

# 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 07/29/2019 3:12pm.

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

- Invoice Submission (Payment Form)
- Quarterly Narrative Report
- Quarterly Expense and Budget Report (Expenditure Form)
- Annual Expense and Budget Report
- Follow-up Monitoring Report
- Final Follow-up Monitoring Report (Summary Report)

Reporting Period: 4.15.19--6.30.19  
(Example: January 1, 2019-March 31, 2019)

Is the report you're submitting a Q4 report?  Yes  
 No

CMS Project Number 2019-04-TN-0108

TDH Contract Number 34305-24319

Project Name Training and Assistance to Individualize Pain Management and Improve Opioid Safety in Nursing Homes

Project Contact Name Amanda Ryan, PharmD, BCGP

Project Contact Email aryan@qsource.org

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

Total number of staff trained during this reporting period as a result of the project (If applicable): 0

Total number of staff trained during the entire duration of the project (If applicable): 0

---

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:

- Healthcare-Associated Infections
- Emergency Preparedness
- Preventable Hospitalizations
- Improving nursing facilities' overall star rating
- Residents' Rights
- Quality Measures
- Culture Change
- Other

---

Please specify your area of focus: Opioid Safety and Pain Management

---

Total approximate number of nursing home residents impacted through the project within the current reporting period: 0  
(Total number impacted during the period you are reporting for)

---

Total approximate number of nursing home residents impacted through the project: 0  
(Total number impacted for all reporting periods )

---

Please provide a detailed description of project activities that have occurred during the reporting time frame.

Project start up activities began April 15, 2019. The Qsource project team began project planning meetings at that time. A timeline was confirmed and a kick off meeting with the Tennessee Department of Health (TDH) was completed. It was determined that Salesforce would be utilized to document project contacts and communications.

Recruitment began April 25, 2019. Recruitment strategy and a participation agreement were developed and finalized. TDH and the Tennessee Health Care Association (THCA) assisted in recruitment by sending out email communications to the identified facilities. There were three phases of recruitment. During the first phase facilities were identified based on the most recent composite score reports, targeting facilities that had an opportunity to improve on quality measures related to opioids. The second phase targeted facilities that Qsource had previously worked closely with on other initiatives. For phase three, a mass invitation was sent out to the remaining facilities across the state. Qsource also shared information about this project via its social media channels. 25 Nursing homes were successfully recruited and have signed participation agreements, including a 1 star facility. Two additional facilities have been placed on a waiting list. Qsource engages with recruited facilities on a weekly basis through email. The facilities are responding to questions regarding medication safety and pain management at their facilities. This will help the project team determine opportunities for education and specific resources to provide. The facilities are also determining who will serve as their SNF Instructor, as well as other medication safety team members who will attend the in-person trainings. Nine facilities have documented those members so far.

An online resource portal has been developed to provide a place for facilities to easily and quickly obtain information for this project. This is in addition to the binders that will be provided at the trainings.

Three in-person training venues have been secured. The trainings will occur August 6th in Knoxville, 8th in Murfreesboro, and 14th in Jackson. Materials for the trainings are in development. This includes a PowerPoint presentation and all training resources to be provided in a binder for each facility, as well as data collection tools.

---

What success stories have resulted from the project and how you plan to showcase successes with stakeholders?

Qsource was successful in recruitment for this project due to the relationships built over time with the nursing homes, TDH and THCA. The nursing homes in TN have trust in us and are excited to partner on improvement projects.

We plan to share success stories from this project and best practices monthly via technical assistance calls to ensure strategies are shared across all facilities. Success stories will also be highlighted on Qsource website and social media. During our Outcomes Congress webinar in early April 2020, Qsource will showcase all successes and highlight performance of participants.

---

What obstacles have you encountered while implementing the project and how you have overcome them?

Obstacles during recruitment included competing priorities for nursing homes, staff turnover and venues. To mitigate the obstacle of competing priorities, project team members educated the facility on the benefits of working on pain management and medication safety and how it can improve not only the quality of care, but also their quality measures. We utilized their specific data to show them that this should be a priority for their facility.

Staff turnover in nursing homes continues to be an obstacle. To overcome this barrier, we reached out to corporate leadership for nursing home chains to obtain their buy in and identify the best contact at their facilities. We also make sure to have multiple contacts at each facility to mitigate the risk of turnover during the project.

Identifying and booking venues for the in-person trainings was a challenge. We wanted to make sure the three venues were geographically positioned to be easily accessible for the participating nursing homes. For this obstacle, we thought outside the box and considered non-traditional venue types when needed. For example, in Jackson we will be conducting the training at West Tennessee AgResearch and Education Center.

Please provide any feedback that has been received from staff, family, or residents as a result of the project.

During recruitment we solicited feedback from the nursing home staff about this project.

Here is some of what they shared:

1.  Excited to learn new alternative therapies as well as make documentation easier for the nursing staff.
2.  Interested in learning to improve the ability of caregivers to recognize, assess and manage pain in our residents
3.  Want to learn ways to engage residents, family members and providers and introduce new alternatives to pain management as well as improve recognizing early signs of pain and discomfort.
4.  Very interested in options for non-opioid pain treatments
5.  Would like to learn ways to effectively manage pain without the use of unnecessary medications.
6.  Excited for help in managing residents with chronic pain
7.  Want to learn how to best manage residents' pain while maintaining regulatory standards

Please list any project deliverables that are outlined in the project description and provide a status update for each deliverable.

Deliverable: Attend grantee training session if offered

Status: We will extend an invitation to the TDH to attend any of our in-person training sessions.

Deliverable: Quarterly Narrative Progress Report (Q1)

Status: Report is being submitted via REDcap.

Deliverable: Quarterly Expense & Budget Reports (Q1)

Status: Report is being submitted via REDcap.

Deliverable: Quarterly Invoice (Q1)

Status: Submitted invoice to receive the budgeted FY20 funding on 7-23-19

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.

[document]

Do you have additional materials to upload?

- Yes  
 No

Please upload any additional materials.

[document]

Please upload any additional materials.

[document]

---

Please list the major goals and objectives of the project and describe what progress has been made in achieving these goals and objectives.

1. 25% aggregate improvement on all questions from pre-test to post-test given before and after in-person training.  
Training materials are being developed to educate nursing home staff.

2. At least 20 in person training participants completing pre and post tests, with at least one participant from 20 NHs  
Attendees will complete the pre/post tests at the venue on the day of the training to help ensure we obtain at least 20.

3. 25% relative improvement rate (RIR) of total number of non-opioid pain treatments offered.  
Training materials specific to non-opioid pain treatments are being developed.

4. 50% of participating facilities utilizing a comfort menu.  
Training materials specific to developing and implementing comfort menus are being developed.

5. 15% RIR proportion of specific pain indications for residents on opioids  
Training materials specific to obtaining specific indications for opioid use are being developed.

6. 5% RIR of residents with opioid orders  
Training materials are being developed to educate nursing home staff on the appropriate use and tapering of opioids, as well as additional therapies to assist with pain management. There is also training around how to identify residents who are good candidates for tapering of their opioids.

7. 5% RIR in patient satisfaction with pain management as measured by the Pain Enjoyment and General Activity (PEG) Scale  
Training is being developed to educate nursing home staff on how to use the PEG scale to assess a resident's pain management satisfaction, as well as how to use that assessment to target specific therapies to improve it over time.

---

Results Measurement(s): Please indicate what measurement methods you are utilizing to track progress and project success. Please share results measurement activities that have occurred during this reporting time period.

We do not yet have data for the goals and objectives listed above.

However, we did track the number of nursing homes contacted and the number of nursing homes recruited during months one and two. (4/15-6/14)

We began recruitment on April 22nd by contacting 107 nursing homes. Of those, we successfully recruited 25 and established a waiting list of other interested homes by May 30th. We are utilizing Salesforce to document and track the facilities we reach out to and their responses.

---

Please upload any relevant data or graphs related to project outcomes or success. Please segment all data as appropriate. 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

---

Do you anticipate any changes to your evaluation methods, expected outcomes, or timeline for the next reporting period?

- Yes  
 No

---

Please provide a detailed description of the expected activities that will occur during the next reporting period.

The next reporting period will be the first action period phase. During this action period the training materials will be finalized and three in-person trainings will be conducted. Following the in-person trainings the Qsource team will conduct at least one, 1 on 1 virtual technical assistance call with each participating facility, with the goal of finishing all 25 facilities by 9/30/19, if possible. The facilities will also begin to submit monthly data to track progress.

Qsource will monitor submitted data, as well as quality measure data for participating facilities.

Development of a sustainability plan will begin.

---

Please indicate what assistance the Tennessee CMP Reinvestment staff can provide to help you achieve your project goals and objectives.

No needs identified at this time, but thanks for the help so far and we'll reach out if we need something.