Models of Culture Change in the United States

Policymakers and other funders should assess the substance of a nursing home’s policies and practices, rather than buying into a particular culture change brand. Consider the following principles:

- True change in the culture of a nursing home should be a dynamic process, responsive to the evolving needs and goals of the residents, direct care staff, and community. Simply overlaying a model of culture change in a traditional facility or rotely following a commercial culture change model is unlikely to fully meet the needs and wishes of residents.
- A promise made is not always a promise kept. A facility may advertise itself as following, or associated with, a particular model of culture change. However, that does not necessarily mean that positive change is being implemented in the lives of residents and staff.

Not all nursing homes marketed as culture change provide real culture change. Still, it is useful to know the major commercial models of culture change, as they offer key principles and practices that support meaningful reform.

Following are the main culture change models in the U.S. Note: we provide descriptions of the basic tenets of each model, not valuations of the extent to which culture change facilities implement the tenets of the models.

1. **The Eden Alternative**: The Eden Alternative network was founded in 1992 as a solution to “the three plagues” of institutionalized elders: loneliness, helplessness, and boredom. There are now 270 registered Eden Alternative nursing homes in the U.S., Canada, Europe, and Australia. The model espouses “Ten Principles” emphasizing community, companionship, purpose in life (giving to others), spontaneity, empowerment, a collaborative culture, and leadership that supports lasting change. It is characterized by units of 10-12 private rooms, with the units interconnected to make a larger community. The homes often include gardens, indoor plants, and companion animals. They foster connections between children and the older adults, such as by offering onsite day care for staff’s children. Caring for the animals and the children’s activity are meant to bring joy and spontaneity to the lives of residents, as well as purpose and responsibility.

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2. **The Green House Project**: The Green House model, established in 2001, focuses on physical infrastructure to create a homelike environment. Each home consists of private rooms with private baths located around a living area with a hearth and an open kitchen and dining room, and easy access to a courtyard. The residents, called Elders, decide on their daily schedules and care plans and are at the center of collaborative decision-making for the house. The direct care assistants, called Shahbazim, work in self-managed teams. They have versatile duties, including personal care, meal planning and preparation, activities, and management of the daily operations of the home. Shahbazim have consistent assignment to residents and work collaboratively with the clinical team. A Guide works from outside the home and supervises the work of the Shahbazim that is not related to resident care, acting primarily as a coach. Registered Green House homes are expected to adhere to Green House quality standards and design guidelines. The homes may be located in residential communities or near “legacy” traditional nursing homes or senior living campuses. There are currently approximately 300 Green House homes established in the U.S. (87% licensed as SNFs).10

3. **The Household Model**: This model was founded in 1996 and is based in Milwaukee, with consulting provided by Action Pact. The first home opened in 1997 in Minnesota, and now more than 400 homes are part of the Household Model network. Homes have 10 to 20 residents and share many of the features of Green House homes: private bedrooms, each with bathroom and shower; shared living rooms; large tables for communal dining; open kitchen areas; and easy access to the outdoors. The physical environment, the philosophy of care, and the workforce model are also similar to those of the Green House homes. The relationship between the elder and direct caregiver (often referred to as a care partner) is the heart of the household model.11

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4. **The Pioneer Network**: While the Pioneer Network is not a specific culture change model, it offers valuable resources which we believe are worthy of inclusion in this brief. This coalition of long-term care providers was founded in 1997 to promote and advocate for person-centered care and culture change in U.S. nursing homes. The Pioneer Network hosts an online resource library of toolkits and videos on culture change topics, hosts an annual conference on culture change, and conducts public policy advocacy. The Network’s “**Artifacts of Culture Change**” is a toolkit that facilities can use to guide implementation of key elements of culture change, including “resident-direct life” and “home environment and accommodation of needs and preferences.”

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