Physician Orders for Life Sustaining Treatment (POLST) discussions for residents and families. c) Conduct in-service education for staff and families on the implementation of advanced care and POLST. d) Develop and implement an organizational ritual that acknowledges all residents who die in the LTC home. The form of this ritual will be determined by consensus of residents and staff, but may include a newsletter with obituaries, a memory tree, having a regular memorial service or conducting a room blessing. e) Create a model for bereavement care that can be introduced into LTC facilities in the Macon, Georgia area for further refinement.	a) Qualitative interviews with individual residents, their families, staff and facility leadership; b) Development of a process for facilitating advance care planning and POLST discussions for residents and families; c) In-service education for staff and families on the implementation of advanced care and POLST; d) Development and implementation of an organizational ritual that acknowledges all residents who die in the LTC home; and e) Creation of a model for bereavement care that can be introduced into LTC facilities in the Macon, Georgia area for further refinement.	Based on the final report and supplemental information, all expected deliverables were accomplished. The development of a process for facilitating advance care planning and POLST discussions for residents and families was fulfilled through evidenced detailed conversations and feedback sessions as well as the completion of the Best Practices Booklets (two, one for LTC residents and one for LTC staff) and PowerPoint Presentations (two, one presentation encompasses the materials from the Best Practice booklets and the other is a brief version of the complete presentation that can be used if time is limited). In-service education for staff and families was conducted and evidenced by the quarterly progress reports and final report. During the project, UGA quickly learned that many of the facilities already had existing rituals/remembrances at LTC facilities and therefore only sometime was spent assisting with this process at facilities where no process was in place, e.g., Ethica Facilities. Finally, the creation of a model for bereavement care was established via the Best Practice Booklets and PowerPoint presentations previously discussed.	As a result of the project, UGA learned that the use of POLST is becoming more common, particularly at Carlyle Place and its use is also widespread at many of the Ethica facilities. Additionally, best practices for discussing POLST include the use of the phrase "allow natural death" versus "do not resuscitate." UGA also learned that the type of rituals performed varied by facility. For example, some facilities conducted individual rituals, such as "Celebration of Life." Other facilities conducted annual, quarterly or monthly ceremonies to honor individuals who have died. There were also some major challenges faced: 1) the busy schedules of the LTC staff and management which created delays in scheduling interviews and scheduling facility-wide feedback and educational sessions; 2) Recruiting facilities to participate; and 3) Incorporating all feedback into a single, aesthetically pleasing, easy-to-read booklet was very challenging. In addition to the lessons learned and major challenges, UGA discovered that there is a need for future work, which would include: 1) distribution and presentation of the materials at other facilities across the region; and 2) training and evaluation of impact on care quality and use of advance care planning and POLST within each facility.
A.G. Rhodes Health and Rehabilitation (Cobb) (Deke Cateau)	\$88,000.00	August 30, 2016-October 1, 2017	Direct Improvements to Quality of Care	Culture Change and Person-Directed Care 2016-04-GA-0511	The purpose of this project is to create a culture where residents receive person-directed care. The objectives of the project are to: (1) improve the residents' quality of life; (2) leave residents, family and staff feeling empowered and engaged; and (3) replicate person-directed care within the remaining A.G. Rhodes facilities.	1. To seamlessly transition from a well-established medical focus to person-directed care 2. To coordinate the necessary tools and resources, including training and assessments, and manage the results of metrics, so that the program is effective and can be sustained. 3. To replicate person-directed care within the remaining A.G. Rhodes facilities.	As a result of the project, A.G. Rhodes was able to successfully transition from a well-established medical focus to person-directed care. This is evidenced by the established and reported change components, process measures, short-term impact measures and outcome measures. Based on the documented training, assessments and development of metrics, the coordination of the necessary tools and resources was also performed. Finally, the process of replicating person-directed care within the remaining A.G. Rhodes facilities is underway, but not fully completed to date.	During the course of the project, A.G. Rhodes discovered a few lessons, some of them include: 1) Ensuring that education is disseminated to as many people within the facility/organization as possible helped to create buy-in and meaningful participation; 2) Communication is essential and A.G. Rhodes' Core Team Members for this project identified "learning circles" as a good communication strategy; and 3) Thinking outside the box for problem-solving proved to be very helpful. The Core Team members identified the GROWTH model and the "Rule of 6" as innovative problem solving strategies.
A.G. Rhodes Health and Rehabilitation (Cobb) (Deke Cateau)	\$146,081.03	April 9, 2018-August 30, 2018	Direct Improvements to Quality of Care	Enhancing Quality of Life with Technology 2017-04-GA-121B	The purpose of this project is to support efforts towards moving A.G. Rhodes Health and Rehabilitation-Cobb to a culture of person-directed care by acquiring technology that will directly benefit its elders. The goals of this project are to: (1) acquire and use advanced technology developed to benefit elders; and (2) advance the person-directed care initiative. Specifically, A.G. Rhodes Health and Rehabilitation-Cobb would like to: (1) secure the most effective technology that directly supports its elders, staff and organization; (2) seamlessly incorporate technology into the day-to-day operations; and (3) document the effectiveness of this technology for replication purposes in all A.G. Rhodes Homes.	1. Equip the Elders at A.G. Rhodes-Cobb with television sets by purchasing 130 television sets and remotes for the Elders beds and three (3) 55" LED television sets for the common areas. 2. Equip the A.G. Rhodes-Cobb Home with technology to create a highly personalized, dynamic plan of care for the Elders that connects them to family and friends by purchasing Simple C technology. 3. Create A.G. Rhodes Knowledge College for staff to participate via instructional technology in continuing education, regulatory compliance and other training tools. Training will be providing electronically (E-training) focusing on dementia and by purchasing and using two (2) desktop computers for staff who may not have access to the internet at home.	As of December 5, 2018, approximately 20,300 hours of Simple C therapies have been provided since installation on April 17, 2018. With an anticipated outcome to reduce nighttime interruptions, SimpleC has been helping to reduce the impact of both necessary interruptions (medication delivery), as well as when elders have a rough night or need to settle back to sleep when they awaken during the night. This project enabled every resident at the nursing home to receive a television and use the SimpleC technology. Additionally, televisions were also provided in common areas for stimulation, entertainment and enjoyment.	N/A

