

THE ARTIFACTS OF CULTURE CHANGE 2.0

Originally funded by CMS 2006.

2.0 version funded by State of Maryland CMP grant 2021.

Also, now Artifacts of Culture Change – Assisted Living (ACC-AL)

A self-assessment, benchmarking inspirational, educational, implementation tool.

Simple tally/percentage format:

- Fully implemented
- Partially implemented
- Not a current practice

A measurement tool - shows improvements/data for research - before and after culture change implementation. Could be added to the 5-Star Rating system....

CMS regulation references showing support of culture change practices.

Guidance document explaining practices such as welcoming, life stories, real foods, Dining Practice Standards, LSC 2012 allowances for chairs in halls, no locked living areas, privacy-enhanced shared rooms, move-in process, families as care partners/not visitors, troubleshooter, and non-institutional language.

Artifacts Sections/ Goals for Transformed Culture

- Resident-directed Life
- Being Well Known
- Home Environment and Accommodation of Needs and Preferences
- Family and Community
- Leadership and Team Member Engagement

All at the Artifacts web page...

www.pioneernetwork.net/artifacts-culturechange

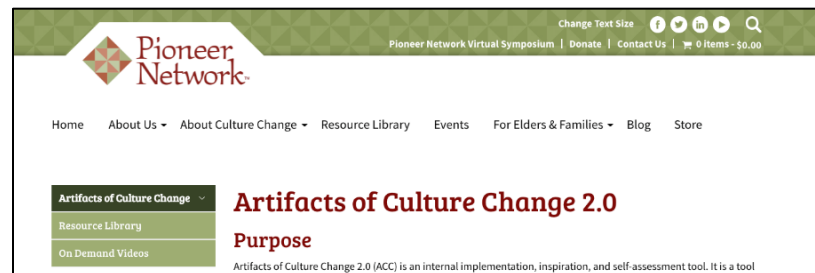
Get the ACC 2.0 and its Guidance, ACC-AL and its Guidance, tutorial videos, links to free resources, links to educational webinars and much more.

ARTIFACTS OF CULTURE CHANGE 2.0

HOME NAME _____ DATE _____

CITY/ _____ STATE/OTHER _____ CURRENT NUMBER OF RESIDENTS _____

RESIDENT-DIRECTED LIFE <i>For each item, check the column that represents your home.</i>	FULLY IMPLEMENTED <small>Present on a consistent basis or established as available for all residents.</small>	PARTIALLY IMPLEMENTED <small>Present on a less than consistent basis or established for any number less than all residents.</small>	NOT A CURRENT PRACTICE
1. New residents and their families are welcomed* by team members/managers, introduced to the home, and educated about the home's culture change philosophy of enhancing residents' control over their lives, rights, amenities available, and choice of schedules.	<input type="radio"/> Fully implemented	<input type="radio"/> Partially implemented	<input type="radio"/> Not a current practice
2. The home offers at least one of the following styles of dining that provide for resident choice: Restaurant style where residents' orders are taken; Buffet style where residents help themselves or tell team members what they want; Family style where food is served in bowls on dining tables where residents help themselves or receive assistance.	<input type="radio"/> Fully implemented	<input type="radio"/> Partially implemented	<input type="radio"/> Not a current practice
3. Each meal is available for at least 2 hours, and residents can come and go when they choose. (Refer to CMS F809 Frequency of meals, Alternate dining times)	<input type="radio"/> Fully implemented	<input type="radio"/> Partially implemented	<input type="radio"/> Not a current practice
4. Residents are supported to prepare and/or serve food per their preferences and abilities (in addition to cooking groups).	<input type="radio"/> Fully implemented	<input type="radio"/> Partially implemented	<input type="radio"/> Not a current practice
5. Snacks/drinks are easily available for residents at all times without having to ask. I.e., in a stocked pantry, refrigerator or snack bar. (Refer to CMS F809 – Frequency of meals / snacks at bedtime)	<input type="radio"/> Fully implemented	<input type="radio"/> Partially implemented	<input type="radio"/> Not a current practice
6. In addition to snacks (described in #5), residents can order food from the kitchen 24 hours a day, and team members are empowered to provide food upon	<input type="radio"/> Fully implemented	<input type="radio"/> Partially implemented	<input type="radio"/> Not a current practice



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