



Vincent Davis, State Survey Agency Director  
665 Mainstream Drive, 2nd Floor  
Nashville, TN 37243

July 10, 2019

Dear Mr. Davis,

Thank you for the opportunity to present this revised proposal. AGE-u-cate Training Institute is a Limited Liability Company (Ageucate LLC; federal tax ID 47-1725392) headquartered in Bedford, Texas. We deliver high-impact solutions that transform the attitudes and actions of those who live in, work, or visit eldercare communities across the nation.

Our project is entitled “Compassionate Touch<sup>®</sup>: A Practical Non-pharmacological Approach to Ease Behavioral Symptoms, thereby Supporting Nursing Homes’ Effort to Minimize the Use of Antipsychotic Medications for Dementia-related Behaviors.” Compassionate Touch<sup>®</sup> (CT) is an approach combining skilled touch and specialized communication that’s shown to prevent behavioral expression in people with dementia. Long-stay residents with Alzheimer’s disease and other forms of dementia, as well as their care-partners, will be served by this project.

The proposed program contains seven components: 1) Facility recruitment and project promotion. 2) On-site training for participating facility staff. 3) Selected staff completes the online Coach train-the-trainer workshop. 4) Coaches conduct ongoing in-house CT training for staff. 5) Project support. 6) Customized training for TN’s state surveyors, ombudsmen, and Quality Improvement Organization. 7) Results Measurement and Reporting.

Our goal is that by the end of the proposed 12-month project, 27 nursing homes in TN will have integrated CT into their facility’s dementia care practices. An additional goal is that a minimum of 50% of TN state surveyors, ombudsmen, and QIO Quality Advisors will have participated in CT training customized for this group.

To accomplish these goals, we request a total amount of funding for this three-year project of \$136,074. We anticipate a start date October 1, 2019; upon project approval (We are open to adjusting the start date if needed).

We look forward to helping improve the well-being of people with dementia living in Tennessee’s nursing homes.

Sincerely,  


Pam Brandon, Founder, and President  
AGE-u-cate Training Institute  
817 857 1157 Ext. 202  
pam@ageucate.com

401 Harwood Rd. Suite B  
Bedford, TX 76021

[www.AGEucate.com](http://www.AGEucate.com)

# REQUEST

Date of Application:      /      /       
MM DD YYYY

## PART I: Background Information

Name of the Organization: \_\_\_\_\_

Address Line 1: \_\_\_\_\_

Address Line 2: \_\_\_\_\_

City, County, State, Zip Code: \_\_\_\_\_

Tax Identification Number: \_\_\_\_\_

CMS Certification Number, if applicable:   -

Medicaid Provider Number, if applicable:   -

Name of the Project Leader: \_\_\_\_\_

Address: \_\_\_\_\_

City, County, State, Zip Code: \_\_\_\_\_

Internet E-mail Address: \_\_\_\_\_

Telephone Number:    -    -

Mobile Number:    -    -

Have other funding sources been applied for and/or granted for this proposal?  Yes  No

If yes, please explain/identify sources and amount.

\_\_\_\_\_  
\_\_\_\_\_

**PART II: Applicable to Certified Nursing Home Applicants**

Name of the Facility: \_\_\_\_\_

Address Line 1: \_\_\_\_\_

Address Line 2: \_\_\_\_\_

City, County, State, Zip Code: \_\_\_\_\_

Telephone Number:    -    -

CMS Certification Number:   -

Medicaid Provider Number:   -

Date of Last Recertification Survey:  $\frac{\quad}{MM} / \frac{\quad}{DD} / \frac{\quad}{YYYY}$

Highest Scope and Severity Determination: (A - L) \_\_\_\_\_

Date of Last Complaint Survey:  $\frac{\quad}{MM} / \frac{\quad}{DD} / \frac{\quad}{YYYY}$

Highest Scope and Severity Determination: (A - L) \_\_\_\_\_

Currently Enrolled in the Special Focus Facility (SFF) Initiative?    
Yes No

Previously Designated as a Special Focus Facility?    
Yes No

Participating in a Systems Improvement Agreement?    
Yes No

Administrator's Name: \_\_\_\_\_

Owner of the Nursing Home: \_\_\_\_\_

CEO Telephone Number:    -    -

CEO Email Address: \_\_\_\_\_



Name of the Management Company: \_\_\_\_\_

Chain Affiliation (please specify) Name and Address of Parent Organization: \_\_\_\_\_

Outstanding Civil Money Penalty?  Yes  No

Nursing Home Compare Star Rating: \_\_\_\_\_ (can be 1, 2, 3, 4 or 5 stars)

Date of Nursing Home Compare Rating: \_\_\_\_/\_\_\_\_/\_\_\_\_  
MM DD YYYY

Is the Nursing Home in Bankruptcy or Receivership?  Yes  No

If an organization is represented by various partners and stakeholders, please attach a list of the stakeholders in the appendix.

**NOTE:** The entity or nursing home which requests CMP funding is accountable and responsible for all CMP funds entrusted to it. If a change in ownership occurs after CMP funds are granted or during the course of the project completion, the project leader shall notify CMS and the State Agency within five calendar days. The new ownership shall be disclosed as well as information regarding how the project shall be completed. A written letter regarding the change in ownership and its impact on the CMP Grant application award shall be sent to CMS and the State Agency.

**Part III:  
Project Category**

Please place an "X" by the project category for which you are seeking CMP funding.

- Direct Improvement to Quality of Care
- Resident or Family Councils
- Culture Change/Quality of Life
- Consumer Information
- Transition Preparation



## Tennessee CMP Reinvestment Program Project Application Submitted 6-17-2019

**Project Title** – Compassionate Touch<sup>®</sup>: A Practical Non-pharmacological Approach to Ease Behavioral Symptoms, thereby Supporting Nursing Homes’ Effort to Minimize the Use of Antipsychotic Medications for Dementia-related Behaviors.

### **EXPECTED OUTCOMES**

#### **Project Abstract**

This proposal is presented by [AGE-u-cate Training Institute](#) (ATI), a Limited Liability Company headquartered in Bedford, Texas, which delivers high-impact solutions that transform the attitudes and actions of those who live in, work in, or visit eldercare communities across the nation. ATI’s team members possess over 150 years’ combined experience in the fields of elder care, dementia care, education, rehabilitation, home care, business, and administration. They have engaged and trained thousands of care-partners in a variety of organizations internationally.

The purpose of this one-year project is to provide a non- pharmacological solution to support nursing homes’ effort to minimize the use of antipsychotic medications for dementia-related behaviors. Compassionate Touch<sup>®</sup> (CT) is an evidence-informed approach combining skilled touch techniques and specialized communication shown to help prevent behavioral expression in people with dementia and reduce job stress in care-partners. Project success will be evaluated by tracking: 1) TN nursing home level of participation in all components of the project. 2) Competency performance scores of training participants 2) Impact of using CT with residents with dementia who have behavioral symptoms as measured by MDS scores as well as any change in those residents’ use of antipsychotic medication. 3) Resident and staff satisfaction, as evidenced by survey and anecdotal feedback. Pam Brandon, Project Leader, assisted by Project Manager, will be accountable for project evaluation.

#### **Statement of Need**

Federal and state initiatives call upon providers to equip care-partners with practical tools that create positive outcomes for people with dementia. The reduction of unnecessary use of antipsychotic medications by replacing [*or* supplementing] them with non-pharmacologic approaches and strategies is paramount to these initiatives. Our project aligns with the TN Department of Health’s aim to improve dementia care for nursing home residents through education and collaboration.

**Program description:** This project is comprised of these components:

#### **Component 1. Facility Recruitment and Project Promotion**

These activities will take place at the beginning of the project to enlist facility participation, with priority given to facilities most needing to reduce antipsychotic use, known as “late adopters.” ATI intends to enlist a total of approximately 27 nursing homes in geographically diverse areas of Tennessee (TN) over the one-year project. Multi-tiered activities will be used to reach potential participating facilities. Strategies include:

1. Work with the TN Department of Health and Quality Improvement Organization to help identify late adopter facilities that need improvement in anti-psychotic usage, and that might most benefit by adding a new non-pharmacological approach.
2. Send an introductory letter and program overview to nursing home administrators.
3. Network with state and regional eldercare associations and organizations.

4. Submit announcement and article to state and regional eldercare association newsletters.
5. Contacting relevant TN LinkedIn groups.

### **Component 2. Onsite Staff Training**

Two-hour CT Caregiver Training for direct-care and support staff. (Nursing, Activities, Administrative, Social Work, Dining, Housekeeping, Maintenance, Therapy, Volunteers; Spiritual Care). ATI trainers provide on-site staff training in each of the participating facilities. The trainer works with the facility to schedule up to three training sessions, at the times that best meet facility needs to include all three shifts.

### **Component 3. Online CT Coach Training (Train-the-trainer component)**

Following onsite training, facilities then select and enroll three staff in online Coach Training. These people must have completed the onsite CT Caregiver training. Coach training totals six hours, completed in three, two-hour modules combining self-directed online instruction with clinical practice. CT Coaches are prepared to conduct on-going in-house CT training.

### **Component 4. In-House CT Training**

CT Coaches facilitate ongoing in-house training for additional and new staff.

### **Component 5. Project Support**

On the day of onsite training, the ATI trainer meets with the selected coaches, designated results measurement coordinator and administrator for instruction in “next steps,” including how to access and complete online Coach training and the process for results measure surveys. A printed guide is provided to each at that time. ATI provides on-going support with online access to the materials needed for implementation, quarterly teleconferences, and bimonthly electronic publications that reinforce the use of CT.

**Component 6. Customized training for state surveyors, ombudsmen, and TN’s Quality Improvement Organization.** They will participate in one workshop that is three hours long, held in a neutral location (such as a hotel or state office classroom). It will be offered three times during year one of the project. The ombudsman/surveyor training includes additional instruction in the design of this TN CMP project and its goals; case examples of successful integration of CT into facility care practices; and how to meaningfully apply knowledge gained within the scope of their role in the state to assist the facilities they serve.

### **Component 7. Results Measurement and Reporting**

Result Measures are fully described on Page 6. ATI will submit quarterly and final reports to the TN Department of Health.

### **Skilled Touch Process and Rationale:**

Touch deprivation in old age is real, especially for the medically frail elder. Because caring touch is a basic human need, the lack of it leads to isolation, anxiety, restlessness, poor trust in caregivers, insecurity, and decreased sensory awareness. In people with dementia, this underlying distress contributes to behavioral reactions. Compassionate Touch techniques are the result of more than twenty years’ clinical experience combined with research evidence

from a variety of fields. Skilled touch has a structured method. There are two forms of hands-on techniques: 1) Focused Touch with gentle, still pressure applied on arms or shoulders. 2) Rhythmic, gentle strokes in easy-to-learn patterns applied to the hands, back or feet. Techniques are applied with verbal or non-verbal consent from one to six minutes, depending on the response of the receiver and constraints of the caregiver. No clothing is removed, and techniques can be given to a person in a wheelchair, bed, chair, or recliner.

Studies that demonstrate the efficacy of skilled touch in dementia care include:

1. Woods, D. et al. (2009) [The effect of therapeutic touch on behavioral symptoms and cortisol in persons with dementia.](#)
2. Suzuki, M. et al. (2010) [Physical and Psychological Effects of 6-Week Tactile Massage on Elderly Patients with Severe Dementia.](#) American Journal of Alzheimer’s disease and Other Dementias, December, Vol. 25 no. 8, 680-686
3. Harris, M. et al. (2010) [The physiological and psychological effects of slow-stroke back massage and hand massage on relaxation in older people.](#) Journal of Clinical Nursing Vol. 19
4. Moyle, W. (2011) [Exploring the effect of foot massage on agitated behaviours in older people with dementia: A pilot study.](#) Australasian Journal on Ageing Vol. 30 159–161
5. Han A and Kunik ME (2017) [Feasibility of Training and Delivering Compassionate Touch in Long-Term Care.](#) Clinical Gerontologist Sep 19:1-9

**Timeline, Benchmarks, Deliverables:** By the end of the one-year project, 27 nursing homes in TN will have integrated CT into their facility’s dementia care practices. To achieve this goal, we expect to reach the following benchmarks. During the first quarter, we will focus on facility recruitment, planning, and organizational details. However, we expect to initiate on-site training during this first quarter, targeting approximately four facilities with increasing facility participation in Quarters two through four.

We expect to complete the training for TN state surveyors, ombudsmen, and Quality Improvement Organization during the third or fourth quarter with recruiting and planning activities taking place in the second or third quarter.

Task to be Performed and Time Frame to Perform Task	Responsible Party(s)
<b>PROJECT ORGANIZATION/ MANAGEMENT</b>	
1. Identify potential project participants. (Within 45 days of contract effective date and until goal is reached).	Project Manager
2. Identify and set up promotion channels. (Within 45 days of contract effective date)	Project Manager/ Leader
3. Promote project and recruit facilities (Within 45 days of contract effective date and until goal is reached).	Project Manager
4. Manage registrations, participant data base, process paperwork. (Within 45 days of contract effective date and until goal is reached).	Operations assistant



<p>5. Trainer selection and subcontractor agreements. (Within 45 days of agreement effective date).</p> <p>6. Issue Project Participation agreement to each registered facility. (Within 5 days of facility on-line registration)</p> <p>7. Communication with facility contact responsible for helping with logistics (Upon signed Project Participation agreement)</p> <p>8. Coordinate on-site training schedule. (Upon signed Project Participation agreement)</p> <p>9. Guide facility contact on staff participation in on-site training. (Within 2 weeks of signed Project Participation agreement)</p>	<p>Project Leader</p> <p>Project Leader / Manager</p> <p>Subcontract Trainers</p> <p>Subcontract Trainers</p> <p>Subcontract Trainers</p>
<p>10. Purchase training materials and supplies. (Within three weeks of on-site training dates)</p> <p>11. Ship materials to each participating facility. (Within two weeks of on-site training dates)</p> <p><b>CONDUCT ON-SITE TRAINING</b></p> <p>1. Travel to each participating facility (Day before and after scheduled training)</p> <p>2. Facilitate on-site training in each participating facility. (Day of training)</p> <p><b>CONDUCT SURVEYOR, OMBUDSMAN, QIO TRAINING</b></p> <p>1. Collaborate with leadership of each group to coordinate schedule, secure site, promotion and registration details. (60-90 days prior to scheduled training)</p> <p>1. Travel to location. (Day before and after scheduled training)</p> <p>2. Conduct training. (Day of training)</p> <p><b>ON-LINE COACH TRAINING</b></p> <p>1. Instruct facility administrator in on-line CT Coach Training procedures. (Day of on-site training)</p> <p>2. Enroll and conduct on-line training for three staff from each participating facility. (Within two weeks of on-site training)</p> <p><b>POST-TRAINING FOLLOW-UP</b></p> <p>1. Coach support, including teleconference, newsletter. (Within 60 days of on-line training)</p>	<p>Operations Assistant</p> <p>Operations Assistant</p> <p>Subcontract Trainers</p> <p>Subcontract Trainers</p> <p>Project Leader/ Subcontract Trainer</p> <p>Subcontract Trainers</p> <p>Subcontract Trainers</p> <p>Subcontract Trainers</p> <p>Project Manager/ Operations Assistant</p> <p>Project Leader/ Project Manager</p>
<p>2. Phone support. (As needed for participating facilities)</p> <p><b>OUTCOMES TRACKING AND REPORTING</b></p> <p>1. Review enrollment numbers with State coordinator and modify plan if needed. (Monthly, Quarterly or as needed.</p> <p>2. Devise electronic survey for data collection. (Within 60 days of contract effective date)</p> <p>3. Instruct each facility designee about results measurement collection process (Day of on-site training)</p> <p>4. Send electronic survey to facility designee for Results Measurement. (Within 1 week of training)</p> <p>5. Assist facilities with results tracking as needed by phone/ email</p>	<p>Subcontract Trainers</p> <p>Project Leader</p> <p>Project Manager</p> <p>Subcontract Trainer</p> <p>Project Manager</p> <p>Project Manager</p>

support.(Within 1 week of on-site training and until project completion)	
6. Compile and analyze survey responses. (Monthly until project completion)	Project Manager/ Project Leader
7. Report project results to State Coordinator. (Quarterly and at project completion)	Project Leader
<b>ADMINISTRATIVE</b>	
1. Set up web page and online register process. (Within 14 days of contract effective date).	IT Director
2. Manage software platforms for on-line project processes. (Within 14 days of contract effective date and until project completion)	IT Director
3. Process project accounts receivable and payable. (Within 30 days of contract effective date and until project completion)	Finance Director
4. Provide project leadership; communication with State; ensure benchmarks; oversee budget; supervise project staff, and contract personnel. (Upon contract effective date and until project completion)	Project Leader

### Sustainability

After the project period concludes, sustainability is expected to be achieved through peer to peer interactions when CT Coaches in participating nursing homes transfer the information they have acquired to other staff members. ATI also provides on-going support for CT Coaches with online access to the materials needed for implementation, including quarterly teleconferences and bimonthly electronic publications that reinforce the use of CT.

**Innovation and Replicability:** In addition to the required project final report, we plan to generate a “Lessons Learned” practical description sharing what worked (Best Practices) and what didn’t (challenges/ barriers) with the long term care community. This report will be shared with all TN participating nursing homes, QIO, surveyors, ombudsman; the TN HCA for possible distribution in their newsletter; as part of state and national conferences that ATI is invited to participate in; on ATI’s social media channels and electronic newsletter.

**4. Results Measurements:** By the end of the project, ATI expects to achieve the following outcomes at approximately 27 participating Tennessee nursing homes:

1. 95% of CT Caregiver Training and Coach online training, and Surveyor/Ombudsman/QIO training participants will score 90% or better on training competency tools provided by ATI customized for each of these three groups of participants.

*Result Measurement for Outcome #1:* Training participants will complete the competency tool at the end of the training session. Onsite and surveyors, ombudsmen, and QIO training participants will complete a paper posttest at the end of the training session. The trainer will score and mail them to the ATI office. The Online Coach Training includes a posttest, completed, and scored online. To view Competency Tools, click on the following links:

- [CT Caregiver Training](#)
- [Coach Online Training](#)
- [Ombudsman, Surveyor, QIO Training](#)

ATI will track the number of competency tools completed and the score of each

completed survey to determine if the expected outcome is achieved.

2. 95% of CT Coaches will have conducted in-house training for staff.

*Result Measurement for Outcome #2:* Survey Monkey will be used for participating CT Coaches to verify they have conducted in-house training for staff. ATI will track the number of CT Coaches who have held the training and determine if the expected outcome is achieved. While we don't require a set number of in-house trainings, our on-going contact with Coaches facilitates follow through, and we help with problem-solving if needed. We provide a template for a one-hour training that they can follow. It is a condensed version of the on-site CT Caregiver Training that is led by ATI trainer. Coaches will have access to ATI CT technique instruction videos that they can use to teach techniques. We will survey the facility every 30 days to determine Coach activity. Sample survey questions include 1) Have you led CT training for staff in the past 30 days? 2) In the past 30 days, how many staff attended your training sessions? 3) How did you train the other staff in your facility? A. Scheduled training session B. As part of new employee orientation. C. One-to-one coaching D. Other.

If CT Coaches leave the facility, new coaches are selected, and they would complete the online training and proceed from there, with ATI assistance and the assistance of the facility results measurement coordinator and the Administrator.

3. A 10% reduction in the aggregate score for the following MDS items for participating residents in each participating facility and statewide for all participating facilities:
  - MDS E0200A – Physical behavioral symptoms directed toward others
  - MDS E0200B – Verbal behavioral symptoms directed toward others
  - MDS 0200C – Other behavioral symptoms not directed toward others
  - MDS E0800 – Rejection of care that is necessary to achieve the resident's goals for health and well-being

*Result Measurement for Outcome #3:* ATI will collaborate with each participating nursing home to identify approximately ten residents to participate in the CT program. Individuals selected will be long-stay residents who have dementia and exhibit any physical, verbal, other behavioral symptoms and/or resistance to care. The primary focus is to look at the impact of CT on the behaviors. However, in the baseline data on each of the ten residents, we ask if the resident is prescribed antipsychotic medication (yes/no). Then, in the quarterly follow-up surveys, we ask if changes in the above behaviors altered anti-psychotic medication use for those residents. To establish baseline data for expected outcomes, ATI will obtain quarterly MDS scores for participating residents for the following MDS items MDS E0200A MDS E0200B; MDS 0200C; and MDS E0800 for the first quarter preceding the start date of the project (date of on-site training) for which data is available, and facility aggregate scores will be determined. Throughout the project, quarterly scores for these MDS items will be obtained for participating residents, and aggregate scores will be

compared to baseline data to determine if progress is being made toward achieving the expected outcomes. The final aggregate quarterly MDS scores will be compared to baseline data to determine if the expected outcomes are achieved. Resident confidentiality will be achieved by assigning a unique number to each of the ten residents selected for results measurement. The ATI team member responsible for Results Measurement will work with each facility on how to provide results measurements to ATI confidentially.

5. A minimum of 50% of TN state surveyors, ombudsmen, and Quality Improvement Organization advisors will have participated in one, 3-hour CT training specifically designed for this group and held at a neutral location (such as hotel or state agency classroom).

*Result Measurement for Outcome #5:* Enrollment numbers will be reviewed with State coordinator quarterly and needs modifications will be determined.

6. Resident and staff satisfaction with CT, as well as barriers or problems, will be evidenced by survey response and anecdotal feedback via Survey Monkey as well as testimonials and case examples gathered during Coach Teleconferences or other contacts with the ATI team. Responses will be included in quarterly and final reports.

## **5. Benefits to Nursing Home Residents**

This project will benefit nursing home residents by using non-pharmacological strategies, i.e., skilled touch techniques and specialized communication, to help ease possible underlying causes of behavioral expression in participating residents. Benefits are expected to include decreased restlessness and physical discomfort, better sleep, and increased trust in caregivers. All of these benefits are expected to reduce behavioral expression and improve the overall quality of life for those residents who participate in the project.

The following are personal accounts from nursing home staff on the benefits of CT:

*An agitated woman with diabetes on our end-stage dementia unit required 2-3 people to hold her while the LPN pricked her finger to check her serum glucose level. One day there wasn't enough staff to steady her, so Peg (one of our CT coaches) went in and began CT with her. She spoke to her softly, did a flowing head & backstroke and by the time the LPN arrived the woman was so relaxed no one had to hold her to check her serum glucose level.- Rosene Dunkle, RN, Masonic Village, Elizabethtown, PA.*

*I gave the hand technique to calm one of our residents with Alzheimer's disease who roams. I caught her as she was winding up to "sundown." She sat down and let me "practice for a class I took." In ten minutes, she was asleep with her head on my shoulder. No medication was needed that night to calm her down. It was so cool!" - Laurie Archer, Nursing Home Administrator, Adrian, MO.*

*The staff who gave some of our residents Compassionate Touch said they felt more*

## AGE-u-cate Training Institute Biographical Sketches

**Pam Brandon, Project Leader:** Pam brings over 20 years' experience in family and professional caregiver education, having developed and delivered programs for state and national organizations. She is President and Founder of AGE-u-cate Training Institute (ATI) and leads this fast-growing company, influencing positive change in an aging world.

**Ruby Johnson, Project Manager:** An electrical engineer by profession, Ruby has served the last seventeen years as a senior project manager, clinical trial manager, clinical research associate, and consultant. She has expertise in coordinating all aspects of complex projects from proposal through the final report.

**Tammy Craig, Operations Assistant:** Tammy is an experienced Administrative Assistant with a strong record of achievement in office management in accounting, law, and engineering industries.

**John Brandon, Information Technology:** John brings 22 years as a business owner and professional video production and information systems. He administers ATI's website, graphic design, video production.

### AGE-u-cate Training Institute Master Trainers:

**Beth Propp, RN:** Beth brings decades of experience as a Registered Nurse, patient advocate, and trainer/educator, specializing in working with elderly populations.

**Julie Boggess, MPA:** Julie worked 31 years in Aging Services, including CEO for Bethesda Rehab and Senior Care in Chicago. She launched her own company, Enlighten Eldercare, bringing training and education to professional and private caregivers of older adults.

**Maria Epner Flora, PT:** Maria has 25 years' experience as a physical therapist, serving long term care, home health and rehabilitation settings both as a clinician and program administrator. She has worked as an adjunct university faculty and has provided community education.

**Sue S. Wilson, LMSW, CDP, CADDCT:** Sue founded 360 Elder Solutions, LLC and shares 30+ years' experience helping family and professional care-partners, as well as state and federal officials, to understand better and support the changing conditions and abilities experienced by individuals living with dementia.

**Deborah Allen, MSW:** Deborah is Executive Director for PennCares Support Services, a community-based organization providing home care services for elderly individuals and people with physical and intellectual disabilities. She has over 18 years' experience in the development and administration of human services and rehabilitative support programs and has been conducting training for more than 12 years.

**Vicki Johnson:** Vicki brings over 20 years' experience providing professional and family education services, including with the Alzheimer's Association and as Senior Living Advisor. She is also a Licensed Nursing Home Administrator and has served in this capacity.

*connected and in tune with each resident as a person.* - Lora Chapman, RN, Ozark, MO.

## **6. Non-Supplanting**

This project will in no way supplant the responsibilities of participating nursing facilities to meet existing Medicare and Medicaid regulations, or other statutory and regulatory requirements. Education and interventions employed in this project will complement current nursing facility standards and practices.

## **7. Consumer and Other Stakeholder Involvement**

The Compassionate Touch® project will involve approximately 270 TN nursing home long-stay residents who have dementia and who exhibit behavioral symptoms. Other stakeholders will include facility staff throughout the state who will participate in the in-house training at participating nursing homes. Additional family members and members of the community at large may become involved as they learn about the CT program and techniques from staff who have completed the in-house or Coach training. Staff at approximately 81 nursing homes will be involved in implementing the new communications and care skills they learn in the on-site staff training and CT Coach training. Each facility's leadership will be involved when they support the CT project by providing space and audiovisual equipment, and by providing their staff with paid time to participate in training. Residents' families will be notified about the project. We provide the facility a template for a family letter and a flyer describing the program. We are happy to have family members or volunteers attend the onsite CT Caregiver training if the facility wants to invite them. However, our priority is staff training and seats are limited to 20 for each of the three training sessions conducted by the ATI trainer.

## **Project Support**

These organizations have expressed support for this project:

- QSource: Letter of support is attached
- Tennessee Health Care Association has enlisted Pam Brandon to lead a Compassionate Touch education session THCA/TNCAL Convention & Trade Show 7/31/2019 - 8/2/2019.

## **8. Funding**

Please see the attached revised Excel Grant Budget Spreadsheet and Budget Details.

There is no non-CMP or other funds expected.

Funding sustainability is achieved in two ways: 1) ATI generates revenues through a diversity of programs, therefore, will continue to cover necessary operating expenses beyond the time frame of this project. 2) The project will equip each participating facility with all the knowledge, materials, and supplies needed to be able to continue the program after the project period.

## **9. Involved Organizations**

AGE-u-cate Training  
Institute  
401 Harwood Rd. Suite B  
Bedford, TX 76021  
817-857-1157

info@ageucate.com  
[www.ageucate.com](http://www.ageucate.com)

### **10. Contact**

Pam Brandon, Founder and President AGE-u-cate Training Institute  
401 Harwood Rd. Suite B Bedford, TX 76021  
817-857-1157 Ext. 202 [pam@ageucate.com](mailto:pam@ageucate.com)

### **11. Subcontract Trainers**

Julie Boggess, MPA 109 Candota Ave. Mt. Prospect, IL 60056  
847-858-7666 [JulesBog@outlook.com](mailto:JulesBog@outlook.com)

Vicki Johnson 1339 South Lincoln Shawano, WI 54166  
715-304-8035 [vvj.dlct@gmail.com](mailto:vvj.dlct@gmail.com)

Maria Epner Flora 5820 W. Berenice Ave. Chicago, IL 60634  
330-519-8570 [iammariaflora@gmail.com](mailto:iammariaflora@gmail.com)

Beth Propp, RN 2980 Ruby Ridge Ct. Suamico, WI 54313  
920-737-1015 [beth.propp@gmail.com](mailto:beth.propp@gmail.com)

Deborah S. Allen 263 Peach Tree Lane Elliptsburg, PA 17024  
717-582-3984 [dallen73@embarqmail.com](mailto:dallen73@embarqmail.com)

Sue Wilson, LMSW, CADDCT, CDP 6810 Smokey Hill Road Austin, TX 78736  
512-799-5043 [suewilson.7@gmail.com](mailto:suewilson.7@gmail.com)

## AGE-u-cate Training Institute (ATI) Personnel Job Descriptions

### ATI Employees:

**Project Leader/ ATI President:** Responsible for establishing the company's goals and strategies; presides over employees and contractors. Supervises all operations and business activities. Oversees budget. Provides CMP project leadership. Represents the company at state and national events. Public speaking and conducts training.

**Project Manager:** Serves as CMP project point person. Coordinates trainers, scheduling, and other project details. Manages trainers, develops all project forms and spreadsheets, assigns training, creates and manages all data collection, communicates with the nursing home leader, assists project leader in writing quarterly and year-end reports. Manages project progress and ensures that the project is fulfilling commitments within deadlines.

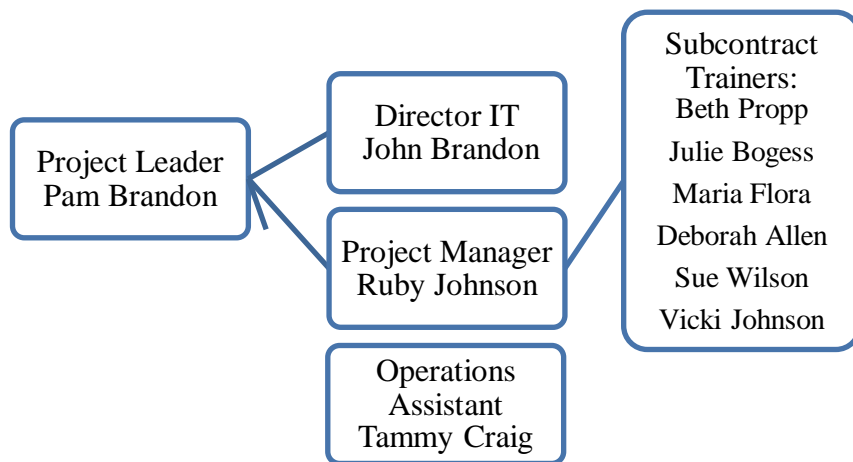
**Operations Assistant:** Assists Project Manager and President with project details, data input, and training support, and other duties as necessary for successful project completion.

**Finance and Information Technology (IT) Director:** Responsible for developing and managing company accounts; oversees cash flow and accounts receivable and payable. Responsible for the management, strategy, and execution of IT infrastructure. Oversees technical projects to support company goals. Designs and maintains the company website.

### Subcontract Trainers:

Trainer is an independent contractor of ATI who has achieved ATI Master Training status. Coordinates and conducts on-site training as defined by the project at each assigned participating facility.

### Project Organizational Chart





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## GENERAL ASSURANCES

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*Assurance is hereby provided that:*

1. This program will be administered in accordance with all applicable statutes, regulations, program plans and applications:
  - a. The laws of the State of Tennessee;
  - b. Title VI of the federal Civil Rights Act of 1964;
  - c. The Equal Employment Opportunity Act and the regulations issued there under by the federal government;
  - d. The Americans with Disabilities Act of 1990 and the regulations issued there under by the federal government;
  - e. The condition that the submitted application was independently arrived at, without collusion, under penalty of perjury; and,
  - f. The condition that no amount shall be paid directly or indirectly to an employee or official of the State of Tennessee as wages, compensation, or gifts in exchange for acting as an officer, agent, employee, subcontractor, or consultant to the Agency in connection with any grant resulting from this application.
2. Each agency receiving funds under any grant resulting from this application shall use these funds only to supplement, and not to supplant federal, state and local funds that, in the absence of such funds would otherwise be spent for activities under this section.
3. The grantee will file financial reports and claims for reimbursement in accordance with procedures prescribed by the State of Tennessee Department of Health.
4. Grantees awarded grants resulting from this application process will evaluate its program periodically to assess its progress toward achieving its goals and objectives and use its evaluation results to refine, improve and strengthen its program and to refine its goals and objectives as appropriate.
5. If applicable, the program will take place in a safe and easily accessible facility.

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### CERTIFICATION/SIGNATURE

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I, THE UNDERSIGNED, CERTIFY that the information contained in the application is complete and accurate to the best of my knowledge; that the necessary assurances of compliance with applicable state/federal statutes, rules and regulations will be met; and, that the indicated agency designated in this application is authorized to administer this grant.

I FURTHER CERTIFY that the assurances listed above have been satisfied and that all facts, figures and representation in this application are correct to the best of my knowledge.

---

Signature of Applicant Agency Administrator

Date Signed (Month/Day/Year)

## GRANT BUDGET: AGE-u-cate Training Institute- Compassionate Touch Project

(BUDGET PAGE 1)

APPLICABLE PERIOD: The grant budget line-item amounts below shall be applicable only to expense incurred during the period beginning October 1, 2019 and ending October 1, 2022.				
POLICY 03 Object Line-item Reference	EXPENSE OBJECT LINE-ITEM CATEGORY <sup>1</sup> (detail schedule(s) attached as applicable)	GRANT CONTRACT	GRANTEE PARTICIPATION	TOTAL PROJECT
6	Salaries <sup>2</sup>	\$26,850.00	\$0.00	\$26,850.00
16	Benefits & Taxes	\$2,054.00	\$0.00	\$2,054.00
19	Professional Fee/ Grant & Award	\$57,750.00	\$0.00	\$57,750.00
23	Postage & Shipping	\$1,500.00	\$0.00	\$1,500.00
27	Travel/ Conferences & Meetings <sup>2</sup>	\$23,490.00	\$0.00	\$23,490.00
36	Supplies	\$9,580.00	\$0.00	\$9,580.00
44	Other Non-Personnel <sup>2</sup>	\$14,850.00	\$0.00	\$14,850.00
25	<b>GRAND TOTAL</b>	\$136,074.00	\$0.00	\$136,074.00

<sup>1</sup> Each expense object line-item shall be defined by the Department of Finance and Administration Policy 03, Uniform Reporting Requirements and Cost Allocation Plans for Subrecipients of Federal and State Grant Monies, Appendix A. (posted on the Internet at: <https://www.tn.gov/assets/entities/finance/attachments/policy3.pdf>).

<sup>2</sup> Applicable detail follows this page if line-item is funded.

**GRANT BUDGET LINE-ITEM DETAIL: AGE-u-cate Training Institute- Compassionate Touch Project (BUDGET PAGE 2)**

	<b>COST PER UNIT</b>	<b>Year One 12 months</b>	<b>AMOUNT</b>
<b>SALARIES</b>			
<b>ATI President/ Project Leader</b>	5% of \$160,000 annual salary	\$8,000	\$8,000
<b>Grant Project Manager:</b>	20% of \$52,000 salary	\$10,400	\$10,400
<b>ATI Operations Assistant</b>	15% of \$34,000 salary	\$5,100	\$5,100
<b>ATI Finance/IT Director</b>	5% of \$67,000 annual salary	\$3,350	\$3,350
<b>ROUNDED TOTAL</b>			<b>\$26,850</b>
<b>Payroll Taxes</b>	Estimated @ 7.65% of salaries	\$2,054	\$2,054
<b>ROUNDED TOTAL</b>			<b>\$2,054</b>
<b>PROFFESIONAL FEE/ GRANT &amp; AWARD</b>			
<b>Subcontract Trainer onsite training</b>	\$1,925 per faciity x 27.	\$51,975	\$51,975
<b>Subcontract Trainer : Surv/Ombud/QIO Training</b>	\$1925 x 3.	\$5,775	\$5,775
<b>ROUNDED TOTAL</b>			<b>\$57,750</b>
<b>POSTAGE &amp; SHIPPING materials to training sites.</b>	\$50 X 30 sites.	\$1,500	\$1,500
<b>ROUNDED TOTAL</b>			<b>\$1,500</b>
<b>TRAVEL</b>			
Trainer travel.	Airfare: 30 round trip @\$390.	\$11,700	\$11,700
Note: Car rental and airfare GSA rates were difficult to predict: unknown facility locations. Estimated.	Hotel: 2 nights per training @ 94/night GSA rate. 60 nights.	\$5,640	\$5,640
	Car Rental: 30 @ \$150/ rental <b>OR</b> Mileage ( GSA rate) @.47 per mile/ maximum of \$150.	\$4,500	\$4,500
	Meals & Incident.: \$55 GSA rate x1 per day of training x 30.	\$1,650	\$1,650
<b>ROUNDED TOTAL</b>			<b>\$23,490</b>
<b>SUPPLIES and OFFICE</b>			
<b>Materials and Supplies: Onsite facility training.</b>	\$190 per facility x 27	\$5,130	\$5,130
<b>CT Coach Supply Pack</b>	3 per facility @\$35.00 each. X 27	\$2,835	\$2,835
<b>Materials and Supplies: Surv/ombud/QIO training.</b>	\$190 X 3 trainings.	\$570	\$570
<b>Survey Monkey, Talent LMS, Ordoro, MailChimp, Hubspot, Adobe, Microsoft, Zoom, DropBox, Intuit, Vimeo</b>	5% of yearly ATI budget of \$18,400	\$920	\$920
<b>Office Supplies: Copies, toner cartridge, paper</b>	2.5%of yearly cost	\$125	\$125
<b>ROUNDED TOTAL</b>			<b>\$9,580</b>
<b>OTHER NON-PERSONNEL</b>			
<b>On-line Coach Training: Flat rate per facility.</b>	\$550 per facility x 27	\$14,850	\$14,850

**ROUNDED TOTAL**

**\$14,850**

**GRAND TOTAL**

**\$136,074**



**Qsource.**

3340 Players Club Pkwy.  
Ste. 300  
Memphis, TN 38125

49 Music Square West  
Ste. 402  
Nashville, TN 37203

124 West Capitol Ave.  
Ste. 900  
Little Rock, AR 72201

9000 Wessex Place  
Ste. 204  
Louisville, KY 40222

911 E. 86th St.  
Ste. 202  
Indianapolis, IN 46240

920 Main Street  
Ste. 801  
Kansas City, MO 64105

April 16, 2019

ATTN: Grant Review Committee

RE: AGE-u-cate Training Institute\_ Compassionate Touch® project.

Qsource is please to write this letter of support for the AGE-u-cate Training Institute in the development of a Compassionate Touch project for nursing homes across the state of Tennessee.

Qsource, the Quality Innovation Network-Quality Improvement Organization (QIN-QIO) for Alabama, Indiana, Kentucky, Mississippi and Tennessee focuses on three aims: better patient care, better population health and lower health care costs through improvement. As part of current Centers for Medicare & Medicaid Services (CMS) initiatives, our goal is to facilitate quality improvement efforts within our state and support nursing home staff in quality improvement projects and evaluate the impact of these efforts on care quality.

In support of this effort, Qsource will assist with communication of the program and encourage long term care facilities to participate with this grant.

We believe this initiative will support our mutual objectives for improved quality of life and health outcomes for Tennessee nursing home residents. We, therefore, enthusiastically support the proposed work and look forward to partnering with this team to make this a successful project.

Sincerely,

Dawn M. FitzGerald, MS, MBA  
Chief Executive Officer  
[dfitzgerald@qsource.org](mailto:dfitzgerald@qsource.org)

July 10, 2019

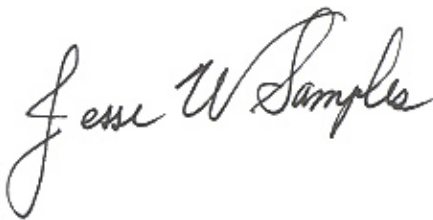
Ms. Chelsea Ridley, MPH  
Director, CMP Reinvestment Program  
Office of Patient Care Advocacy  
Tennessee Department of Health  
Andrew Johnson Tower, 5<sup>th</sup> Floor  
710 James Robertson Parkway  
Nashville, TN 37243

Dear Ms. Ridley,

THCA is writing in support of the Compassionate Touch program for which the AGE-uate Training Institute has submitted an application. The goals of the program promote quality of life initiatives and a person-centered care philosophy which are supported by THCA's members, approximately 375 nursing homes and assisted living facilities in Tennessee. I am pleased to add THCA's name to the list of organizations that will look forward to seeing this program become a reality for some of our state's most frail and vulnerable citizens.

Thank you for your consideration.

Sincerely,



Jesse Samples  
Executive Director

/mc