DATE: February 14, 2020

TO: State Survey Agency Directors

FROM: Director
Quality, Safety & Oversight Group

SUBJECT: Release of Additional Toolkits to Ensure Safety and Quality in Nursing Homes

Center for Clinical Standards and Quality/Quality, Safety & Oversight Group

Memorandum Summary

The Centers for Medicare & Medicaid Services (CMS) is announcing the release of two toolkits that align with the CMS strategic initiative to Ensure Safety and Quality in Nursing Homes.

• **Developing a Restful Environment Action Manual (DREAM) Toolkit** – CMS has created a toolkit that offers education and person-centered, practical interventions that nursing home administrators, directors of nursing, and bedside staff can implement to promote high-quality sleep for residents living with dementia.

• **Head-to-Toe Infection Prevention (H2T) Toolkit** – CMS has created a toolkit that offers educational materials and practical interventions for bedside staff designed to prevent common infections by improving activities of daily living (ADL) care.

High-quality sleep is necessary for optimal cognitive and physical functioning, especially for residents living with a disease that causes cognitive impairment such as dementia. While some sleep disturbances are part of the normal aging process, sleep fragmentation can increase as dementia progresses. Some of the most common physiological concerns associated with poor sleep include a weaker immune system, psychomotor performance challenges such as loss of balance, increased pain sensitivity, and changes to the metabolic and endocrine systems. The importance of sleep may not be well understood in the nursing home industry as a clinical matter directly relating to a resident’s health and quality of life, and bedside staff may not understand their role in promoting high-quality sleep. The DREAM Toolkit offers a non-pharmacological approach to improve the quality of life and quality of care provided to residents with dementia.

Many of the common infections that nursing home residents experience (such as soft tissue infections, pneumonia, urinary tract infections) can be prevented through proper care provided by direct care staff, specifically focusing on the optimal care of the mouth, skin, and kidneys. Existing toolkits and information related to infection control practices in nursing homes generally focus on outbreak containment or infection management. The H2T toolkit focus on
“head to toe” hygiene practices which direct care staff can readily access to prevent infections before they ever occur, resulting in improved quality of life and reduced adverse events.

Through the Civil Money Penalty Reinvestment Program (CMPRP), CMS has developed two optional toolkits to aid nursing homes in the care of residents with dementia and to reduce common infections experienced by nursing home residents.

- **DREAM Toolkit** – consists of several components including a nurse handbook, leadership implementation guide, and several bedside tools. We believe this toolkit will help facilities have a better understanding of the importance of high-quality sleep and in turn assist them in improving the quality of life and quality of care for residents living with dementia.
- **H2T Toolkit** – provides a mix of educational materials and tools to help bedside staff deliver person-centered care. Much of the information will be relayed through images and graphics to meet the needs of different types of learners. The toolkit focuses on ease of implementation to help direct care staff apply practices which will reduce infections into their daily routines.

Both of these toolkits will be available for free at the CMPRP website by February 28, 2020: [https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/SurveyCertificationGenInfo/LTC-CMP-Reinvestment.html](https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/SurveyCertificationGenInfo/LTC-CMP-Reinvestment.html).

**Contact**: [DNH_TriageTeam@cms.hhs.gov](mailto:DNH_TriageTeam@cms.hhs.gov) for questions regarding any topics on this memo.

**Effective Date**: Immediately. This information should be communicated with all survey and certification staff, their managers and the State/Regional Office training coordinators within 30 days of this memorandum.

/s/
David R. Wright

**cc**: Survey & Operations Group Management