



ORGANIZATIONAL INTEGRATION TOOLKIT

Your Path to
WELLBEING

Ariadne Labs and AgingIN Partnership

This Organizational Integration Toolkit was developed through a close collaboration between Ariadne Labs and AgingIN, combining Ariadne Labs' evidence-based approach to improving systems of care with AgingIN's deep expertise in person-directed living and culture transformation in long-term care. Together, we have created practical, scalable resources designed to help organizations confidently adopt and sustain the Wellbeing Toolkit. Our shared goal is to make wellbeing practices accessible, actionable, and achievable across diverse care settings—supporting teams in strengthening resident experience, enhancing staff engagement, and embedding wellbeing into everyday operations.





ORGANIZATIONAL INTEGRATION TOOLKIT

Bringing Wellbeing to the Center of Care

This toolkit is designed to help long-term care communities make wellbeing a shared, sustained practice—not just an idea or one-time initiative. It builds on the Ariadne Labs Wellbeing Toolkit and helps you move from training to transformation. Whether you're getting started or building on person-directed efforts already in motion, this resource offers practical, adaptable tools to guide your next steps.

✦ You'll find:

- ✓ *Tools to train and support staff in honoring what matters most to elders.*
- ✓ *Templates to integrate wellbeing into care planning, huddles, documentation, and supervision.*
- ✓ *Resources to align leadership beliefs, daily behaviors, and organizational systems.*
- ✓ *Checklists to support implementation and track progress.*



This toolkit doesn't assume a blank slate. Instead, it's designed to meet you where you are and help your team move forward—together.

What's Inside? (Table of Contents)

Each section includes practical strategies, real-world examples, and a focused checklist to help your team reflect, act, and adapt as needed.



- 1 Getting Started**
- 2 Leadership Team Integration**
- 3 Preparing Your Wellbeing Champion(s)**
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- 5 Honoring Wellbeing in Daily Practice**
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- 7 Aligning Beliefs, Behaviors, & Systems**
- 8 Tools, Worksheets, & Planning Templates**

1

GETTING STARTED

Integrating Wellbeing into the Care Conversation

This toolkit is designed to help long-term care organizations bring wellbeing to life—making wellbeing a shared responsibility, not just a philosophy. It supports teams in shifting from task-based routines to more human-centered, purpose-driven care.

Whether you're just getting started or building on previous person-directed efforts, this resource will help you move beyond one-time training to embed wellbeing into daily systems, workflows, and conversations.

Why Wellbeing?

Wellbeing is at the heart of person-directed eldercare. When older adults experience meaning, autonomy, social connection, and security – their quality of life improves (Kane, 2001; NASEM, 2022). Staff become more engaged in their work and the quality of care improves too (White-Chu et al., 2009; Stone & Harahan, 2010).

Embedding wellbeing into your systems:

- Helps staff understand what truly matters to each resident.
- Supports more personalized and effective care.
- Aligns with regulatory guidance, quality outcomes, and family expectations.
- Reduces burnout by reconnecting staff to purpose and relationships.

Wellbeing is also essential for your team. When staff feel connected, respected, and purposeful, they are more likely to thrive in their roles.

Inside the Organizational Integration Toolkit You'll Find:

- Tools to train and equip staff
- Templates to embed wellbeing into documentation, huddles, and care planning
- Guidance to build accountability and ownership across teams
- Worksheets to align your systems with your values

You don't need to start from scratch. This framework is flexible and designed to adapt to your community's size, structure, and existing priorities.



Who is This Toolkit For?

- Leadership teams looking to embed person-directed care practices.
- QAPI and clinical leaders seeking better resident outcomes and team engagement.
- Wellbeing champions charged with sustaining change over time.
- Direct care staff and educators who want tools that are simple, meaningful, and work in real-world settings.
- It can be used as a companion to existing QAPI, onboarding, and care planning initiatives.

About the Wellbeing Framework

The Wellbeing Framework introduced in the Ariadne Labs Wellbeing Toolkit includes four domains:

1. **Meaning** – Feeling like life has purpose and value.
2. **Autonomy** – Feeling in control of one's day and choices.
3. **Social Connection** – Feeling seen, heard, and part of a community.
4. **Security** – Feeling physically and emotionally safe.

This toolkit helps you weave those domains into your care systems, staff workflows, and resident engagement practices.



Video Resources



This organizational integration toolkit includes a series of video resources: animated videos to assist in the development of a wellbeing culture at your community. Before diving in, we encourage leadership teams to view the video, *Bringing Wellbeing to Life: A Guide for Leadership*, which explains:

- How the toolkit was developed.
- Why wellbeing matters for your team and residents.
- How this approach aligns with resident goals, preferences, and priorities, regulator priorities, and what families value.

Checklists

Using the Section Checklists

Each section of the Organizational Integration Toolkit includes a practical checklist to support your team's implementation. These checklists are not about perfection—they're about creating shared clarity and momentum.

You can use them to:

- Guide your work as you move through each section.
- Capture key actions and decisions along the way.
- Support alignment across leadership, Champions, and teams.

Treat the checklist as a living tool. Revisit it in team huddles or leadership meetings. Use it to celebrate progress and identify what's next as you build a more integrated, person-directed culture.

Wellbeing Integration Kickoff - Section 1 Checklist



- ☐ We've introduced the purpose and value of the toolkit to leadership.
- ☐ Our leadership team understands the definition of wellbeing and the four domains: meaning, autonomy, social connection, and security.
- ☐ We've discussed how wellbeing relates to our current challenges and opportunities in eldercare.
- ☐ We've begun identifying how this toolkit aligns with our organizational values and existing person-directed living efforts.

2

LEADERSHIP COMMITMENT & READINESS

Leader Actions that Build Momentum:

- Model commitment: Share why wellbeing matters to you.
- Align expectations: Build consensus across departments and disciplines.
- Equip and support: Remove barriers and allocate time and tools for staff success.
- Make it stick: Embed wellbeing into systems and processes (not just training).

Strong integration starts with strong leadership. When leaders are visibly engaged and aligned, it sends a powerful message that wellbeing is not an “extra”—it’s central to how we define quality and success.

This section helps leadership teams reflect on their current practices, clarify what success looks like, and prepare the organization for rollout. Use the questions in the Appendix A worksheet during a leadership meeting, strategic planning session, or retreat.



Use Appendix A: Leadership Reflection Worksheet to assess your readiness and define your vision.

Three Steps to Integration

1

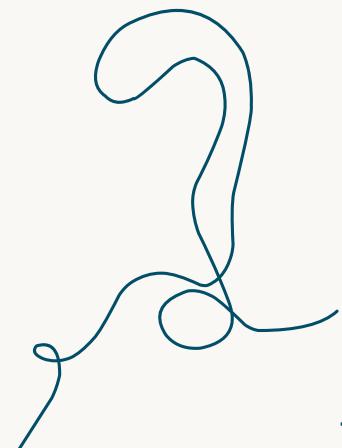
Identify a Champion and Define Rollout Goals

- Will you start in one household or neighborhood?
- Will you focus on new residents or upcoming care plan reviews?
- What success can you aim for in 90 days?

Your first action is to name a Wellbeing Champion to help coordinate rollout and staff engagement. Then, define the scale and timeline of your implementation.

Leadership Reflection Questions:

- What does “wellbeing” currently look like in our organization?
- How do we learn what matters to residents and staff?
- Who naturally models these principles now?
- What current initiatives might align with this work?



2

Train and Engage Staff

Use the 30–45 minute “huddle-style” training session in Section 4 to introduce wellbeing concepts and the conversation guide to your team.

Tips:

- Begin with a team you know will be receptive and reflective.
- Pair the short videos with real stories.
- Ask the Champion to model the process.
- Use the wellbeing framework with a team while discussing an elder at your community whose wellbeing seems compromised.

Leadership Reflection Questions:

- What does successful staff engagement look like to us?
- Who will lead the first training sessions?
- How can we make space for conversation in a busy environment?



- *Video #1: What is Wellbeing and Why It Matters?*
- *Video #2: The Four Domains of Wellbeing*

3

Align Key Systems

Sustainable change means building wellbeing into how you operate, not just what you say.

Embed wellbeing prompts into:

- Care planning and interdisciplinary team (IDT) meetings.
- New resident orientation.
- Daily huddles or team standups.
- QAPI meetings and tracking efforts.

Leadership Reflection Questions:

- Where do we already talk about quality of life—and where could we talk more?
- What systems (templates, policies, team routines) need adjustment?
- Who needs to be involved in reviewing our tools and forms?

Leadership Team Integration - Section 2 Checklist



- ☐ Leadership reflection completed (Appendix A) and shared with core team.
- ☐ 90-day rollout goals and initial implementation scope defined.
- ☐ Kickoff meeting plan developed, and initial stakeholders identified (e.g., QAPI, IDT).
- ☐ Existing documentation tools reviewed for alignment with wellbeing framework.
- ☐ Opportunities to embed wellbeing in existing systems (care planning, orientation, QAPI) identified.



3

PREPARE YOUR WELLBEING CHAMPION(S)

Wellbeing Champions are staff members who help bring the framework to life. They support peers, reinforce practices, and keep the focus on what matters most to residents. Selecting the right people and giving them clarity and tools is critical for success.

This section supports your organization in identifying, orienting, and supporting Champions who will help lead implementation



See Appendix B: Wellbeing Champion - Role Description for the full role description and orientation guidance.

Champion Responsibilities

Wellbeing Champions will:

- Model use of the toolkit including starting conversations, documenting insights, and adjusting care where possible.
- Reinforce practices during huddles and team meetings (e.g., asking, “What wellbeing priority can we honor today?”).
- Check documentation practices across departments—ensuring insights are getting into the care plan or communication systems.
- Coach others through informal reminders, encouragement, or short refreshers (using the coaching cards in Appendix E).
- Track progress for QAPI or performance metrics using tools from Appendix F: Wellbeing Integration Annual Review Template.

This is not a full-time role, nor does it need to come from leadership. The goal is to integrate wellbeing into how the team works—not add another layer of oversight.

Who Makes a Great Wellbeing Champion?

A wellbeing champion doesn’t have to be a supervisor or a formal leader.

Resource the selected Wellbeing Champion(s) with Appendix E: Printable Coaching Reminder Cards to equip them to have coaching conversations with team members.

Some of the most effective champions are trusted team members who:

- Are naturally curious and observant about what matters to residents and coworkers.
- Are seen as approachable and respected by peers.
- Informally influence culture through their example, encouragement, or voice in huddles.
- Believe in the power of person-directed living and are willing to grow in their own skills.
- Are comfortable trying something new—even without all the answers.
- Can communicate across departments, helping bridge perspectives.

Example: A seasoned CNA who notices when residents light up during certain activities, shares those observations in huddles, and encourages coworkers to support those moments—even without being told to. Or a med tech who takes time to understand what "feeling safe" looks like for each resident and gently helps new staff learn those details.

You might also consider co-champions—such as a pairing between clinical and non-clinical staff—to reinforce shared responsibility across the care team.



Use Appendix B: Wellbeing Champion - Role Description to select and orient the wellbeing champion(s)

Champion Launch - Section 3 Checklist



- ☐ Champion(s) selected by leadership using guidance in Appendix B.
- ☐ Role and responsibilities reviewed with each Champion.
- ☐ Champion orientation completed using toolkit and role description.
- ☐ Champion has access to all key tools (conversation guide, coaching cards, templates).
- ☐ Expectations clarified for modeling, prompting, and documenting wellbeing insights.
- ☐ Regular check-ins scheduled between the Champion(s) and supervisor or implementation lead.
- ☐ Champion has been encouraged to gather and share stories, wins, and challenges with leadership.

4

STAFF EDUCATION & THE POWER OF CONVERSATION

Introduce the Wellbeing Approach + Conversation Guide

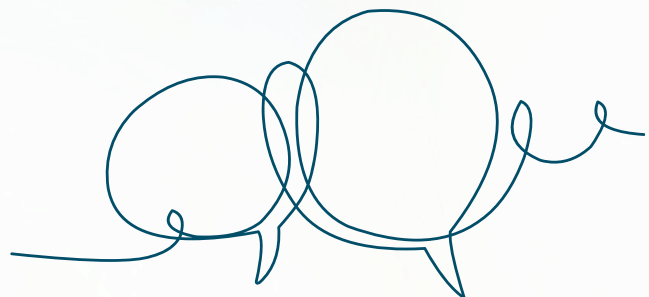
This section introduces your team to the concept of wellbeing as a central lens for person-directed care—and shows how to begin using the wellbeing conversation guide as a practical first step.

The goal is to help the team understand that wellbeing is not a separate task, but part of every interaction, decision, and plan. Team members are likely already attending to the residents' wellbeing needs but may not have the tools to document and share that knowledge, to build it into the fabric of care.

Trainer Tip: This session can be delivered by the Wellbeing Champion, the staff educator, or a member of the leadership team. Use your discretion and tailor the tone and examples to your organization's context.



Use Appendix C: Wellbeing Conversation Guide to support conversation, connection, and documentation.



Training Objectives - At the end of this session, participants will:

- Understand what wellbeing is and why it matters in eldercare.
- Recognize the four wellbeing domains and their application in care.
- Learn how to use the conversation guide to gather wellbeing information.
- Identify ways to integrate wellbeing into care routines and team communication.

Introduce the Wellbeing Approach + Conversation Guide

Segment	Description
1. Welcome & Why This Matters (5 minutes)	Connect the session to the organization's mission and the human side of caregiving.
Instructions: • Welcome participants to the session and review the purpose for the discussion: to lay a foundation for wellbeing at the community. • Play video 1: What is Wellbeing and Why Does it Matter? Sample talking points: • What stood out to you? • Do any of the stories remind you of residents you care for? • Wellbeing isn't just a feeling—it's a foundation for meaningful, person-directed living.	
2. Wellbeing Framework Overview (8 minutes)	Introduce the 4 domains of wellbeing using a handout or slide. Use real-life LTC examples.
Instructions: • Play video 2: The Four Domains of Wellbeing. • Pass out the 1-page Domain Worksheets. • Ask for reactions to the video and the 1 page summaries. Use the questions below as needed. The goal is for the learners to be able to relate to the importance of wellbeing for their own lives as well as understanding how vital wellbeing is for the residents. Sample talking points: • Which of the domains feel most especially important to you? • Which of the domains feels most especially important to the residents you support? • What does it look like when someone doesn't have _____ domain? (select any of the four domains).	
3. Conversation Guide Walkthrough (6 minutes)	Show the conversation guide. Model a short wellbeing conversation (see sample script below).
Instructions: • Play video 3: How to Talk About Wellbeing. • Share the conversation guide. Sample talking points: • Conversation is how we connect with residents and learn about what matters most to them. • Deep knowing of residents and their individual needs happens over time and generally not through just one conversation. • Think of each conversation as adding a puzzle piece to the picture of each resident's wellbeing portrait. • This guide is meant to be flexible. You don't need to read it word for word. It's here to support your natural way of connecting.	

Segment	Description
Share these tips as needed: • Be curious, not clinical. • Break the conversation into small parts over time. • Document key themes, not word-for-word answers. • You know the residents best—this is a way to learn even more about what matters to them. • For someone with dementia, you might only explore one question at a time—or use music, touch, or familiar photos to guide the conversation. • It's okay to break the conversation up over time. You might learn something in the dining room and another piece during a walk.	
4. Guided Practice (10-14 minutes)	Use roleplay or a case example to practice applying the guide and naming domains. (Select one of the below options).
Case Study Read aloud: Case Example – Mr. Lewis Mr. Lewis is a retired math teacher who recently moved into the community. He's quiet and tends to stay in his room. In a brief conversation, he mentions he used to play chess with his grandson every Sunday. Discussion Prompts: • What wellbeing domains might be at risk? • What small changes could support his wellbeing? • What would you want to learn more about? Alternatively, select a resident living in the community and present their information as a case example. Debrief Questions if selecting a resident from the care community Understanding the Resident: • What do we already know about this resident's wellbeing? • Where is their wellbeing most supported or most at risk? Applying the Framework: • Which wellbeing domains seem most important to them right now? • Did anything surprise you as you considered their experience? Next Steps: • What simple changes could better support this resident's wellbeing? • How could we share or document this insight with the rest of the team?	
Partner Roleplay • Use a blank conversation guide (Appendix C) and have one person act as the resident. • Prompt: "Tell me about a time you felt really proud of something." • After 5 minutes, switch roles and debrief. Debrief Questions 1. Reflection on the Experience • What was it like to play the role of the resident? • If you were the one asking the questions, what felt natural? What felt challenging? • Did anything surprise you in the responses you heard?	

Segment	Description
2. Connection to the Four Domains • Which of the wellbeing domains came up during your conversation? • How could you tell what mattered most to the person, even if they didn't say it directly? • Did the guide help you uncover something meaningful or unexpected? 3. Communication & Approach • What strategies helped build connection during the conversation? • Did any questions feel awkward or hard to ask? Why? • How might you adjust the conversation for someone living with dementia or someone who is shy? 4. Application to Daily Work • How could you use this type of conversation in your daily routine? • What small changes could you make to help ensure this kind of information is shared with the care team? • What supports would help you have these conversations more often (e.g., time, prompts, team huddles)?	
5. Documentation & Next Steps (5-6 minutes)	Show how to document and share info. Invite reflection on how it can change care.
Instructions: • Play video 4: What to Do with the Insights You've Learned • Share the process the leadership team has identified for documenting the insights gained through the conversations • Share examples from your care community of how wellbeing has been documented and implemented into an resident's life. Sample talking points: • If we don't write it down and share it, the insight could get lost. Documentation connects what we learn to what we do. • These conversations aren't just feel-good moments—they help us shape care around what really matters to each person. • Bring it up at huddle: 'Mr. Thompson said music helps him feel calm—can we include that in his routine today?'	
6. Wrap-up (2 minutes)	Clearly articulate the expectation for each person attending the training.
Instructions: • Thank the participants for attending the session. • If not done so already, identify to the group who the Champion is and what their role will be. • Articulate the attendee's call to action. • Example: each of you will need to work with your neighborhood team to identify an resident with whom you will have a wellbeing conversation(s) over the next two weeks.	

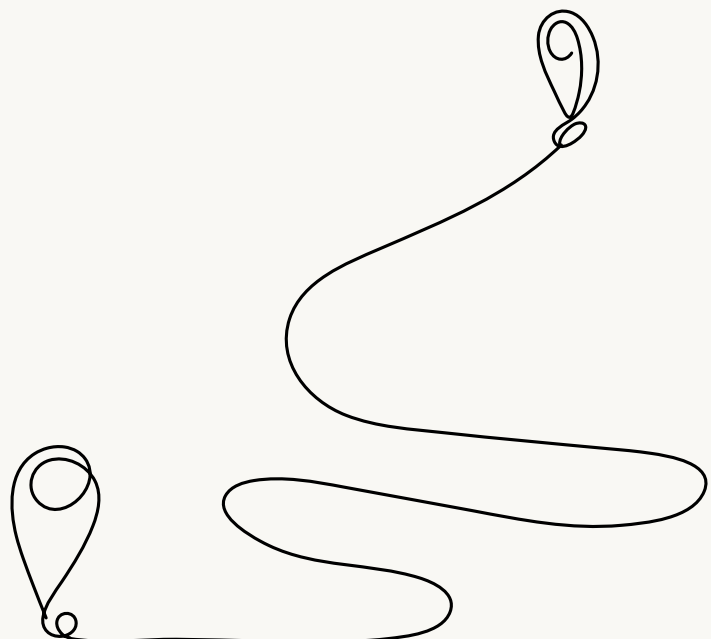


Use Appendix C: Wellbeing Conversation Guide to support the skill development of conversations.

Staff Engagement - Section 4 Checklist



- ☐ At least one training session delivered using the 30–45-minute outline.
- ☐ Videos 1–4 introduced and discussed during session segments.
- ☐ Conversation guide (Appendix C) introduced and modeled with staff.
- ☐ Domain worksheets distributed and reviewed.
- ☐ Case study or partner roleplay activity completed to practice skills.
- ☐ Staff engaged in guided debrief to reflect on the experience and framework.
- ☐ Staff shown how to document and share wellbeing insights.
- ☐ Staff expressed understanding of the four wellbeing domains and conversation purpose.
- ☐ Each participant assigned to conduct at least one wellbeing conversation in the next two weeks.



5

KEEP WELLBEING VISIBLE & ALIVE

Introducing wellbeing is just the beginning. Sustaining it requires repetition, visibility, and reinforcement through relationships and routines. This section offers strategies to help your team keep wellbeing at the forefront of daily work.

Leadership Visibility

Leaders set the tone. Continue to name wellbeing as a priority in communications, decisions, and meetings. Share real examples of how it's making a difference – whether in care plans, resident engagement, or team dynamics. Model curiosity and person-directed thinking in your own interactions.

Champion Support

Wellbeing Champions need regular encouragement and feedback. Schedule brief check-ins to learn what's going well, what challenges they face, and where they need support. Celebrate their efforts publicly and ensure their role remains visible and valued across the organization.

Recognize and Celebrate Success

Make it easy for staff to share stories about wellbeing in action. Highlight specific moments in huddles, meetings, or newsletters. Consider peer-nominated shoutouts or “wellbeing wins of the week” to help reinforce new behaviors.

Use Visual Cues and Reminders

Keep the four wellbeing domains top of mind with simple visual prompts. Ideas include monthly bulletin board themes, resident quotes, reflection questions in staff spaces, or digital signage. Small reminders can spark big conversations.

Embed in Onboarding and Orientation

Make sure new hires are introduced to the Wellbeing Conversation Guide and its purpose early in their journey. Include it in onboarding materials and invite Champions or peer mentors to demonstrate how it's used in practice.

Four Ways to Integrate Wellbeing into Organizational Practices:

1. Care Planning.
2. New Resident Welcoming.
3. Daily Huddles.
4. QAPI.

1

Resident Wellbeing Addendum (Care Planning)

Why it Matters:

Care plans should reflect not only what care is provided—but why it matters to the person. Capturing priorities in their own words helps the team tailor support in meaningful ways.

Resident Wellbeing Template:

FIELD	DESCRIPTION	EXAMPLE
Resident's Name	[Write-in]	Mary L.
Date of Conversation	[MM/DD/YYYY]	11/20/2025
Top Wellbeing Priority	What domain matters most to this resident?	Social Connection
Description (in their own words)	Quote or summary from the resident	"I love having coffee with others in the morning--it's how I feel part of the world."
Preferred Ways to Support This	Daily habits or routines that staff can support	Invite Mary to the breakfast table with others by 8am

Instructions for use:

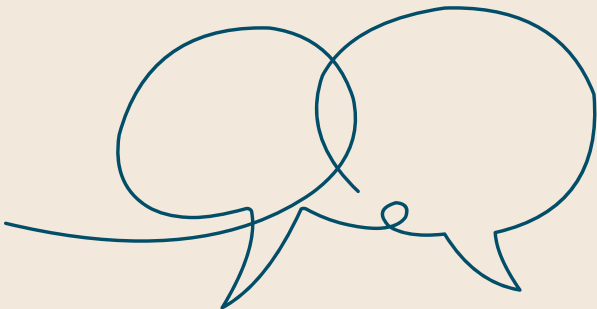
Attach this to the resident's care plan or embed it in your "Preferences" section. Update quarterly as part of the care plan process.

2

New Resident Welcoming

Why it Matters:

First impressions matter. Asking about wellbeing early helps establish trust and personal connection, especially during a vulnerable transition period.



Suggested Use:

Determine which team member(s) will have the initial wellbeing conversation with the new resident who moves in. Complete with the resident (or family) during the first few days after move-in. Highlight insights in team huddles and use them to shape early routines and relationship-building efforts.

3

Daily Huddle Prompts

Why it Matters:

Daily huddles are a powerful opportunity to keep wellbeing top of mind. A simple prompt can shift team focus from completing tasks to creating meaning.

Use these 1–2-minute prompts during morning or shift-change huddles to keep resident wellbeing front and center. Rotate focus weekly by wellbeing domain or resident need.

PROMPT	SUGGESTED USE
“Is there someone having a hard time or having symptoms that might be related to wellbeing?”	<i>Ms. Banks has been more withdrawn during morning care. Let’s check if something’s changed in her routine—maybe she hasn’t had her quiet teatime outside. She told us being outside in the morning helps her feel grounded.</i>
“What are we noticing – any shifts in mood, energy, or preferences?”	<i>Mr. Jones didn’t want to eat in the dining room yesterday. Could be sensory overload – let’s check in.</i>
“Are there any opportunities today to support autonomy or choice?”	<i>Ms. Raymond might be able to dress herself if we set her up for success—her family could bring in elastic waist pants, and we could build in a little extra time. Or maybe she’d enjoy caring for a small plant from home, something that’s hers to tend each day.</i>
“Any wellbeing wins from yesterday to share or celebrate?”	<i>Shoutout to Jamal for asking Mr. Chen about his military service—it made his whole day.</i>
“What’s one thing we could try differently today to support connection or meaning?”	<i>Could we pair Mrs. Fields with someone who shares her love of gospel music during the afternoon group?</i>

Wellbeing shouldn't be a one-time initiative—it should be part of how your organization learns and adapts. The QAPI process offers a powerful way to sustain momentum by using data, team insights, and ongoing reflection to strengthen wellbeing practices over time.

Use the PDSA cycle (Plan-Do-Study-Act) to guide your team's learning:

PDSA Stage	How the Wellbeing Log Helps
Plan	<i>Identify a focus area (e.g., Increase use of the wellbeing conversation guide during onboarding) and decide what small change you'll test.</i>
Do	<i>Try it on one unit, during one shift, or with a small group of staff. Keep it simple.</i>
Study	<i>Track what happened. Did the change make it easier to capture and apply wellbeing information? What feedback did you hear?</i>
Act	<i>Decide whether to adopt the change, adjust it, or try something different. Then plan your next test.</i>

Encourage staff, Champions, or supervisors to contribute quick notes to the log during or after shift huddles, check-ins, or care plan meetings. Keep the tone appreciative and learning-focused.

Sample QAPI Tracking Template

Metric	Frequency	Notes
# of wellbeing conversations completed	<i>Weekly</i>	Tracked by neighborhood/ household or shift team
% of care plans updated with wellbeing info	<i>Monthly</i>	Align with care plan audits
Staff-reported use of wellbeing info	<i>Monthly</i>	Pulse check via huddle reflection or quick survey
Barriers identified	<i>Ongoing</i>	Document during team check-ins or debriefs
Actions taken	<i>As needed</i>	Refreshers, coaching, or workflow adjustments

Suggested Practice:

Review wellbeing metrics monthly using your existing QAPI process or leadership review structures. Meet with Champions and supervisors to identify trends, celebrate examples of meaningful integration, and troubleshoot barriers. Focus not just on volume—but on meaningful use and impact on resident experience.

You might begin with one or two metrics that are simple to track, then build over time. Some teams incorporate these into care plan audits, huddle debriefs, or shared spreadsheets—what matters most is consistency and action.

Where should this information live?

That's up to your organization. Some leaders track wellbeing metrics in QAPI dashboards, others use paper logs in neighborhoods, or within EMR. The most important thing is that data is reviewed regularly and used to inform ongoing improvement.

Integration - Section 5 Checklist



Care Planning & Documentation

- ☐ "What Matters Most" summaries are included in resident care plans using the Wellbeing Addendum.
- ☐ Staff are trained in how and when to complete the Wellbeing Addendum.
- ☐ Champions or supervisors regularly review documentation for quality, accuracy, and follow-through.

Welcoming New Residents

- ☐ New resident intake process includes 4 core wellbeing questions (Wellbeing Snapshot).
- ☐ Welcoming staff or Champions are designated to conduct early wellbeing conversations.
- ☐ Insights from new residents are shared in huddles and used to guide early routines.

Team Huddles & Daily Routines

- ☐ Daily huddles regularly include wellbeing-focused prompts or cue cards.
- ☐ Visual reminders (e.g., posters, bulletin boards, digital signs) reinforce the four domains.
- ☐ Success stories or "wellbeing wins" are shared during team meetings or newsletters.

QAPI & Ongoing Learning

- ☐ QAPI tracking metrics for wellbeing are included in regular team reviews.
- ☐ A small number of meaningful metrics (e.g., # of conversations, use in care plans) are tracked and reviewed monthly.
- ☐ Champions & supervisors review log entries to identify barriers, trends, & stories that inform next steps.

6

SUSTAINING MOMENTUM

Embedding wellbeing isn't a one-and-done initiative. Long-term success depends on reinforcement through staff development, peer coaching, and regular review of progress. This section outlines practical strategies to sustain momentum and deepen your culture of wellbeing over time.

Strategy 1: Refresh and Re-Engage

Plan short, structured refreshers to keep wellbeing front-of-mind.

Use team meetings, shift huddles, or Champion-led learning bursts.

Tips for refresher sessions:

- Share a resident story that shows impact.
- Revisit the four wellbeing domains using real examples.
- Invite team reflection:
 - What's one small adjustment that made a big difference?
 - Where are we still getting stuck?

Strategy 2: Peer Coaching and Daily Practice

Support Champions and team members in building reflection habits.

Coaching is most powerful when it's peer-to-peer, everyday, and embedded in the work.

Use:

- Appendix E: Coaching Cue Cards to guide 1:1 chats, huddles, and debriefs.
- Pair-ups during staff meetings to ask:
 - "What's something I've noticed about how we support this resident?"
 - "Is there something I could try today to better honor what matters?"

Model curiosity:

- "What would help them feel more connected today?"
- "How do you know when they're feeling secure or unsettled?"

Strategy 3: Connect to Supervision and Performance

Make wellbeing part of how staff are supported, evaluated, and celebrated.

In check-ins and annual reviews, ask:

- How have you used the wellbeing conversation guide?
- What does honoring autonomy or meaning look like in your role?

Sample performance criteria:

- Demonstrates understanding of wellbeing principles.
- Uses resident priorities to guide daily care.
- Documents and shares preferences in team communication.

Strategy 4: Annual Integration Review

Conduct a yearly review to assess what's working and what's needed.

Topics to explore:

- Are we using wellbeing insights in care planning?
- What stories show meaningful impact?
- Where are we still facing barriers?
- What resources or coaching might help us deepen the practice?

Capture:

- Staff or resident testimonials.
- Adjustments or goals for the next cycle.
- Lessons learned.



Use Appendix F: Wellbeing Integration Review Template to assess your organization's progress.

Sustaining Practice - Section 6 Checklist



Use this checklist to reinforce wellbeing as a sustained, organization-wide practice through coaching, supervision, and continuous improvement:

Ongoing Training & Reflection

- ☐ At least one annual refresher session conducted (10–15 minutes) for each team or shift.
- ☐ Staff share real stories or examples of how wellbeing has shaped care decisions or routines.
- ☐ Four wellbeing domains revisited during team meetings, in-services, or Champions' learning bursts.

Peer Coaching & Team Practice

- ☐ Coaching Cue Cards (Appendix E) used by Champions or supervisors in huddles or informal check-ins.
- ☐ Peer-to-peer reflection encouraged during team meetings (e.g., "What's something we've learned about a resident this week?").
- ☐ Champions support everyday coaching through gentle reminders and real-time encouragement.

Performance & Supervision

- ☐ Supervisors include wellbeing-related questions in monthly check-ins (e.g., "Have you used the conversation guide recently?").
- ☐ Performance evaluations include wellbeing-aligned behaviors (e.g., honoring autonomy, documenting resident preferences).
- ☐ Staff are encouraged to reflect on how wellbeing is integrated into their role.

Annual Review & Organizational Learning

- ☐ Annual Wellbeing Integration Review completed using Appendix F.
- ☐ Staff and resident testimonials collected to illustrate impact.
- ☐ Barriers and successes documented with next steps defined.
- ☐ Results shared with leadership and QAPI for continuous improvement planning.



7 ALIGNING BELIEFS, BEHAVIORS, & SYSTEMS

Sustain and Strengthen - Embedding the Beliefs, Behaviors, and Systems Framework to Sustain Wellbeing Culture

Wellbeing integration is not a one-time initiative, it's an ongoing practice of aligning beliefs, behaviors, and systems with what matters most to the people who live and work in your organization.

This section supports your team in reflecting, reinforcing, and recalibrating as needed.



Use Appendix G: Beliefs, Behaviors, and Systems Reflection Worksheet to hold focused conversations about how to deepen your commitment over time.



What is the BBS Framework?

The BBS Framework—Beliefs, Behaviors, and Systems—helps organizations examine and align the foundational elements that shape culture. It originated from efforts to sustain culture change in long-term care and is a core principle embedded in AgingIN's educational and consulting models.

Element	Description
Beliefs	The values and assumptions that guide decisions (e.g., "We believe everyone has a story that matters").
Behaviors	Observable actions that reflect beliefs (e.g., asking residents what brings them joy, documenting their preferences).
Systems	Structures, processes, and routines that reinforce or inhibit desired behaviors (e.g., onboarding, evaluations, documentation tools).

Why BBS Matters for Wellbeing Integration

While tools and training can spark change, lasting culture change happens when all three elements—beliefs, behaviors, and systems—are aligned. If your team believes in wellbeing but your documentation systems or daily routines don't support it, you'll hit resistance or burnout.

By applying the BBS lens, leaders can:

- Identify disconnects that prevent integration of wellbeing into daily practice.
- Understand and shift mindsets (beliefs) that undermine person-directed care.
- Reinforce desired behaviors through aligned systems, like documentation, staff recognition, and care planning.



How BBS Supports Wellbeing

Each of the four wellbeing domains—Meaning, Social Connection, Autonomy, and Security—requires belief alignment, visible action, and system-level reinforcement to be fully realized.

For example:

- **Autonomy is supported when leaders believe residents are capable of decision-making, when care partners offer real choices, and when shift routines allow flexibility.**
- **Social connection thrives when it's seen as essential (not optional), when staff model it, and when systems like staffing patterns allow time for meaningful interactions.**

BBS Integration - Section 7 Checklist



Use this checklist to guide your leadership team and Champions in aligning Beliefs, Behaviors, and Systems to support a sustained culture of wellbeing. See Appendix G for a printable reflection worksheet.

Beliefs - We have:

- ☐ Introduced the BBS framework to leadership and Champions.
- ☐ Reflected on current leadership beliefs about residents' autonomy, purpose, and growth.
- ☐ Discussed care partners' assumptions about aging and resident capability.
- ☐ Explored beliefs about "quality of life" vs. "quality of care".
- ☐ Reflected on how staff view their role in supporting wellbeing (beyond task completion).
- ☐ Named belief patterns that help or hinder person-directed practices.

Behaviors - We have:

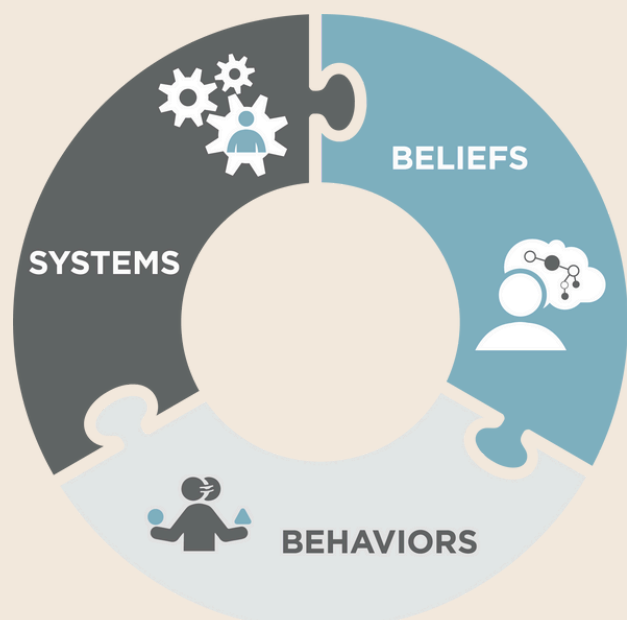
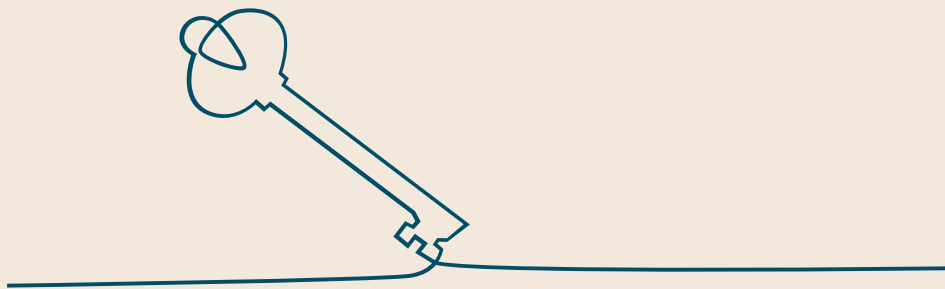
- ☐ Identified key daily behaviors that support resident autonomy, connection, meaning, & security
- ☐ Noted actions or habits that may unintentionally limit dignity or choice.
- ☐ Observed team interactions for tone, language, and relational practices.
- ☐ Reflected on how leaders model desired behaviors (e.g., coaching, curiosity, honoring preferences).
- ☐ Selected 1–2 behavior shifts to focus on consistently across teams.

Systems - We have:

- ☐ Assessed whether policies, documentation, and workflows reinforce wellbeing.
- ☐ Reviewed onboarding and training for alignment with wellbeing principles.
- ☐ Evaluated if documentation systems make it easy to record and act on what matters.
- ☐ Integrated wellbeing into performance feedback and supervision practices.
- ☐ Identified system-level barriers (e.g., time, communication, role clarity).
- ☐ Planned system adjustments to better support staff in honoring wellbeing.

Completion Outcomes - We have:

- ☐ Documented our top insights across Beliefs, Behaviors, and Systems.
- ☐ Selected 2–3 high-impact changes to implement.
- ☐ Assigned ownership and timelines for each change.
- ☐ Scheduled a follow-up review in 3–6 months to reflect and recalibrate.
- ☐ Outcomes have been integrated into QAPI updates, strategic plans, or educational goals.



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8

TOOLS, WORKSHEETS, & PLANNING TEMPLATES

Appendix	Section	Title	Purpose
A	Section 2	Leadership Reflection Worksheet	Help leadership teams assess readiness, define vision, and identify priorities.
B	Section 3	Wellbeing Champion - Role Description	Clarify the purpose, responsibilities, and expectations of the Champion(s).
C	Section 4	Wellbeing Conversation Guide	Full version of the tool for initiating and documenting wellbeing conversations.
D	Section 4	90-day Sample Implementation Timeline	Visual roadmap to guide early implementation across three months.
E	Section 6	Printable Coaching Reminder Cards	Prompts and coaching cues for Champions and supervisors to reinforce wellbeing practice.
F	Section 6	Wellbeing Integration Annual Review Template	Structured questions and prompts to assess year-over-year integration progress.
G	Section 7	Beliefs, Behaviors, and Systems Reflection Worksheet	Support reflection and action planning to align systems with desired values.

Appendix A: Leadership Reflection Sheet

Purpose:

To guide leadership teams in assessing organizational readiness, clarifying their vision for wellbeing integration, and identifying strengths and barriers before implementation.

When to Use:

Use at the beginning of your planning process, ideally before selecting Champions or rolling out staff training. This worksheet supports Section 2: Simple Implementation Plan for Leadership Teams.

Leadership Reflection Worksheet

Use these prompts to facilitate honest discussion and alignment among leadership team members. Capture insights that will guide your strategy, pace, and messaging.

Reflection Area	Key Questions
Current Reality	• How consistently do we talk about what matters to residents? • Where is that information recorded and how is it used?
Vision	• What would success look like? • How would residents and staff experience this differently?
Strengths to Leverage	• Who is already demonstrating these behaviors? • What systems, routines, or meetings can we build on?
Barriers and Risks	• What might get in the way of implementation? • How can we start small and build confidence?
Leadership Commitment	• What do we each commit to doing in the next 30–60 days to support this work?

Optional Group Discussion Prompts - Use these to deepen reflection if time allows:

- What assumptions do we hold about residents' capacity for wellbeing and autonomy?
- How do our beliefs about “quality care” influence what we prioritize?
- Where do staff already make wellbeing visible—and how can we celebrate and amplify that?

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Action Notes

Top priorities identified:

Immediate next steps & owner(s):

Check-in date:

Appendix B: Wellbeing Champion - Role Description

Purpose:

To clarify the purpose, responsibilities, and expectations of Wellbeing Champions so they are positioned to lead, model, and reinforce the use of the wellbeing framework.

When to Use:

Use during Champion selection, onboarding, and early implementation. This appendix supports Section 3: Prepare Your Wellbeing Champion(s).

Wellbeing Champion: Role Description

Wellbeing Champions play a vital role in helping their teams put the Wellbeing Toolkit into daily action. Champions are trusted peers who help ensure that wellbeing conversations happen, that what matters most to residents is documented and shared, and that the team stays focused on person-directed care.

Core Responsibilities

Role Area	Key Activities
Modeling	Show others how to use the conversation guide during real interactions. Demonstrate how to connect wellbeing information to care planning or daily practices.
Supporting Staff	Be available for questions. Help coworkers find creative ways to use wellbeing info during huddles, shift changes, or documentation.
Tracking & Feedback	Notice and share what's working well. Flag barriers to supervisors or QAPI leads. Celebrate great examples of wellbeing-centered care.
Communication	Reinforce the "why" behind wellbeing. Share success stories in huddles or team meetings. Encourage others to reflect on how they support resident wellbeing.

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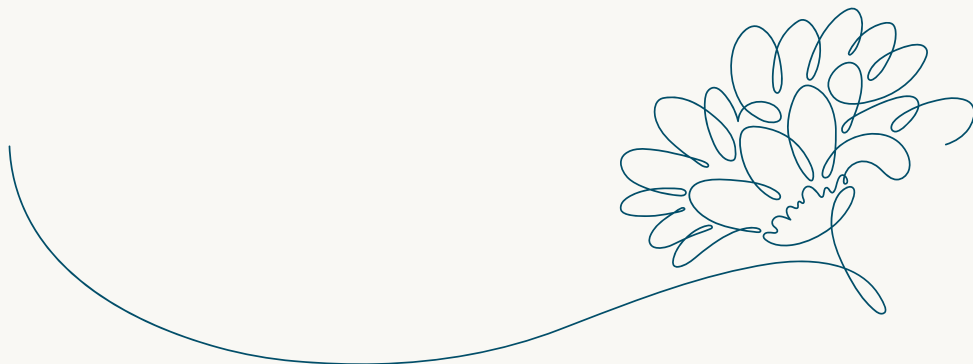
Qualities of an Effective Champion

- Trusted by peers and leaders.
- Clear communicator.
- Believes in person-directed care.
- Observant and proactive.
- Comfortable supporting others.

Note: This role can be held by CNAs, Shahbazim, household team members, activities staff, or others—not just “leaders.” The key is relational influence, not job title.

Time Commitment & Support

- Attend an orientation or kickoff session (30–60 minutes).
- Be available during regular shifts to support and model.
- Join periodic check-ins with supervisor or QAPI team.



Appendix C: Wellbeing Conversation Guide

Purpose:

To provide staff with a practical tool to guide conversations with residents that uncover what matters most across the four domains of wellbeing. These conversations are the foundation for person-directed care planning, relationship-building, and improved quality of life.

When to Use This Tool:

Use this guide in Section 4 of the Organizational Integration Toolkit, particularly during staff training and early implementation. Champions and care partners can use the questions to initiate conversations, strengthen rapport, and discover individual preferences and priorities

What is a Wellbeing Conversation?

A wellbeing conversation is a guided dialogue with an resident (or their representative) to uncover what matters most in their life. It is not a formal assessment, but a relationship-building practice that centers the resident's voice in care decisions.

These conversations build trust, support autonomy, and help teams shift from "What's the matter?" to "What matters to you?"

How to Use This Guide

- *Choose a calm, unhurried moment – at admission, during care plan meetings, or anytime the relationship allows.*
- *Use one or more of the open-ended questions from each domain below.*
- *Listen actively, take notes, and follow the resident's lead.*
- *Share what you learn with the broader team. We will work together to integrate what you learned into care plans and daily practice.*

Opening the Conversation

- *Can I ask you a few questions to get to know you better?*
- *What's something that makes you feel like yourself?*
- *When do you feel most content or connected here?*

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Use these domains as flexible categories—not a checklist—to guide your conversation.

Domain	Sample Prompts
Autonomy	• What do you do that makes you reel good about yourself? • What things do our team do for you that you would like to do for yourself?
Social Connection	• Who do you like to spend time with? • How do you like to connect with others?
Meaning	• What brings meaning to your day? • Are there ways you would like to contribute or be helpful either in our community here or outside of here?
Security	• What helps you feel safe and comfortable? • Are there routines or comforts that matter to you?

Note: Let the resident lead. You don't need to ask every question. Be curious and follow what's meaningful to them.

Capture Key Insights: Use a notebook, your conversation tool, or another resource to capture responses.

- **Direct Quotes:** "I feel like myself when I wear my red sweater—it reminds me of my teaching days."
- **Notice Themes:** Enjoys early mornings, values privacy, likes to joke with staff.
- **Small Daily Opportunities:** Invite them to join breakfast early; play jazz music in their room.

Keep It Going:

Wellbeing isn't a one-time talk—it's a shared mindset

- Bring up insights in huddles, care planning, or hallway conversations.
- Check in regularly: "Is there anything new that's been on your mind lately?"
- If someone seems "off," circle back: "I've noticed you seem a little down—anything we can do to support you today?"

Suggested Phrases for Closing

- Thanks for sharing that—it helps us support you better.
- I'll make sure to pass that along to the team.
- Is it okay if I check in with you again in a few days?

Appendix D: 90-Day Sample Implementation Timeline

Use this timeline to guide your team through a staged rollout of the wellbeing framework. Post it in team areas or use it as a visual during implementation meetings.

Days 1–30: Launch & Learn

Goal: Introduce the wellbeing initiative and build shared understanding.

Action Item	Intended Audience	Status
Host kickoff meeting	Leadership	☐
Leadership completes Appendix A reflection	Leadership	☐
Identify and orient Champion(s)	Leadership	☐
Begin staff training on conversation guide	All staff	☐
Hold first team huddle using a wellbeing prompt	Supervisors + Care Team	☐

Days 31–60: Practice & Embed

Goal: Normalize the practice of wellbeing conversations and begin integration into systems.

Action Item	Intended Audience	Status
Champions share early stories and support staff	Champions + Supervisors	☐
Continue practice with conversation tool in real-life settings	Care Partners	☐
Document key insights using care plan addendum template	Nurses + Social Workers	☐
Add wellbeing questions to new resident orientation form	Admissions/Welcome Team	☐
Begin tracking use of wellbeing data via QAPI log	QAPI Team + Leadership	☐
Use daily huddle cue cards consistently	Supervisors + Staff	☐

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Days 61–90: Sustain & Strengthen

Goal: Embed into policies, routines, and team mindset for long-term success.

Action Item	Intended Audience	Status
Include wellbeing integration in supervision and performance check-ins	Supervisors + HR	☐
Conduct first Wellbeing Integration Annual Review (Appendix F)	Managers + Champions	☐
Identify what systems still need alignment (scheduling, onboarding, etc.)	Leadership + Ops	☐
Use coaching cards and BBS discussion prompts for deeper team reflection	Champions + All Staff	☐
Celebrate early wins and adjust based on feedback	Leadership + Champions	☐

Appendix E: Printable Coaching Reminder Cards

Supports Section 6: Use Peer Coaching to Strengthen Practice

Purpose:

To reinforce a culture of curiosity, reflection, and ongoing coaching among Champions, supervisors, and direct care staff. These printable cards are designed to be used during shift huddles, check-ins, or informal peer coaching conversations.

When to Use:

- During daily huddles or care debriefs.
- In Champion or peer coaching check-ins.
- As part of refresher trainings or onboarding.

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Quick Coaching Prompts (for 1-on-1 Check-Ins) Use these questions during supervision, shift handoffs, or casual hallway conversations to help staff reflect on their practice: • How are you learning about what matters most to the residents you support? • Have you used the wellbeing conversation guide recently? What did you learn? • How has this changed how you thought about the resident and your relationship with them? • What's something small your team is doing to support autonomy or meaning? • What's been getting in the way of applying wellbeing info in your care approach? • Who on your team is doing a great job with this—and how can we recognize them?	Team Huddle Reflection Starters Open or close team huddles with a wellbeing focus by using these group-oriented reflection questions: • This week, how are we honoring one resident's wellbeing priority? • Has anyone noticed changes in engagement after making a wellbeing-based adjustment? • What's one thing we can shift to better support social connection? • Are there any current barriers to honoring wellbeing priorities? • Let's shout out one staff member who made a difference this week.
Coaching Through Barriers Use these when a staff member is struggling or uncertain about applying the framework: • What's feeling hard about using the wellbeing conversation guide? • Do you feel like you have time and permission to really get to know your residents? • If you could change one part of our routine to support wellbeing, what would it be? • Let's walk through a situation together—what does the resident value, and how might we support that? • How can I support you in trying something new?	Keep It Going – Monthly Coaching Reminders Post monthly or bring to supervision as a self-check tool for staff: • Have I refreshed my understanding of the 4 wellbeing domains? • Have I used the conversation guide with at least one resident recently? • Am I documenting what I learn about residents' priorities? • Are wellbeing goals showing up in our care plans or huddles? • Have I shared a success story or positive shift with the team?

Appendix F: Wellbeing Integration Annual Review Template

Supports Section 6: Annual Wellbeing Integration Review

Purpose:

To guide leadership and implementation teams in assessing progress, identifying gaps, and planning next steps for organization-wide integration of wellbeing practices.

When to Use:

- Annually, as part of strategic planning or quality improvement.
- After 6–12 months of toolkit implementation.
- In preparation for QAPI reviews or team retreats.

Suggested Review Questions

1. Embedding Wellbeing into Practice

- Are wellbeing conversations happening regularly across neighborhoods or units?
- Are staff documenting preferences and using them to shape care plans?
- Where is the practice of wellbeing strongest—and where is it less consistent?

2. Culture and Mindset Shifts

- How have attitudes shifted around autonomy, meaning, connection, and security?
- What behaviors have changed in day-to-day interactions?
- How do residents describe their sense of wellbeing?

3. Coaching and Support

- Are Champions active and well-supported in their role?
- Do staff feel comfortable coaching each other with curiosity and respect?
- What resources (refresher sessions, cue cards, supervision) are being used?

4. Barriers and Opportunities

- What's getting in the way of consistent practice?
- Where are people feeling stuck or discouraged?
- What process, staffing, or culture challenges are surfacing?

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5. Bright Spots and Lessons Learned

- What stories, quotes, or moments stand out?
- What can we learn from homes or units that are thriving?
- What do staff or families say is different?

Capture These Outputs:

- Summary of key insights and trends.
- Quotes or testimonials from staff or residents.
- Adjustments or goals for the next cycle.
- Recommended training, coaching, or process changes.

Appendix G: Beliefs, Behaviors, and Systems Reflection Worksheet



This worksheet guides leaders and facilitators in assessing current organizational culture through the lens of Beliefs, Behaviors, and Systems—the three pillars necessary to embed and sustain wellbeing practices.

BELIEFS

Explore current mindsets and assumptions about residents, staff, and roles.

Reflection Area	Key Questions
Leadership Beliefs	• How do we define quality of life and care? • What do we believe residents are capable of? • Do we believe residents should direct their own care and daily rhythms?
Workforce Beliefs	• What do team members believe about residents' autonomy, preferences, and priorities? • What are common beliefs about the purpose of our roles (e.g., efficiency vs connection)? • Do staff see wellbeing as part of everyone's job?
Beliefs About Change	• How open are we to trying new practices? • What beliefs might cause resistance to integrating wellbeing into daily routines? • Do we believe small actions can lead to meaningful change?

BEHAVIORS

Identify the observable actions that either support or undermine wellbeing.

Reflection Area	Key Questions
Everyday Practices	• In what ways are wellbeing conversations currently part of our daily work? • How do staff members recognize and respond to what matters most to each resident? • What practices show that we are tailoring care based on individual preferences?
Leadership Behaviors	• How do leaders demonstrate commitment to the wellbeing framework? • What are we doing to encourage and model wellbeing-focused practices? • How do we celebrate or reinforce positive examples of person-directed living?
Care Team Communication	• How are wellbeing insights communicated across shifts or departments? • What happens after a team member shares an observation about an resident's preferences? • How well does our documentation process support communication and follow-through?

SYSTEMS

Identify the formal and informal systems that shape (or limit) behavior and reinforce existing beliefs

Reflection Area	Key Questions
Documentation	• How does our current documentation process support or hinder person-directed care? • Where and how are wellbeing priorities captured—and how easily can others act on them? • What gaps exist in how we document what matters most to residents?

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Reflection Area	Key Questions
Team Routines	• What existing routines (e.g., huddles, supervision, care planning) already create space for wellbeing discussions? • How could we strengthen or adapt these routines to better support the integration of wellbeing practices? • What gets in the way of using these systems consistently and meaningfully?
Onboarding & Training	• How are new team members introduced to the importance of wellbeing? • What training opportunities do we offer (or need to offer) to build comfort and skill in having wellbeing conversations? • How do we ensure new staff understand their role in supporting resident quality of life?
Accountability & Feedback	• How do we track whether wellbeing is showing up in practice? • What feedback loops exist to help us identify wins, challenges, or areas for improvement? • How do we respond when wellbeing is overlooked or deprioritized?

