

Nursing Home Culture Change: Key Resources

LTCCC's brief for policymakers, "[Consumer Perspectives on Nursing Home Culture Change](#)," relies heavily on the following resources. The links below provide access to an abridged list of resources, some of which are full articles, and others abstracts. See LTCCC's brief on nursing home culture change for a complete list of resources.

"Models for Long-term Residential Care: A Summary of the Consultants' Report to Long-Term Care Homes and Services, City of Toronto," Pat Armstrong et al., (April 2019). Available at <https://www.toronto.ca/legdocs/mmis/2019/ec/bgrd/backgroundfile-130891.pdf>.

- An academic team led by Pat Armstrong of the University of York in Canada compares the elements of models that seek to transform long-term care (including dementia care) and reviews literature evaluating these models. The team notes the difficulty of assessing the impact of care models using conventional research methods. Research produced uneven and sometimes conflicting evidence overall, although all models showed some improvement in residents' quality of life and quality of work life for staff. The team concluded that the mixed evidence leads to recommendations not for a single model but for a strategy to learn from all models, adopting promising practices tailored to specific homes and populations.

"Promising Practices in Long-Term Care: Ideas Worth Sharing," Donna Baines and Pat Armstrong, editors, (2016). Available at https://policyalternatives.ca/sites/default/files/uploads/publications/NationalOffice/2015/12/PromisingPractices_online.pdf.

- An international team of researchers developed case studies in long-term care homes in the U.S., Canada, the U.K., Germany, Sweden, and Norway. Teams conducted qualitative research in the homes in search of promising practices that support long-term care as a desirable and equitable option for individuals and families.
- E-publications in this series include "Exercising Choice in Long-Term Residential Care," Pat Armstrong and Tamara Daly eds (2017), and "Physical Environments in Long-Term Care: Ideas Worth Sharing," Pat Armstrong and Susan Braedley, eds., (2016). Available at <https://reltc.apps01.yorku.ca/publications>.

"Inside the Green House 'Black Box': Opportunities for High-Quality Clinical Decision-making," Barbara Bowers et al., (February 2016). Available at <https://pubmed.ncbi.nlm.nih.gov/26708135/>.

- This qualitative study reviewed care processes in 28 Green House homes and how these processes may relate to hospital transfer rates. The study found significant variation in how the care model was implemented. Staff in homes with lower transfer rates maximized opportunities to identify and respond to changes in residents' conditions,

whereas staff in homes with higher rates failed to do so and failed to support collaborative care processes.

“Sustaining Culture Change: Experiences in the Green House Model,” Barbara Bowers, Kimberley Nolet and Nora Jacobson, (February 2016). Available at <https://onlinelibrary.wiley.com/doi/10.1111/1475-6773.12428>.

- Based on staff interviews and observations, this study found that eleven Green House homes varied in their ability to sustain the model’s principles and practices. Leadership’s consistent support of the collaborative approach to decision-making was key to sustaining the model.

“Culture Change Models and Resident Health Outcomes in Long-Term Care,” Nikki L. Hill et al., (2011). Available at <https://pubmed.ncbi.nlm.nih.gov/21342422/>.

- Literature review of studies examining the effect of culture change models on long-term care residents’ physical and psychosocial health. Evidence of physical health outcomes was inconsistent, but studies demonstrated potential psychosocial benefits for residents.

“Financial Implications of the Green House Model,” Robert Jenkins et al., (2011). Available at http://www.chipartners.net/wp-content/uploads/2012/10/Green.House_Article.pdf.

- Cost analysis of Green House homes found that the model was twice the capital cost of traditional medical model nursing homes, but equivalent to other small house homes with private rooms for residents. Staffing costs were equivalent overall to transitional homes. High occupancy and more private pay residents have offset the costs for Green House homes.

“Does the Introduction of Nursing Home Culture Change Practices Improve Quality?,” Susan C. Miller et al., (August 2014). Available at <https://agsjournals.onlinelibrary.wiley.com/doi/10.1111/jgs.12987>.

- This study of 824 U.S. nursing homes involved in culture change practices between 2005 and 2010 found that high practice implementation appears to result in significant improvements in some care processes and outcomes.

“Barriers and Facilitators to Adopting Nursing Home Culture Change,” Denise A. Tyler and Michael J. Lepore, (November 2017). Available at <https://cdn.mdedge.com/files/s3fs-public/Document/November-2017/JCOM02411508.PDF>.

- This review of literature on nursing home culture change, relates to its implementation and barriers to change. The study concludes that management practices that include good communication, providing training and education, and supportive leadership, is needed to support staff implementation of culture change practices and overcome staff resistance to change.

“Consequences of Empowered CNA Teams in Nursing Home Settings: A Longitudinal Assessment,” Dale Yeats and Cynthia Cready, (2007). Available at <https://academic.oup.com/gerontologist/article/47/3/323/562696?login=false>.

- This study uses both qualitative and quantitative methods to evaluate the effects of empowered work teams of certified nurse aides (CNAs)—within long term-care settings. A variety of modest, positive effects: increased CNA empowerment; better CNA performance; improved resident care and choices; improved procedures, coordination, and cooperation between CNAs and nurses; and possibly reduced turnover.

“New Evidence on the Green House Model of Nursing Home Care: Synthesis of Findings and Implications for Policy, Practice, and Research,” Sheryl Zimmerman et al., (February 2016).

Available at <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5338207/>.

- This review synthesizes the findings of literature evaluating Green House homes between 2005 and 2014. The review finds that implementation of the Green House model is inconsistent, but that there are numerous ways in which Green House homes differ from comparison homes, including more consistent staffing and more time with direct care givers. The review summarizes barriers to implementation and sustainability, quality of care and quality of life measures, Medicare spending relative to comparison homes. The authors offer policy and practice recommendations, noting that the findings and implications are often applicable to other culture change initiatives.