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 quesiton.

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 01/21/2021 1:57pm.

Please select the type of report you are submitting. Select all that apply.	 Quarterly Narrative Report Quarterly Expense and Budget Report (Expenditure Form) Annual Expense and Budget Report Follow-up Monitoring Report Final Progress Report
Reporting Period:	April 1, 2019-April 30, 2020 (Example: January 1, 2019-March 31, 2019)
CMS Project Number	2019-04-TN-0110 (This number can be found on your CMS approval letter.)
TDH Contract Number	34305-24419 (This number can be found on the first page (bottom right hand corner) of your TDH contract.)
Project Name	National Quality Partners Playbook Initiative (Please enter your specific project name. Do not enter "CMP".)
Project Contact Name	Cullen Adre
Project Contact Email	cullen.adre@tn.gov
If any agreements or subcontracts were developed to ensure completion of project activities, please attach.	
Total number of staff trained during the entire duration of the project (If applicable):	109 facilities (Only enter a numerical value)
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



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Focus area(s):	 Healthcare-Associated Infections Emergency Preparedness Preventable Hospitalizations Improving nursing facilities' overall star rating Residents' Rights (Elder Abuse/Neglect or Alzheimer's disease and other dementias) Person-Centered Care and/or Trauma-Informed Care Distressed and At-Risk Counties Quality Measures Culture Change Other
Please specify your area of focus:	Antimicrobial Stewardship (Please be very specific, do not enter "CMPRP".)
Total approximate number of nursing home residents impacted throughout the duration of the project:	109 (Total number impacted for all reporting periods)
Total number of nursing homes impacted throughout the duration of the project:	(Total number impacted for all reporting periods)
What success stories have resulted from the project and how do you plan to showcase successes with stakeholders?	Initial results were generated in January on core element achievement based on the facilities who had reported at that time (see visualizations attached). Data was presented to the facilities on the January Antimicrobial Stewardship and Infection Control call.
Please provide any feedback that has been received from staff, family, or residents as a result of the project.	Approximately 1/3 of total nursing homes in the state have reported. Of those who have reported 100% are achieving at least 5 core elements. The core elements which are least achieved are accountability (84%), leadership (94%), and education (94%). This is the first data for TN of core element achievement in LTCFs. For the 6 month followup there were only 22 facilities who reported a second time and results were not as meaningful as the initial round of reports.
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.	[FILE: Visualizations.pptx]
Do you have additional materials to upload?	⊖ Yes ⊗ No
What do you consider to be the greatest impact(s) of the work performed utilizing CMP funds?	Being able to gather data on core element achievement in LTCFs which has never been done before in TN. Additionally providing LTCFs with resources and establishing relationship/contact between TDH and the facilities has been just as rewarding.



What best practices resulted from the project and how can other facilities or other organizations duplicate the project?	Establishing communication and building rapport with facilities has helped to open the conversation of additional intiatives and resources that TDH offers. This includes the antimicrobial stewardship and infeciton control (ASIC) call, weekly TDH LTCF call, and also access to our antibiotic use point prevalence survey. This helps them stay in the loop as well as get a tool and report which helps them meet 2 out of the 7 core elements.
What activities have occurred to ensure sustainability since the completion of the project?	We are still maintaining communication with facilities through our monthly ASIC call and weekly TDH LTCF calls. Additionally we are still providing the AU PP survey and reports.
Describe any plans for moving forward and what, if anything, you will do differently.	We will be focusing more of our LTCF stewardship efforts on recruitment to build more relationships with more facilities for future involvement and on the accountability core element. We may revisit this project and core element achievement once we can get additional involvement. Many of the facilities who have reported are the more active and higher performing antimicrobial stewardship facilities.
Please list the major goals and objectives of the project and answer the following questions for each: -Did you meet the outlined goal or objective? Why or why not? Please provide a detailed response. -What impact did your activities targeted at meeting the outlined goal or objective had on nursing home residents in the facility or facilities?	We have sucessfully gained some insight into the state of antimicrobial stewardship and core element achievement in LTCFs. There is still more work to be done to increase facility involvement and gain a clearer picture of the state as a whole. Although we were not able to get a response for every facility on the first round of surveys it was still more data than we have ever received before. Additionally due to the pandemic we lost many facilities to the 6 month followup. Going forward this data can be used to direct more targeted antimicrobial stewardship initiatives.
Please list any project deliverables that are outlined in the project description and answer the following for each: -Did you meet the project deliverable? Why or why not? Please provide a detailed response. -What impact did your activities targeted at achieving the project deliverable have on nursing home residents in the facility or facilities?	First round of program evaluations were completed with 109/316 facilities reported. Playbooks were distributed. initial data was compiled, analyzed, and visualized. The data was submitted and accepted an abstract to SHEA Decennial 2020. The 6 month followup was less successful than the initial round of surveys with only 22 facilities completing a second followup.
Results Measurement(s): Please indicate what measurement methods you utilized to tract progress and project success. Please provide a summary of measurable project results.	Based off participants' responses of the survey we were able to determine core element achievement. Each question corresponded to a specific core element, if they answered yes they were actively taking such action they would be marked as achieving that core element. Utilizing tableau we were able to visualize the results (see attachment) to share with out LTCFs across the state as well as individualized reports for each facility so they would have a record of their own facilities' achievements at the time of completion.



Results Measurement: Please upload any relevant data or graphs related to project final outcomes and/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.	[FILE: Core Element Achievement Decoster.pptx]
Do you have additional results measurement documentation to upload?	○ Yes ⊗ No
Please provide any additional information you would like to include in your final report.	The followup for the survey was delayed due to a delayed receipt of playbook download codes from NQ where the playbooks were sent out in Q3 instead of Q1. We adjusted our timeline to account for this. Additionally the pandemic began in early 2020 and many LTCFs had to focus their priorities on dealing with that and were lost to 6 month followup. This probably best explains the lack of followup.
Please upload any additional documentation you would like to share in your final report.	[FILE: Q4_Expense report policy 3 CMP.xlsx]

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