



**COLORADO**  
Department of Health Care  
Policy & Financing

1570 Grant Street  
Denver, CO 80203



**COLORADO**  
Department of Public  
Health & Environment

4300 Cherry Creek South  
Denver, CO 80246

October 1, 2018

Governor John W. Hickenlooper  
136 State Capitol  
Denver, CO 80203-1792

Dear Governor Hickenlooper:

Enclosed, please find the Department of Health Care Policy and Financing and the Department of Public Health and Environment's (the Departments') legislative report on the Nursing Home Penalty Cash Fund (NHPCF).

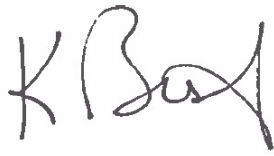
*Section 25-1-107.5, C.R.S. requires the Departments to jointly submit an annual report to the Governor, the Senate Health and Human Services Committee, and the House Public Health Care and Human Services Committee regarding the expenditure of moneys in the NHPCF for the purposes described in Section 25-1-107.5(4)(c)(II), C.R.S. The report shall detail the amount of moneys expended for such purposes, the recipients of the funds, and the effectiveness of the use of the funds, and any other information deemed pertinent by the departments or requested by the governor or the committees.*

The NHPCF is managed in part by the Nursing Home Innovations Grant Board (the Board) which is comprised of 10 members representing the nursing home community as outlined in SB 14-151. The Board solicits, reviews and recommends grants for funding from the NHPCF. The Departments are pleased to submit this report on behalf of the Board. The Departments are supportive of the culture change initiatives and appreciate the Board's work on this important issue. The report describes the goals, costs, and results of active grants in SFY 2017-18 funded from the NHPCF. These projects benefit nursing home residents by improving their quality of life, as authorized by the statute. The report also describes the goals and proposed funding for SFY 2017-18 grants. Attachment A contains information on the remaining SFY 2015-16 projects funded by the grants. Attachment B contains information on all SFY 2016-17 projects funded by the grants. Attachment C contains information on the SFY 2017-18 grant projects. Attachment D contains information on SFY 2018-2019 project requests.

If you require further information or have additional questions, please contact David DeNovellis, Legislative Liaison, Department of Health Care Policy and Financing at 303-866-6912 or Randy Kuykendall, Director, Health Facilities and Emergency Medical Services Division, Department of Public Health and Environment, at 303-692-2945.



Sincerely,



Kim Bimestefer  
Executive Director  
Department of Health Care Policy and  
Financing

KB/KM

Sincerely,



Karin McGowan  
Interim Executive Director  
Department of Public Health and  
Environment

Enclosure(s): 2018 Nursing Home Penalty Cash Fund Report

CC: Kyle M. Brown, Senior Health Policy Advisor, Governor's Office  
Legislative Council Library  
State Library  
John Bartholomew, Finance Office Director, HCPF  
Gretchen Hammer, Health Programs Office Director & Community Living Office Director, HCPF  
Tom Massey, Policy, Communications, and Administration Office Director, HCPF  
Chris Underwood, Health Information Office Director, HCPF  
Rachel Reiter, External Relations Division Director, HCPF  
David DeNovellis, Legislative Liaison, HCPF  
Randy Kuykendall, Director, Health Facilities & Emergency Medical Services Division,  
CDPHE





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October 1, 2018

The Honorable Jonathan Singer, Chair  
Public Health Care and Human Services Committee  
200 E. Colfax Avenue  
Denver, CO 80203

Dear Representative Singer:

Enclosed please find the Department of Health Care Policy and Financing and the Department of Public Health and Environment's (the Departments) legislative report on the Nursing Home Penalty Cash Fund (NHPCF) to the House Public Health Care and Human Services Committee.

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Karin McGowan  
Interim Executive Director  
Department of Public Health and  
Environment

KB/KM

Enclosure(s): 2018 Nursing Home Penalty Cash Fund Report

CC: Representative Jessie Danielson, Vice-Chair, Public Health Care and Human Services Committee  
Representative Susan Beckman, Public Health Care and Human Services Committee  
Representative Marc Catlin, Public Health Care and Human Services Committee  
Representative Justin Everett, Public Health Care and Human Services Committee  
Representative Joann Ginal, Public Health Care and Human Services Committee  
Representative Edie Hooton, Public Health Care and Human Services Committee  
Representative Lois Landgraf, Public Health Care and Human Services Committee  
Representative Susan Lontine, Public Health Care and Human Services Committee  
Representative Dafna Michaelson Jenet, Public Health Care and Human Services Committee  
Representative Brittany Pettersen, Public Health Care and Human Services Committee  
Representative Kim Ransom, Public Health Care and Human Services Committee  
Representative Alexander Winkler, Public Health Care and Human Services Committee  
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Randy Kuykendall, Director, Health Facilities and Emergency Medical Services Division,  
CDPHE





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Denver, CO 80246

October 1, 2018

The Honorable Joann Ginal, Chair  
Health, Insurance and Environment Committee  
200 E. Colfax Avenue  
Denver, CO 80203

Dear Representative Ginal:

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Karin McGowan  
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Department of Public Health and  
Environment

KB/KM

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Cc: Representative Daneya Esgar, Vice Chair, Health, Insurance and Environment Committee  
Representative Susan Beckman, Health, Insurance and Environment Committee  
Representative Janet Buckner, Health, Insurance and Environment Committee  
Representative Phil Covarrubias, Health, Insurance and Environment Committee  
Representative Edie Hooton, Health, Insurance and Environment Committee  
Representative Steve Humphrey, Health, Insurance and Environment Committee  
Representative Dominique Jackson, Health, Insurance and Environment Committee  
Representative Chris Kennedy, Health, Insurance and Environment Committee  
Representative Lois Landgraf, Health, Insurance and Environment Committee  
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October 1, 2018

The Honorable Jim Smallwood, Chair  
Health and Human Services Committee  
200 E. Colfax Avenue  
Denver, CO 80203

Dear Senator Smallwood:

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Department of Public Health and  
Environment

KB/KM

Enclosure(s): 2018 Nursing Home Penalty Cash Fund Report

Cc: Senator Beth Martinez Humenik, Vice-Chair, Health and Human Services Committee  
Senator Irene Aguilar, Health and Human Services Committee  
Senator Larry Crowder, Health and Human Services Committee  
Senator John Kefalas, Health and Human Services Committee  
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Randy Kuykendall, Director, Health Facilities and Emergency Medical Services  
Division, CDPHE



# Nursing Home Penalty Cash Fund Expenditure Report State Fiscal Year (SFY) 2017-2018

## Introduction

A Civil Money Penalty (CMP) is a monetary penalty imposed on nursing facilities by the Centers for Medicare and Medicaid Services (CMS). Penalties are imposed following survey findings in which a facility is found to be out of compliance with one or more participation requirements for Medicare or Medicaid. A portion of collected CMPs are returned to the States to be reinvested in projects that benefit nursing facility residents. Colorado's Nursing Home Penalty Cash Fund (cash fund) is comprised of the State portion of CMP funds and interest income on the cash fund. The Colorado Department of Public Health and the Environment (CDPHE) is the single state survey agency responsible for facility surveys and imposition of CMPs. The Department of Health Care Policy and Financing (HCPF) manages these funds according to Federal regulations and State statute.

## Spending Authorities

Federal Regulations<sup>1</sup> limit the use these funds to activities that protect or improve the quality of care for residents including:

- (a) Support and protection of residents of a facility that closes.
- (b) Time-limited expenses incurred in the process of relocating when a facility is closed or downsized.
- (c) Projects that support resident and family councils and other consumer involvement in assuring quality care in facilities.
- (d) Facility improvement initiatives approved by CMS.
- (e) Development and maintenance of temporary management or receivership capabilities.

In 2014, Senate Bill 14-151 established the Nursing Home Innovations Grant Board (the Board) to replace the Nursing Facility Culture Change Accountability Board established by House Bill 09-1196 in 2009. The Board established funding maximums and expanded the time-period for which a project could be funded to three years.

The Board solicits grants proposals supporting resident quality of care and offers recommendations to the CDPHE and HCPF for the expenditure of a portion of NHPCF funds. When the cash fund balance is greater than \$2 million dollars as of July 1<sup>st</sup>, \$250,000.00 is allocated to the Board for grant awards and administration. When the balance is less than \$2 million dollars, the Boards received a lesser amount to ensure that at least \$1 million dollars are always maintained for emergencies or facility closures. The

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<sup>1</sup> 42 CFR § 488.433 Civil money penalties: Uses and approval of civil money penalties imposed by CMS

legislation additionally allows grant projects to be funded over a maximum of three years. Unused funds are returned to the cash fund.

The current NHIGB roster is attached. The Board is currently seeking applications for one vacancy who must be a resident of a nursing home, or a family member of a nursing home resident.

## Nursing Home Innovation Grant Board Activities

In SFY 2016-2017 the Board experienced an unusually high number of vacancies. These vacancies created a gap in marketing the grant application period for Cycle nine (SFY 2017-2018 projects) and led to a reduced number of applications.

In 2017-2018 the Board focused on aggressively marketing the Board's role and grant opportunities. Full membership was achieved in June 2018, though one vacancy has been created since then. The volume of applications returned to baseline in Cycle ten (SFY 2018-2019 projects). The Board also established a charter formalizing procedures, attendance and goals for Board functions. This includes training on the Colorado Open Records Act (CORA) and conflict of interest.

## Grants Awarded and Funding Expended

The Board continues to receive and review applications from various organizations in Colorado including consultants, charitable organizations, nursing home providers, management companies, higher education organizations, government subdivisions and others. Upon project approval, the Board members review deliverables and assist grantees in coordinating projects. Board members perform on-site visits or in-person meetings with the grant recipient organization. Upon completion, project results are made publicly available through the HCPF website.

### Administrative Costs

SB 14-151 does allow for \$10,000 from the cash fund to be used annually for administrative costs of the Board; however, administrative functions are not an allowed use under Federal regulations. As a result, the Board has not expended any funds for administrative purposes. The Board has been working with CMS to seek approval to use these funds for marketing and dissemination of project results.

### Grant Funds

In SFY 2017-2018 the Board oversaw projects approved in the seventh grant cycle (SFY 2015-2016), eighth grant cycle (2016-2017), and ninth grant cycle (2017-2018). The Board also reviewed grant applications and made recommendations for the tenth grant cycle (SFY 2018-2019).

### Cycle Seven

During the seventh grant cycle (SFY 2015-2016) the Board received seventeen applications and awarded grants to ten organization. Five of the Cycle seven projects were completed in SFY 2017-2018. The grant recipients, amounts awarded, purposes and results of the grant projects for SFY 2015-2016 are summarized on **Attachment A** of this document.

#### For SFY 2015-2016:

- \$250,000 were made available.
- \$160,578 in Grant Funds were awarded.

### Cycle Eight

During the eighth grant cycle (SFY 2016-2017) the Board received eleven applications and awarded grants to four organizations. All of these projects continued into SFY 2017-2018. Two were completed in SFY 2017-2018. The grant recipients, amounts awarded, purposes and results of the grant projects for SFY 2016-2017 are summarized on **Attachment B** of this document.

#### **For SFY 2016-2017:**

- \$250,000 were made available.
- \$242,830 in Grant Fund were awarded

### Cycle Nine

During the ninth cycle (SFY 2017-2018) the Board received seven applications and three were approved. All of these projects were initiated in SFY 2017-2018 and two were completed. The grant recipients, amounts awarded, purposes and results of the grant projects for SFY 2017-2018 are summarized on **Attachment C** of this document.

#### **For SFY 2017-2018:**

- \$250,000 were made available.
- \$133,437 in Grant Fund were awarded

### Cycle Ten

Cycle ten applications were received in April 2018. The Board received thirteen applications totaling approximately \$1.4 million in funding requests. Six applications were approved by the Board and are awaiting CMS approval. The grant recipients, amounts awarded, purposes and results of the grant projects for SFY 2018-2019 are summarized on **Attachment D** of this document.

#### **For SFY 2018-2019 (pending CMS approval)**

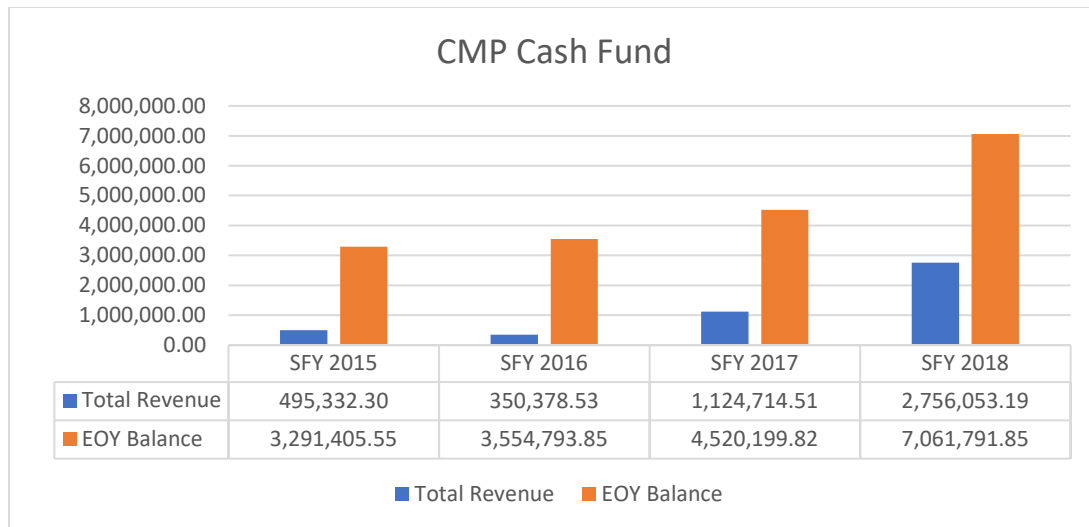
- \$250,000 were made available.
- \$270,216.02 in Grant funds have been tentatively awarded.

### Additional Expenditures

Colorado did not need to access the cash fund for any facility closures or emergency relocations in SFY 2017-2018. Additionally, HCPF did not fund any projects beyond those recommended by the Board.

### Nursing Home Penalty Cash Fund Finances

There has been a substantial increase in CMPs collected in Colorado over the past two years. Between SFY 2016 and SFY 2018, total penalties collected have increased over 600%. This is in part due to recent changes in CMP fine schedule related to facility surveys. As a result, the Nursing Home Penalty Cash Fund Balance has nearly doubled in the last two years. At the conclusion of SFY 2018, the balance was \$7,061,791.85.



	CMPs Collected	Interest Income	Expenditures	EOY Balance
SFY 2015	465,639.05	29,693.25	68,821.20	3,291,405.55
SFY 2016	318,264.31	32,114.22	36,548.26	3,554,793.85
SFY 2017	1,081,387.50	43,327.01	175,816.15	4,520,199.82
SFY 2018	2,661,732.52	94,320.67	144,371.39	7,061,791.85

### Impacts/Opportunities

While federal regulations strictly limit the use of the case fund to reinvestment in nursing facilities and emergency management, the same set of regulations also grant CMS the right to withhold future disbursement if the cash funds are not sufficiently used<sup>2</sup>. While Colorado has not received any notice of concern from CMS to date, HCPF is aware of states that have received preliminary warnings for failing to reinvest enough funds.

Until recently projects funded by the Board, as well as the \$1 million emergency reserve established by SB 14-151, have been viewed by CMS as sufficient reinvestment of funds. The sudden shift in penalties collected will require Colorado to re-visit how these funds are allocated and disbursed. The emergency reserve and the funding maximum for the Board established through SB 14-151 should both be increased. Reinvesting in more grant projects while designating a greater emergency reserve will be steps towards demonstrating substantial usage of the funds and protecting future disbursement from CMS. Greater reinvestment will also allow for improvements to quality of life in Colorado nursing home in the immediate future.

<sup>2</sup> 42 CFR § 488.433(f) If CMS finds that a State has not spent civil money penalty funds in accordance with this section, or fails to make use of funds to benefit the quality of care or life of residents, or fails to maintain an acceptable plan for the use of funds that is approved by CMS, then CMS may withhold future disbursements of civil money penalty funds to the State until the State has submitted an acceptable plan to comply with this section

**ATTACHMENT A**  
**SFY 2015-16 NURSING HOME INNOVATIONS GRANT BOARD DISBURSEMENT**  
**FROM THE NURSING HOME CASH PENALTY FUND**

**1. Brookshire House: \$28,257**

Implementation of a habilitation model of care for individuals living with dementia.

Project summary: Individuals suffering from dementia or Alzheimer's are at high-risk for weight loss. This risk increases as the disease progresses. The model looks at the strengths and abilities of the individual vs. attributing negative outcomes to the disease process. The focus of the grant is providing food whenever and wherever the individual requests.

Grant funds will be used to provide a full day of person-centered dementia training to all staff. Nursing and administrative staff will be cross-trained in safe food handling. The funds will also be used to purchase equipment to create a pantry kitchen to allow food and snacks can be prepared at any time.

In an effort to develop relationships and prevent weight loss, the community will have open dining, offer continental breakfast for early risers, and allow and encourage staff to eat with the residents.

Results: The project was completed in June 2018. The facility reports successfully expanding meal options and a positive impact on resident's ability to maintain a healthy weight.

**2. Colorado Advanced Directive Consortium under fiscal sponsorship from  
Center for Improving Value in Health Care: \$20,941**

Revise Medical Orders for Scope of Treatment (MOST) form.

Project summary: Grant funds will be used to launch a statewide educational campaign directed towards Colorado nursing homes, staff, residents and families on the revised Medical Orders for Scope of Treatment (MOST) form. The goal of this project is advanced care planning for residents in nursing homes and addressing end of life options and person-directed care.

The MOST form is a one page document that consolidates and summarizes patient preferences for key life-sustaining treatments. The program was established by C.R.S. 18.7 in 2010. As a result of feedback from stakeholders and emerging national guidelines, revisions were made in 2015. In addition to addressing medical treatment options, the MOST process creates an opportunity for engagement with residents around care goals, quality of life, values, hopes and expectations.

The project will have four components:

- 1) Creation and development of updated educational materials;
- 2) Delivery of educational programs to nursing homes and their partners;
- 3) Development of long-term web-based repository for informational and instructional materials; and

#### 4) Evaluation (pre and post program surveys).

Results: Training on the MOST form was conducted and a website was established that provides ongoing guidance for completion of MOST forms.

### **3. Eben Ezer Lutheran Care Center: \$13,104**

Culture change and person-directed care by offering Certified Eden Associate Training.

Project summary: Eben Ezer Lutheran Care Center is located in Brush, a rural facility in northeast Colorado. In the past, the facility has sent two employees to the Eden Educator training in Denver. The facility wants to utilize those staff members to train others in their facility, as well as offer the training to other rural facilities on the eastern plains. Initial certification trainings have occurred, and ongoing support is offered through quarterly meetings. With grant funds, they have provided this training at no cost.

Grant funds will be used to educate staff on culture change and person-directed care by offering Certified Eden Associate Training. The Eden Alternative training is based on ten principles that focus on transforming nursing homes into places where people want to live and work and where the Elder is the center and care is directed by them.

Results: The facility was able to provide training to caregivers at no cost. The Board continues to look for opportunities to sponsor person-centered care trainings in rural areas.

### **4. Edu-Catering: \$20,000**

Eliminate Alarms and Prevent Falls by Engaging with Life

Project summary: This was an extension of a previous project “Encouraging Colorado to Eliminate Alarms and Prevent Falls by Engaging with Life”. The goal is to reduce the number of falls in facilities and encourage staff to proactively engage residents rather than respond to alarms.

Research shows that excessive bed and chair alarms cause more falls than they prevent and discourage movement by nursing facility residents. Edu-Catering used grant funds to create a database of alarm usage in Colorado nursing facilities and is conducting two workshops in six sites around the state focused on eliminating excessive alarms in Long Term Care facilities.

Results: The final report documents substantial reduction in unnecessary alarms in Colorado. Training materials have been made available through the Board’s website for facilities to continue to revise internal protocols.

### **5. Focus Consultation, LLC: \$54,000.00**

Intergenerational Summer Camp

Project summary: This project proposes to improve the understanding of the aging process and the connection between youth and Elders in at least three Colorado nursing homes on the Front Range,

through a one-week day camp program. Focus Consultation and Edu-Catering will provide on-site facilitation, support and direction for each camp.

The camp will occur at three identified nursing homes for approximately 10-20 children, ages 8-13. A group of Elders in each home will be trained to guide the experience and or parts of the camp with the youth in attendance. Activities will include: developing an Elders story with youth and Elder presentations, verbal and visual; participation in nursing home activities; making snacks; baking with Elders; wisdom circles with Elders; gardening with Elders; story time; rest periods or naps; lunch and snacks; games and technology such as checkers, chess, bowling, basketball, hide 'n seek; Art projects such as jewelry and beads; play and time outdoors; career development; dance and exercise; movies and popcorn; dress up; plays and skits; and photography. Expected outcomes of the project include; youth gaining a positive perception of aging and the residents being able to share their life experience and wisdom with the younger generation.

An intergenerational camp facilitator's guide will be drafted at the onset of the project. The guide will be revised after each of the camps based on lessons learned. The guide will be made available for other Colorado nursing homes through Focus Consultation and Edu-catering.

Results: Residents satisfaction with the event was positive and future events are planned at the facility. The facility reported that students continue to volunteer in the facility and became interested in a Long-Term Care career. Materials for organizing similar events have been made publicly available through Focus Consultation and Edu-catering.



**ATTACHMENT B**  
**SFY 2016-17 NURSING HOME INNOVATIONS GRANT BOARD DISBURSEMENT**  
**FROM THE NURSING HOME CASH PENALTY FUND**

**1. Vivage Senior Living-Sleep Study**

Amount requested and recommended: \$ 33,662.00

Project summary: This project is designed to provide person-centered training for residents, families and staff in order to reduce falls, pain, behaviors and pressure ulcers of residents. The project goal is to improve the lives of residents through approaches that will improve the quality of their sleep.

The plan is to introduce three variables: reduction in noise, light and inactivity during waking hours in attempt to mitigate the negative aspects that these variables have on the quality of residents' sleep. The Grantee believes these changes will yield enough data on what improves sleep that it will be able to extend new night-time practices throughout its communities.

Results: Implementation of new facility procedures regarding night time noise and light. Demonstrated improvement in sleep quality. Recommendation for future Medicaid Pay for Performance standards.

**2. Alzheimer's Association-Person-Centered Dementia Care training**

Amount requested and recommended: \$ 38,793.00

Project summary: Person-Centered Dementia Care: Reducing Anxiety and Agitation to Improve Well-Being provides training and consultation to staff and families about person-centeredness and non-pharmacological approaches to understanding and responding effectively to behaviors while caring for people with Alzheimer's disease or other dementias.

Training will be provided at 6 different skilled nursing homes. Over the 15-month period, the goal is to not only improve the well-being of the residents, but also of family members and care community staff. Success will be measured through ongoing survey responses from staff and families.

Results: Work concluded in June 2018. A final report is pending.

**3. Colorado Health Care Association-Music and Memory**

Amount requested and recommended: \$ 146,875.00

Project Summary: The project goal is improve the lives of those suffering from dementia through Music and Memory program. This project is to provide certification of music and memory program, training and support, iPod devices and related equipment, and the purchase of digital music files.

The project would offer to implement the Music and Memory program in 75 nursing homes in the state of Colorado over a two-year period. Each participating nursing home would first complete the Music and Memory certification classwork. The certification course teaches the background of the Music & Memory program, explains the benefits to residents, family members and nursing home staff, and provides direct guidance on best

practices for implementing the program in a nursing home. This is a three-year project expected to conclude in June 2019.

Results: Project concludes in 2019

#### **4. Edu-Catering-Validation dementia training**

Amount requested and recommended: \$ 23,060.52

Project summary: The goal of this project is for professionals to be gifted with knowledge of regulatory requirements and best practices namely successful Validation techniques. The project will provide training on the New CMS Dementia Care Focused Survey and Validation® communication techniques.

The project will be a two-year grant to provide statewide education to nursing home professionals on:

- 1) The New CMS Dementia Care Focused Survey;
- 2) Validation®-Truly Successful Communication with Persons with Dementia.

Each course will be an all-day training at six locations in the state over two years for a total of 12 workshops. The grant will conclude no later than June 30, 2019. Curriculum will be turned over to the Colorado Nursing Home Innovations Board to be made publicly available.

**ATTACHMENT C**  
**SFY 2017-2018 NURSING HOME INNOVATIONS GRANT BOARD**  
**RECOMMENDATIONS FOR DISBURSEMENT FROM THE**  
**NURSING HOME CASH PENALTY FUND**

**1. Aponi Partners - The Leadership Chautauqua**

Amount requested and recommended: \$ 125,000.00

Project summary: The Leadership Chautauqua is a multi-disciplined and innovative approach to leadership development for long-term care facility leaders. Funds will be used to host nursing facility leadership training conferences in four diverse geographic regions in Colorado. The trainings are designed to support leader renewal and growth for improved quality care outcomes. The program will serve 180 Colorado cross-functional long-term care facility leaders and seek to include participants from CDPHE Survey Team and DRCOG Ombudsmen to work collaboratively with facility teams to identify ways long-term care quality can be improved in Colorado. The project, including planning and follow-up, has a three-year timetable to be completed no later than June 30, 2020.

**2. Larimer County Area on Aging**

Amount requested and recommended: \$ 1,000.00

Project summary: The intent is to assist long-term care communities in creating policies around honoring death, and considering cultural complexities of their population. A group will be created to develop a guidebook. The project will be held at Spring Creek Healthcare Center in Fort Collins and monies will be used for printing, purchase of blankets to cover the bodies, candles, and other items to be used on a tribute table. Outcomes will be measured by a pre- and post-interview with residents to determine if feelings around death have changed and to identify more work that might be done.

Results: Improvements in resident satisfaction. Implementation of new policies regarding death in 2 nursing homes. Larimer County has developed a brochure offering guidance and resources to guide other interested facilities. Upon finalization, the brochure will be made available through the Board website.

**3. Southeast Colorado Hospital District (SECHD)**

Amount requested and recommended: \$ 7,437.00

Project Summary: Building on the success of a previous grant, Southeast Colorado Hospital District (SECHD) will be expanding their usage of the 'It's Never Too Late' (iN2L) system. An additional iN2L system at the SECHD will allow for a direct comparison on the impact to residents with and without dementia symptoms.

The expansion will include a dedicated program in their Alzheimer's unit to assess the programs benefits to engagement, independence and activities of daily living. The facility also believes iN2L will aid in lessening a syndrome known as 'Sundowning' experienced by individuals with dementia.

Results: SECHD reports substantial use of iN2L systems, aid in resident engagement, contact with community and family members and rehabilitation benefits.

## **ATTACHMENT D**

### **SFY 2018-19 NURSING HOME INNOVATIONS GRANT BOARD RECOMMENDED PROJECTS**

**Christian Living Communities: \$25,050.00**

**Certified Nursing Aid (CNA) Tier 4 Training**

Christian Living Communities plans to develop training for CNAs who are interested in nursing facility leadership positions. The project aims to increase competencies and staff retention for staff interested in management and/or clinical career development. The project is expected to last 1 year. Developed curriculum and a report on outcomes will be made publicly available.

**North Star Rehabilitation and Care Community: \$27,738.02**

**Renewal Project**

North Star Rehabilitation and Care Community is attempting to improve behavioral health by adding privacy spaces to the facility. The facility has semi-private room accommodations and wishes to help residents unwind and utilize coping skills by providing more locations in the facility to retreat. The facility will additionally use these spaces to provide homeopathic therapies and guided meditation classes. The project will take place over 15 months. Results will be measured by monitoring medication usage, Brief Interview for Mental Status (BIMS) scores and Patient Health Questionnaire Scores (PHQ-9).

**Hillcrest Care Center: \$52,928.00**

**Eden Training**

Hillcrest Care Center will be sending 2 employees to 'Eden Alternative Train the Educator' training. The facility will then arrange for the training and Eden certification of 80 individuals from multiple facilities in Northeast Colorado. The Grant will allow for additional training opportunities and facility networking in a rural portion of the State. Hillcrest will survey resident satisfaction pre and post training to measure improvements in person directed care outcomes. The project is expected to be completed over 24 months.

**Julia Temple Healthcare Center: \$12,000.00**

Dementia Friendly Environment

Julia Temple will be redesigning paint and room decorations to accommodate resident navigation and interactions in the facility. The facility will introduce interactive environments to 4 neighborhoods of their community. The room designs will establish landmarks to make it easier for individuals with dementia to locate and engage in activities of interest. The project will monitor metrics on falls, aggressive behavior and medication usage over the course of a year and report on outcomes.

**Brookside Inn: \$10,000.00**

Weighted Blankets for Anxiety Reduction

Brookside Inn aims to use weighted blankets to help individuals with stress or anxiety achieve a reduction in psychotropic medication usage. The facility will train staff on safe weighted blanket usage prior to initiating the project. Brookside Inn will monitor behaviors and medication usage over the course of a year and provide a report of their results for public use.

**VisibleHand: \$142,500.00**

Behavioral Health Data Analytics

VisibleHand will be collecting and analyzing data related to staff observations and interventions for behavioral health. The group plans on analyzing 2 million observations collected through an electronic medical record recording software to identify patterns in hospitalization, medication usage and acute behavioral health events. VisibleHand will then monitor various facilities to determine if their analysis has any predicative value in preventing hospitalizations and behavioral decompensations, with the goal of timely interventions to prevent the occurrence. The group will conclude their research after 3 years and make all raw data, analysis and recommendations available to the public.