



## LeadingAge Oklahoma Music for the Ages

### Participation Agreement

Nursing Home Name: \_\_\_\_\_

We would like to take advantage of this voluntary opportunity to participate in the LeadingAge Oklahoma Music for the Ages – a Music & Memory<sup>SM</sup> program. By agreeing to participate in this project, we are also agreeing to participate in the research component for the duration of the grant.

We understand the project is divided into two phases.

- Phase 1 begins August 2016 with implementation through June 2018.
- Phase 2 begins May 2017 with implementation through June 2018.

LeadingAge Oklahoma will assign the participation phase for each nursing home. I have indicated our preference order for phase assignment as a number one (1) for preferred option and number two (2) for the second preference in the following boxes:

- Phase 1, the duration of participation will be up to 23 months from August 2016 through June 2018.
- Phase 2, the duration of participation will be up to 14 months from May 2017 through June 2018.

As a nursing home that is participating in the LeadingAge Oklahoma Program, we understand we will receive instruction and support in implementing LeadingAge Oklahoma Music for the Ages program for our nursing home, subject matter expertise and technical assistance in Music & Memory as we bring personalized music to our residents. For financial assistance with certification and equipment costs, we confirm that we are a Medicare &/or Medicaid-certified nursing home.

Once approved as a participating nursing home I understand we will receive at no cost:

- Certification for staff through three 90-minute training webinars and support provided by MUSIC & MEMORY<sup>SM</sup> for one year. A minimum of five team members as described below must be certified. However, others are encouraged to become certified as well.
- Webinars and support from LeadingAge Oklahoma throughout the project period.
- 20 iPod Shuffles, headphones and AC adapters. One external speaker and one splitter.
- One laptop computer for use solely with the LeadingAge Oklahoma Music for the Ages ~ A Music and Memory, Inc. Program (separate financial eligibility – see below).
- One \$150 iTunes gift card to begin your music library.
- One perpetuity license of *Alive Inside* for in-house use in training staff and families.
- Two free registrations for each of three seminars on dementia care given by LeadingAge Oklahoma. CEUs are available for an additional fee.
- Assistance with a Donation Program to help obtain additional equipment and music to expand our program.

- LeadingAge Oklahoma will reach out to state, regional and local groups to develop and encourage participation in an Intergenerational Volunteer Program. This will assist in obtaining students/adults to help with the implementation of the technology portion of the program.

The participating nursing home agrees:

- At a minimum, to ensure the two (2) project leads and team members, attend the LeadingAge Oklahoma Orientation Webinar.
- To ensure that a minimum of five staff, as identified below, attend three *MUSIC & MEMORY<sup>SM</sup>* Certification training webinars (other staff are highly encouraged to attend).
- To submit information for the research component of this project (refer to the *Research Information Summary and ongoing Surveys of staff, family and participants*). If at any point, a decision is made to stop participation in the research component, or fail to comply with participation requirements in any three months, we will be dropped from the program and will be required to return all equipment and the deposit fee of \$250.00 will NOT be refunded.
- To replace any equipment provided through the LeadingAge Oklahoma Music for the Ages program should it become damaged or lost. Agree to reassign the equipment to a new resident should the original person no longer reside in the nursing home; this includes developing a personalized playlist for the new resident.
- To conduct an individualized assessment for each participating resident to determine among other things; interest, abilities, usage needs, preferred usage times and to determine individual music playlist.
- The team will participate in the LeadingAge Oklahoma monthly webinars.

Our nursing home requests a laptop FOR EXCLUSIVE USE with the LeadingAge Oklahoma Music for the Ages ~ A Music and Memory<sup>SM</sup> Program.

- By checking here, we are requesting a laptop to be used solely for the LeadingAge Oklahoma Music for the Ages – a Music & Memory<sup>SM</sup> program. A separate letter showing need is attached to this agreement. We understand LeadingAge Oklahoma will award the laptop at its sole discretion.

Provide a minimum of five employees to complete MUSIC & MEMORY<sup>SM</sup> Certification training and implement the program consistently, including: one representative from each of the categories listed below. Two of these representatives must be designated as project leads – a primary and an alternate. Executive leadership (i.e., Licensed Nursing Home Administrator or other organization-level executive with decision-making authority).

1. \_\_\_\_\_ (Name) Executive Leadership (i.e., Licensed Nursing Home Administrator or other organization-level executive with decision-making authority).
2. \_\_\_\_\_ (Name) Nursing Leadership (i.e., the Director of Nursing or their designee, Director of Staff Development).
3. \_\_\_\_\_ (Name) Activities department (i.e., Activities Director).
4. \_\_\_\_\_ (Name) CNA
5. \_\_\_\_\_ (Name) One other staff of choice.

(Indicate which two of these are project leads with an \*1 and \*2)

Primary Project Lead Phone Number & Email

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Alternate Project Lead Phone Number & Email

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Nursing Home Name Address & Phone Number

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Mailing address (if different than physical address)

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A refundable deposit fee of \$250.00 is required at the time this agreement is signed. If our nursing home does not complete the project as agreed, our deposit of \$250.00 will not be refunded.

As a participating nursing home, we agree to the participation requirements described above and meet all project expectations as outlined herein.

Signature of Nursing Home Administrator

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Date

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Printed Name of Administrator

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Printed Name of Primary Project Contact (if different)

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Job Title of Primary Project Contact

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Nursing Home Provider Number

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Street Address, City, County, ZIP

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Phone Number and Email Address for program communication

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Send completed form, deposit fee of \$250.00, a letter showing need for the laptop (if applicable) to:  
LeadingAge Oklahoma – Music for the Ages  
PO Box 1383  
El Reno, OK 73036-5699

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