

Rhythm of the Day©

Quarterly Progress Report to the Ohio Department of Medicaid

(First Quarter 2020)

In the second quarter of year one of the project, during the first quarter of 2020, the initiative to launch a natural, holistic approach to the daily lives of the staff, residents and families living with Alzheimer's/Dementia continued with a systematic approach to project management with expansion into additional facilities. Details of our progress and accomplishments with the program are as follows:

Project Administration:

- I. Continued recruiting efforts through direct contact with eligible facilities.
- II. Zoom Meeting held on 02/19/20 with Leadership Team with 16 attendees. Program was reviewed in detail and initial meeting set up with one affiliated facility to date.
- III. Our team was no longer able to enter any facility beginning in March due to the required COVID-19 quarantine.
- IV. All training for March postponed for 30 days to review current circumstances at that time and reschedule.

Project Agenda:

- I. Marketing and recruiting efforts continued in order to fill additional available spaces.
- II. Results received to date from SNF1:
 - a) On day 10 of the program with this facility 01.15.20, there were 9 participating residents.
 - b) SNF1 has reported a reduction in falls and behaviors.
 - c) All residents involved in Rhythm of the Day© memory care program are reported to be sleeping better at night.
 - d) Follow up hands-on training day offered for per facility's request for additional training and overview of program details.
 - e) One-on-one assistance provided by trainer/mentor LaTisha Welsh to MDS Coordinator regarding required MAS information.
 - f) MDS Nurse reports that 13-14 additional residents have been assessed for introduction into the program.

The additional hands-on training day was held on 01/29/20. The Unit Coordinator, Activity staff member and 3 STNAs were in attendance for most of the day. Two therapy team members also participated with one of the residents during fitness fun. When they came to get this resident, she refused to go with them stating that she wanted to stay where she was and participate in the game as she was enjoying herself so much.

A nursing department unit meeting was held and included 4 nurses, 7 STNAs, 2 activity personnel, 1 skin nurse and 2 MDS nurses as well as night shift and the Administrator.

Our trainers reviewed the program to include staffing structure, staff responsibilities, important issues (toileting, hydration) and time for Q&A.

Out of the 16 current participating residents, three have been reported to not be doing well in the program. One has since moved on to hospice. The ROTD team worked with the other 2 residents and had success with some participation. Facility staff will continue to work with these residents daily.

- III. Results received to date from SNF2:
- a) Team meeting held with facility leaders on 01/08/20 to review individualized program for their facility. Signed Agreement reviewed and completed.
 - b) Area reviewed and chosen for program location.
 - c) Interim administrator was appointed in facility after the initial program meeting was held.
 - d) Facility did not inform staff of training dates, they were unprepared when trainers came on 01/16/20.
 - e) New dates were set to offer training again.
 - f) Remaining program development canceled with this facility 01/23/20.

The center was not prepared for training on 01/16/20. However the families had been informed and were in attendance. Family training was provided this day with the Administrator and Activity Director also in attendance. New dates set for staff training. Meeting was held with the Administrator to confirm their commitment to the program and discuss upcoming dates/plans.

Trainers held another training date for staff on 01/21/20. All Facility Staff were advised this was a mandatory meeting however less than 30% attended. Of the staff that did attend several left early, the DON did not attend the training. Department managers of HR, Social Services, Marketing, Activities, Maintenance and Housekeeping were all in attendance. Our Trainers are concerned about this center's readiness and dedication to make the program successful.

The Rhythm of the Day© team contacted SNF2's Interim Administrator via phone on 01/23/20 to advise that their facility would not receive the remaining program development. This decision was made due to staffing issues, lack of staff attendance and Director of Nursing support as well as the center's projection of low attendance for upcoming training. Facility was advised they will remain on the ROTD program development list for 2 years to give them time to stabilize the concerning issues.

- IV. Results received to date from SNF3:
- a) Initial meeting held 01/22/20. Contract reviewed and signed.
 - b) Facility toured and areas chosen for program.
 - c) Center asked for supplies as soon as possible to begin preparation of program.
 - d) Classes on 02/11/20 were well received with 40 in attendance.

- e) Aging & Alzheimer's Progression, Individualized Rhythm of the Day© program and Montessori Assessment System offered in 3 training areas on 02/25/20 and 03/03/20.
- f) The Activity Director for this facility has assisted with class set-up and continues to be very engaged and enthusiastic for the program.
- g) Three exclusive areas were set up for training

The facility Administrator, DON, Social Services Director and Business Office Director/Interim Activities Director were all in attendance for the initial meeting. Outcomes were reviewed and presented and details obtained from the facility in order to individualize the program to their needs. This Facility shows great enthusiasm to learn and start implementation of the ROTD program. Additional meeting held 02/05/20 to review individualized power point/binder with the facility team and address any requested changes. Follow up dates were set for training and implementation.

Staff and families were very engaged and asking good questions in training day held 02/11/20. Meeting held with Administrator to review and give feedback on facility's current observations, including staff encouragement with residents, good hand washing and care for the environment. Meeting held with Director of Nursing to discuss next steps. This team is determined and enthusiastic about obtaining good outcomes for their residents.

Aging & Alzheimer's Progression, individualized memory care program and Montessori Assessment System training offered on 02/25/20 and 03/03/2020. All were very well received by the facility staff. They were all positive, engaged and receptive to all information reviewed.

V. Results received to date from SNF4:

- a) Initial meeting held 02/04/20 to discuss program and facility interest.
- b) Confirmation from corporate was required before signing contract and proceeding with training.
- c) Unit toured and area chosen for program.
- d) Follow up meeting held 02/18/20. Contract reviewed and signed.

DON, traveling Administrator, Social Services Director, Activities Director, ADON and Restorative Nurse all in attendance for initial meeting held on 02/04/20. Interest was expressed however stated they would like authorization from corporate prior to signing the contract and proceeding further. DON is particularly interested in improving their outcomes and star levels and thinks this program will help tremendously.

Follow up meeting held 02/18/20. DON, acting Administrator, Social Services Director and Activities Director were all in attendance. Authorization provided by corporate,

contracts were signed at this meeting. The first draft of this facility's individualized program was presented. A few minor changes were made. All in attendance are very motivated and excited about ROTD training, development and implementation.

- VI. Results received to date from SNF5:
 - a) Initial meeting set for 03/26/20 has been postponed due to COVID-19 isolation requirements.

Project Measurement:

- I. Our goal is to decrease each participating facilities direct care staff turnover rate by 10% in all participating nursing facilities and statewide for all participating facilities.
 - a) SNF1 turnover rates have been requested, however information has not yet been received from the facility.
 - b) There were no turnover rates collected for SNF2 as facility program is on hold as previously described.
 - c) Facilities pending progression to data submission – SNF3, SNF4 and SNF5.

- II. Our goal is a 10% reduction in the aggregate score for MDS item N0410A (number of days the resident received antipsychotic medication during the last 7 days or since admission/entry or reentry if less than 7 days) in participating residents in participating nursing facilities, and statewide for all participating facilities.
 - a) SNF1 – Initial data received from this facility. 43.75% of residents reviewed are currently taking antipsychotic medication every day, 13 doses daily, 91 doses per week.
 - b) SNF2 – No data collected for this facility as facility program is on hold as previously described.
 - c) Facilities pending progression to data submission – SNF3, SNF4 and SNF5.

- III. Our goal is a 15% reduction in the aggregate score for the following MDS items for all participating residents in participating nursing facilities, and statewide for all participating facilities:
 - a) MDS I2300 (UTIs in last 30 days)
 - 1) SNF1 – 0/16 = 0% residents monitored experienced this issue.
 - 2) SNF2 – No data collected for this facility as facility program on hold as previously described.
 - 3) Facilities pending progression to data submission – SNF3, SNF4 and SNF5.

 - b) MDS J1800 (Any falls since admission/entry or prior assessment)
 - 1) SNF1 – 6/16 = 37.50% residents monitored have experienced some kind of fall since admission/entry or prior assessment.

- 2) SNF2 – No data collected for this facility as facility on hold as previously described.
- 3) Facilities pending progression to data submission – SNF3, SNF4 and SNF5.

c) MDS J1900 (Number of falls since admission/entry or prior assessment)

- 1) SNF1 – Of the residents monitored during falls 31% resulted in no injury, 19% resulted in minor injury and 0% results in major injury.
- 2) SNF2 – No data collected for this facility as facility on hold as previously described.
- 3) Facilities pending progression to data submission – SNF3, SNF4 and SNF5.

IV. Our goal is a 10% reduction in the aggregate score for the following MDS items for participating residents in participating nursing facilities and statewide for all participating facilities:

a) MDS E0200A (Physical behavioral symptoms directed towards others)

- 1) SNF1 – 81% of residents monitored have reported no symptoms and 19% have reported to have these symptoms 1-3 days since admission.
- 2) SNF2 – No data collected for this facility as facility on hold as previously described.
- 3) Facilities pending progression to data submission – SNF3, SNF4 and SNF5.

b) MDS E0200B (Verbal behavioral symptoms directed towards others)

- 1) SNF1 – 75% of residents monitored have reported no symptoms, 25% reported having these symptoms only 1-3 days since admissions.
- 2) SNF2 – No data collected for this facility as facility on hold as previously described.
- 3) Facilities pending progression to data submission – SNF3, SNF4 and SNF5.

c) MDS E0200C (Other behavioral symptoms not directed towards others)

- 1) SNF1 – 87% of residents monitored have reported no symptoms, 13% have reported symptoms 1-3 days.
- 2) SNF2 – No data collected for this facility as facility on hold as previously described.
- 3) Facilities pending progression to data submission – SNF3, SNF4 and SNF5.

Project Financial:

There are no travel expenses associated with the second quarter of the Rhythm of the Day© memory care program.

Project Summary:

As of March 2020 we have received letters of intent, emails or verbal expressions of interest from over 20 facilities, including 2 corporations each managing multiple facilities. Of the interested facilities five are currently in differing stages of progress in Rhythm of the Day© memory care program.

We will continue to monitor each participating facilities measurements regarding psychotropic medications, UTI's, falls and employee turnover rates as well as the maintenance or improvement of assessment cognitive scores.

During the unforeseen circumstances our industry is facing due to the COVID-19 crisis, we are taking steps in order to keep the Rhythm of the Day memory program on schedule with our original goal. Our trainers have been in contact with each and every one of the participating facilities to problem solve the new challenges they are currently facing. The Rhythm of the Day trainers have developed new potential interventions utilizing phone and video contact only to promote social distancing and single room isolation.

In regards to new facilities signing up to begin the Rhythm of the Day memory care program, we are starting Day 1 as a video conference to review the program details with the facility and gather information about their individual needs.

Our team has been meeting frequently via video conferencing to discuss and develop strategies to assist our participating facilities, staff and residents, during this highly stressful time.