



January 31, 2021

Amy Hogan
Nursing Facility Policy Administrator
Bureau of Long-Term Services and Supports
The Ohio Department of Medicaid
50 West Town Street, Suite 400
Columbus, OH 43215

Dear Ms. Hogan:

Please find in the pages that follow the fourth-quarter report for CMP Request Number: G-1819-04-0796, Dementia Live Project, for the period of 01 October 2020 – 31 December 2020.

AGE-u-cate Training Institute
Project Leader: Pam Brandon
(817) 857-1157 ext. 202

We look forward to your input and our ongoing participation in this project.

Kind regards,

A handwritten signature in black ink that reads "Pam Brandon". The signature is written in a cursive, flowing style.

Pam Brandon, Founder/President
AGE-u-cate Training Institute
P.O. Box 452
Colleyville, TX 76034
(817) 857-1157 ext. 202

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Performance Requirements Progress Report

1-2. Onsite training of the thirty-minute Dementia Live Experience (DL) Caregiver Training will be offered to each of the three work shifts at each participating nursing home by AGE-u-cate contractors.

Status: ATI Certified trainers could not provide onsite to participating facilities during the reporting period due to the restrictions under the COVID-19 pandemic.

ATI trainers continue to offer coach support and will now offer Dementia Live: The Virtual experience for (5) facilities who signed participation agreements before June 30, 2020, and did not have the benefit of onsite training due to COVID-19.

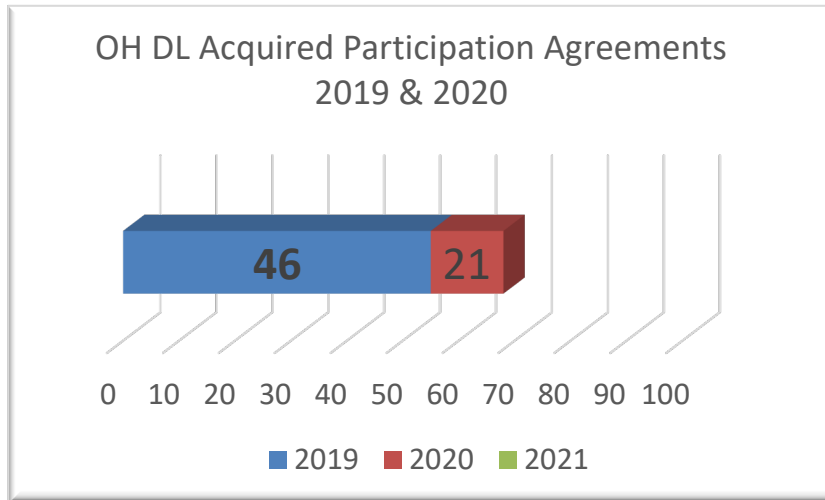
ATI launched seven (7) facilities in this quarter.

In response to the COVID-19 quarantine, ATI has developed a process to assist facilities in identifying their onsite coaches and moving forward with DL Coach Training, utilizing our established e-learning platforms. This is not intended to replace onsite training; however, ATI trainers are prepared to guide the facility through remote staff training while onsite training is prohibited.

Upon completion of the e-learn coach training modules, the next steps with each facility include:

- Offering guided implementation to the facility DL Coaches.
- Assistance with selecting up to ten residents for the target group.

Total facilities enrolled 2019- December 31, 2020



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3-4. The facility will determine the number of participants and training times.

Task Status: Ongoing – An ATI trainer is assigned to a facility after receiving a Participation Agreement.

Task Status: As onsite training continues to be prohibited, ATI has strengthened each facility's support through guided implementation to integrate the program during the pandemic successfully. Our commitment is demonstrated through the following activities in this reporting period:

- Seven (7) Ohio communities signed participation agreements in Q4.
- We remain committed to providing guided and flexible implementation for all O.H. participating facilities.
- We have offered remote care team training to participating facilities that did not benefit from onsite training. Many have expressed interest, and we will continue to work with each facility to schedule when the time is right.
- We maintain frequent contact with the slower to implement facilities.

The COVID-19 pandemic continues to present challenges to coordinate remote training. Dementia Live is an interactive simulation experience and not conducive during a quarantine. However, ATI developed a table-top experience that allows social distancing. Also, we introduced Dementia Live: The Virtual Experience in Q4. We continue to work with participating facilities to implement modified versions of Dementia Live.

ATI trainers maintain contact with facility coaches through email, phone calls, and scheduled Zoom meetings. All facilities are aware that ATI is ready to provide remote training when the time is right.

The ATI trainer obtains training rosters upon completing remote training for the facilities.

5. Maintain a roster of training participants.

Task Status: Ongoing – DL training participants sign-in on the ATI roster, and copies are provided to each nursing home administrator. Originals rosters are on file at ATI.

6-7. Pro-actively check-in with DL Coaches and others, helping with outcomes tracking and collect measurement data every quarter.

Task Status: Ongoing – Resident outcome data collection was slowed again this quarter due to the pandemic. Facilities have not been able to train enough core staff on Dementia Live. Also, we were notified by several facilities that many of the residents first selected for their sample group no longer reside in the facility.

As a result of the significant changes taking place in the facilities and understanding the importance of meaningful facility feedback on the techniques' effectiveness, we will implement an alternative method for acquiring feedback in 2021.

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8-9 Provide an avenue of contact for participants if assistance is needed.

Task Status: Ongoing– the following ATI personnel are available to participants via phone or email:

- Assigned trainer
- Grants Manager
- V.P. of Operations

We are prepared to provide facilities with a prompt response when contacted.

10. Provide facilities support in the form of online access to DL instruction video, coach materials, teleconferences, webinars, bi-monthly electronic publication, phone support, assistance with data collection, and outcomes tracking.

- Webinar: Dementia Live: The Virtual Experience December 10, 2020.

11-14. The Grants Manager and Executive Leadership will facilitate the process of outcomes tracking and reporting. Report outcomes quarterly.

Task Status: Ongoing – A summary of the reports received since program inception to December 31 is included on page six (6).

15-16. ATI will provide a letter and one-page editable flyer to inform families about the DL project, and posters that highlight communication strategies.

Task status: On-going.

17. ATI will provide the following expectations to the facility during the preparation process.

Several documents are utilized by the trainers while working with the facility to prepare for training and comply with post-training responsibilities.

- The Participation Agreement outlines facility responsibilities, and the Ready, Set, Go documents provide directions that guide the implementation of DL.
 - Ready document:
 - Identify facility DL Coaches and the Results Measurement Coordinator.
 - Set document:
 - Provides instructions to access the online coach training.
 - Instructions on selecting the resident sample group.
 - Dates to complete coach training and submit sample group baseline report.
- A sample DL Care Plan document

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18. Enlist and train nursing homes within the state of Ohio. This will be monitored through a multi-tiered approach to marketing with online registration.

Task Status: ATI has invested a significant amount of time in continued recruitment. Outreach included:

- Zoom information sessions promoted via LinkedIn.
- Individual outreach to OH SNF Administrators via LinkedIn.
- Provided a no-cost webinar for the Ohio Healthcare Association on October 8.
- Phone calls and emails.
- Outreach to associations (LeadingAge, Ohio Culture Change).

CUMULATIVE OUTCOME RESULTS AS OF DEC 31, 2020

Measurements are obtained by facilities submitting a monthly follow up report that compares results to the baseline report for the ten-resident sample group.

The cumulative sample group through December 31, 2020, includes:

- Facility follow up reports received: 34
- Number of residents represented: 139
- Total resident report sample size: 259

Measurement 1: 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.
 - Result: 42 reports indicated a reduction in physical behaviors- 16% **MET**
- MDS E0200B- Verbal behavioral symptoms directed toward others
 - Result: 41 reports indicated a reduction in observed behaviors- 15% **MET**
- MDS 0200C- Other behavioral symptoms not directed toward others
 - Result: 43 reports indicate a decrease in signs of ill-being that includes generalized negative behaviors not directed toward others- 16% **MET**

Measurement 2: A 10% decrease in the aggregate score for the following MDS item for participating residents in each participating facility and statewide for all participating facilities:

- MDS E800- Rejection of care that is necessary to achieve health and well-being.
 - Result: 47 reports indicate an increase in signs of well-being that includes increased cooperation with care- 18%

Measurement 3: 95% of participants will score 80% or better on training competency tools.

- Result: The average score for all participants is 94% **MET**

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Measurement 4: 80% of trained care partners trained in Dementia Live will report that they agree with the following survey statements describing their experience:

- a. I feel more effective dealing with resident behaviors and care needs- 92%
- b. My relationship with the residents has improved- 91%
- c. I feel more equipped to respond to behavioral expression in people with dementia- 96%
- d. Behavioral expression in people I can for has decreased because I have new skills in interacting with them to prevent behaviors. 96%

MET

Measurement 5: 95% of C.T. Coaches will have conducted in-house training for staff and family caregivers.

- o Result: 11/34 reported they have held training sessions- 32%

NOT MET