

The 2019 Alabama's Best Practices Steering Committee  
is proud to announce the  
2019 Alabama's Best Practices  
*Call for Nominations*



**“Celebrating 25 Years of Innovative Choices:  
Simple Solutions To Common Challenges”**

Each day, long term care nursing facilities across the state and nation face common challenges in providing residents with the highest quality of care. Today, the Alabama's Best Practices Steering Committee invites facilities statewide to identify and nominate their most innovative and “Best Practice” in this exciting program!

Nursing facilities have common challenges, just as any other group. Some of these solutions may seem simple, as shown by so many of the past presentations you still hear about today. Sometimes people call an idea “simple” because it seems easy to do or is inexpensive.

We invite you to identify interventions which you would describe as “Innovative Choices: Simple Solutions for Common Challenges.” Some examples of common challenges which you face daily include (but are not limited to):

- ◆Ways to involve male residents
- ◆Ways to serve younger residents
- ◆Ways to identify unusual resources
- ◆Ways of recruiting/utilizing volunteers
- ◆Ways to meet transportation needs
- ◆Ways to improve community involvement/interaction

All Best Practice nominations should be the result of an interdisciplinary effort and should address common long-term care challenges with creativity and innovation. For more details on how to make a nomination and exactly what is involved, please see the reverse side of this flyer, or contact:

**Pam Penland (205) 594-5148**  
**Best Practices Director**

**REMEMBER – ALL NOMINATIONS MUST BE POSTMARKED  
NO LATER THAN FRIDAY, AUGUST 23, 2019!!**

**MARK YOUR CALENDARS –**  
**2019 ALABAMA'S BEST PRACTICES PROGRAM – MONDAY, December 9, 2019**  
**Hyatt Regency/Wynfrey Hotel – Birmingham, Alabama**

## **Guidelines for 2019 “Alabama’s Best Practices” Nominations:**

*Each nomination must be interdisciplinary – At least two different disciplines must have been involved in developing and implementing the Best Practice;*

*Each nomination must identify creative, innovative intervention(s) which have promoted and enhanced the quality of care in our state’s long-term care facilities and/or can identify any intervention which improved residents’ lives or living conditions;*

*Each nomination must be submitted or authored primarily by employees of the facility or facilities that make the nomination – contractors, consultants, vendors, etc. can participate in planning or implementing the Best Practice, but cannot be the primary author of the nomination;*

*Each nomination must exclude any information that would identify the facility to a Professional Panel Reviewer, such as facility name, location, bed size, staff names, etc.;*

*Each facility may submit up to two Best Practice nominations (individual or group);*

### **Details Regarding the Nomination:**

Nomination can be no more than ten (10) pages in length, double-spaced in no less than 10-point type on white paper.

**YOUR BEST PRACTICE NOMINATION MUST NOT INCLUDE YOUR FACILITY NAME! ONLY THE COVER SHEET MAY CONTAIN YOUR FACILITY’S IDENTITY!**

Up to six (6) narrative pages are allowed to answer the following questions:

1. In 100 words or less, briefly describe your Best Practice.
2. What problem does your Best Practice address, and what is its primary purpose?
3. What group(s) of residents and others are involved in your Best Practice and how does it work? (Who and how many are helped, what are the benefits to these people, and what methods or procedures/protocols are used to get results?)
4. What has your Best Practice accomplished and how have you been able to tell this? (You are permitted to give numbers and/or use specific “before and after” examples)
5. What problems, obstacles, or challenges might other facilities face in replicating part or all of your innovation? Were there any adverse effects or any ways that things turned out differently than you had planned? Do you know of any other facilities which have tried this or a similar best practice idea?
6. What was the cost to implement your Best Practice (include dollars, staff, supplies, equipment, etc.)? How did you pay for it?
7. What are the reasons you consider this Best Practice to be excellent and innovative?

Up to four (4) pages are allowed to contain pictures, articles, charts/graphs, or other materials which support your nomination.

E-mail your complete nomination including photographs, etc. to Katrina Magdon at [kmagdon@anha.org](mailto:kmagdon@anha.org). ***E-mail nominations are preferred*** but hard copies will be accepted if nine (9) copies of the complete nomination, including the attached cover sheet, are mailed in a flat envelope marked “Confidential” to: Alabama’s Best Practices Program, c/o Pam Penland, Health Care Inc., P.O. Box 130, Ashville, Alabama, 35953.

**REMEMBER – ALL NOMINATIONS MUST BE POSTMARKED  
NO LATER THAN FRIDAY, AUGUST 23, 2019!!**



## 2019 “Alabama’s Best Practices” Nomination

### COVER SHEET

This cover sheet must be completed and included as the TOP SHEET of each facility’s “Alabama’s Best Practices” nomination. ***This is the ONLY PAGE which should include any identifying information about the attached nomination.***

Facility Name: \_\_\_\_\_

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

\_\_\_\_\_

Business Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Name of Principal Contact for this nomination: \_\_\_\_\_

Contact Title/Position: \_\_\_\_\_

Other Nomination Authors & Their Position/Titles:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

County in which facility is located: \_\_\_\_\_

Local Newspaper: \_\_\_\_\_

Name of local State Senator(s): \_\_\_\_\_

Name of local State Representative(s): \_\_\_\_\_