

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 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

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 initiatives and resources that TDH offers. This includes the antimicrobial stewardship and infection 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 successfully 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 track 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 our 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.

[FILE: Core Element Achievement Dec...oster.pptx]

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

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 NQF 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]