Examples of Funded Civil Money Penalty Reinvestment Projects

Partnership to Improve Dementia Care and Reduce the Use of Antipsychotics

California

Project/Activity Description and Outcomes

From 2014 to 2016, the California Culture Change Coalition (CCCC) worked to reduce the unnecessary use of antipsychotic medication in California nursing homes through the aid of multiple entities referred to as The California Partnership. By the end of 2011, California's prevalence of antipsychotic use for long-stay nursing home residents was 21.6%. CCCC's goal to reduce the prevalence of antipsychotic use by 30% was successfully met in 2015 with a 36.9% decrease to 13.63% for long-stay nursing home residents.

The CCCC facilitated the education and training of providers, professional stakeholders, administrators and other healthcare professionals in improving dementia care through promoting environmental modifications, person-centered, and least medicating interventions. During their project, CCCC coordinated with stakeholders who could provide technical expertise and facilitated training opportunities. Education and training was provided through several methods including the following:

- On-line toolkit;
- Webinars;
- Identifying facilities with antipsychotic medication rate at 30% or above and developing a proposed corrective action plan to promote training;
- Statewide conference;
- Handouts;

- Consumer guides; and
- Website with public information aimed at the lay person that provides nontechnical information regarding a person-centered management approach for dementia-related behaviors.

Improving the Quality of Care for Deaf and Deaf-Blind Residents Louisiana

Project/Activity Description and Outcomes

From January to June 2016, the Louisiana Commission for the Deaf and the Helen Keller National Center received funding to improve services to the deaf and deaf-blind residents of the Amelia Manor Nursing Home in Lafayette, LA. The objectives of the project included improving the understanding of equipment needs, including communication and assistive devices of the deaf and deaf-blind population; improved understanding of physical plant design that fosters improved mobility and access; and improved training for staff in meeting resident needs. Certified nursing assistants, housekeeping and maintenance staff were trained on sensory loss simulation, "print on palm" communication for short messages, "X on the back" for emergencies, and better ways of identifying themselves to residents. Based on the Helen Keller Institute's recommendations, the facility provided sign language classes and an orientation book for staff, and also added tactile objects to aid residents in room recognition.

Managing Challenging Behaviors: We All Hold the Keys

Wisconsin

Project/Activity Description and Outcomes

From 2014 to 2016, the Southeastern Chapter and Greater Wisconsin Chapter of the Alzheimer's Association provided 20 training sessions to nursing home staff utilizing the Managing Challenging Behaviors: We All Hold the Keys Program. Training targeted attitude and knowledge change regarding managing difficult dementia behaviors. Training, materials, and a toolkit were provided to 518 participants from 204 nursing homes. Pre-tests and training post-tests were administered showing 83 percent of responders implemented training recommendations in their facility.

It's Never 2 Late (iN2L)[®]: Engaging Residents through the Use of Computer Technology

Kentucky, North Carolina, Tennessee

The iN2L technology has been used in multiple State CMP reinvestment projects as a way to improve the quality of life of long-term care facility residents. It is a unique combination of adaptive hardware and software to deliver person-centered experiences that engage and empower. By using the iN2L system as a tool to engage residents, long-term care communities provide access to person-centered recreational and therapy rehabilitation activities, as well as communication applications that connect residents with their families, friends and the community at large. By focusing on the activities, images and music an individual prefers, the staff is better able to facilitate interactions between residents and therapy reprograming allows communities to take a more comprehensive approach to providing person-centered and individualized experiences to their residents by enhancing their choice of recreational and leisure activities and providing easy access to electronic and internet-based communications and experiences.

Since the main focus of life enrichment is the physical, emotional and spiritual well-being of the resident, iN2L has thousands of content items designed to entertain, challenge, stimulate, and educate long-term care residents, including games and trivia, spiritual messages, brain fitness programs, travel applications, music, movies, classic TV and radio shows, and lifelong learning applications.

For instance, when used during short term rehabilitation, iN2L can help residents sustain treatment for longer periods of time while keeping them engaged. And when caring for patients with dementia, the content can be easily personalized and customized to the individual's level of cognitive and physical ability. By using the iN2L person-based engagement technology as a tool to connect with residents, providing access to person-centered recreational and leisure activities, and providing easier access to families and the community at large, staff are better able to make a difference in the lives of the people for whom they care and are able to focus on the strengths, rather than the diminished abilities of the

residents. This has resulted in a reduction in the bio-psycho-social distress and the use of psychotropic drugs for many residents.

Outcomes of iN2L include improved quality of life, enhanced communication between the residents, staff and families, increased activity and rehabilitation engagement, and improved family visits. Researchers at the University of Washington—School of Nursing conducted a study on the benefits of the iN2L system and concluded that people with dementia enjoyed using adaptive computer technology (ACT) with staff particularly in one to one situations; family members greatly appreciated that ACT offered opportunities for engagement to the resident; family members can benefit from being more involved with relatives and benefited from using the technology.

Other Funded Civil Money Penalty Reinvestment Projects

- A culture change conference for staff with post-conference follow-up
- Music and MemorySM: Personalized music for residents via MP3 players
- Reducing hospital readmissions through the Interventions to Reduce Acute Care Transfers (INTERACT) program
- Person-centered dementia care training to reduce resident anxiety and agitation, thus increasing well-being
- Technology to improve the quality of life for residents in rural communities through personalized digital music and photos as well as assistive technology for residents with auditory or visual impairments