

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 11/27/2019 12:49pm.

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: September 1, 2019 - November 30, 2019
(Example: January 1, 2019-March 31, 2019)

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

CMS Project Number 2018-04-TN-0904

TDH Contract Number Z19194158 (194158)

Project Name CMPQI

Project Contact Name Lee Rooney

Project Contact Email admin.cookeville@shccs.com

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

Total CMP funding amount spent during this quarter: \$10,645.00
(This should also be reflected on attachment 4.)

Total CMP funding spent for the project at this point in time: \$10,408.00
(This should reflect the total CMP funding amount spent in this reporting period and previous reporting periods. This should also be reflected on the Program Expense Report.)

Total number of staff trained during this reporting period as a result of the project (If applicable):	4
Total number of staff trained during the entire duration of the project (If applicable):	4
Please complete and attach the Program Expense Report to reflect any expenditures during this reporting period.	[document]
Please attach any receipts, invoices, and/or any other proof of payment associated with expenditures for this reporting period. Please note that all documentation should reflect the amounts listed on the Program Expense Report.	[document]
Please attach the completed invoice form.	[document]
If the attached invoice is for reimbursement purposes (not advanced payment), receipts or documentation must be provided outlining costs. Please attach.	[document]
Project Category:	<input type="radio"/> Direct Improvement to Quality of Care <input type="radio"/> Resident or Family Councils <input checked="" type="radio"/> Culture Change/Quality of Life <input type="radio"/> Consumer Information <input type="radio"/> Transition Preparation <input type="radio"/> Training <input type="radio"/> Resident Transition due to Facility Closure or Downsizing <input type="radio"/> Other
Focus area:	<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 <input type="checkbox"/> Quality Measures <input checked="" type="checkbox"/> Culture Change <input type="checkbox"/> Other
Total approximate number of nursing home residents impacted through the project within the current reporting period:	60 (Total number impacted during the period you are reporting for)
Total approximate number of nursing home residents impacted through the project:	60 (Total number impacted for all reporting periods)
Please provide a detailed description of project activities that have occurred during the reporting time frame.	SHC of Putnam County has purchased the new piano and had it delivered to the facility. Specific staff members have been educated on how the piano operates so as to ensure its use during meal times. Elder and Family Warmth and Well-Being surveys have been completed so as to have a baseline for future growth.

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

Elders and staff are extremely pleased with the new piano. Elders are really enjoying having the music played during their meal times and various activities. The old piano which was moved from the top floor to the lower unit has been well received by dementia residents on that unit. We have had a couple residents already using the piano on that unit. During our recent Hall of Fame event and Thanksgiving dinner, the new piano was used to play beautiful music for our guests. Everyone is extremely complimentary of the instrument, both in how it looks and how it sounds.

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

We have not had any obstacles at this time.

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

Staff, families, and residents have been very pleased with our new piano. Since it has the capabilities to play various types of music, because of the MP3 and USB options, majority of the Elders' preferences in music can be met.

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

Since the piano has been placed in our dining room we have seen about a 35% - 50% increase in our attendance for all meals by our residents. We have had 2 new volunteers to start utilizing the piano on a weekly basis, which our residents have greatly appreciated.

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.

Please upload any additional materials.

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

It is still too early to determine if weight loss reduction has occurred, however having more residents to eat in the dining room has increased their socialization. We will be looking to see if falls may decrease since less residents are eating in their rooms with less supervision.

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.

By the end of December (3 months after receiving piano) the facility will review Quality Measures in regards to Weight Loss and Anti-Psychotropic Medication use.

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.

[document]

Do you have additional results measurement documentation to upload?

Yes
 No

Please upload additional results measurement documentation.

[document]

Please upload additional results measurement documentation.

[document]

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.

We soon will send out letters to churches, music centers, and local university music programs outlining our desire to have people from the community come play our new piano. We will then recount our volunteer base to see the improvements toward our goal of increasing our base by 15%. We will also be identifying specific QM's that were targeted to see if we have generated improvements.

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

No additional help at this time. Thank you.