

RESIDENT COUNCILS THAT WORK

PLANNING /ORGANIZING EFFECTIVE RESIDENT COUNCILS



Centralina Area Agency on Aging

Ombudsman Program

PO Box 35008
Charlotte, NC 28235

1-800-508-5777



WHAT IS A RESIDENT COUNCIL?

An organization which provides residents within a long term care facility the opportunity to participate in self- governance.

RESIDENT COUNCILS:

- **Focus on self-determination.**

The group is formed and run by residents who live in the nursing home or assisted living.

- **A resident council is operated much like a “Community Watch” in neighborhoods.**

Residents learn their rights, the staff responsibilities and how to work together to improve their quality of life within the community. The group then identifies a common need or widely held desire and takes action.



POSITIVE OUTCOMES WHEN RESIDENTS PARTICIPATE:

- ☺ Independence, personal growth, increased self-esteem, responsibility and independence It gives residents a feeling of control of their lives.
- ☺ Residents are happier.
- ☺ Reduced resident and family complaints.
- ☺ It empowers residents to be actively involved in the daily decision making process in the facility.
- ☺ It promotes self-determination.

ARE COMMITTEES A COUNCIL?

Some issues are better served by creating a smaller group to fully examine the concern. Also, there are residents who prefer smaller groups where they can share their ideas and concerns openly. **FOOD** committees, **ACTIVITY** committees or **SAFETY** committees are great opportunities to get more in depth results to specific issues. Resident's should be considered for membership in other quality improvement committees where facility staff take a more leadership role:

- Quality Assurance,
- Hiring key administrative staff such as Administrators or Director's of Nursing,
- Orientation of new staff to routines and resident practices
- Committees that consider policy and/or procedure changes

WHAT SHOULD A RESIDENT COUNCIL LOOK LIKE?

All **residents are automatic members** of the council. **Staff can attend at the resident's invitation** and be ready to respond to the issues that the council may address in their meeting. Open and honest communication is as important as giving specific details about who, what, where, when, why and how issues will be handled.

Most successful councils :

- ◆ **Hold their meetings at a regular time and place,**
- ◆ List the meeting on the activity calendar, bulletin boards, in-room flyers and facility newsletter,
- ◆ Remind residents to attend
- ◆ Keep a written record of all meeting transactions
- ◆ Invite staff for a portion of each meeting to give updates

ROLE OF THE RESIDENT COUNCIL IN THE FACILITY

- ✘ Work for the good of the GROUP, not their personal concerns or complaints
- ✘ Meet and take up concerns of the facility as they are presented and voted on by the group
- ✘ Work closely with a staff advisory to keep records on the actions taken by the group and the staff responses.
- ✘ Educate and remind others of the resident rights, use the right grievance procedures, and invite “experts” from the staff to learn the facts about policies and procedures.
- ✘ Work with Administrators and staff to exercise their rights in the facility and feel free to use the Ombudsman and others for help in advocating for change in the building.
- ✘ Have ready access to grievance forms, become educated on how and when to use them, as well as what to expect from staff on their individual concern. Copies of forms should be make available at meetings for individuals issues as well as readily accessible throughout the building.
- ✘ Know their individual care plan.
- ✘ Educate themselves about the various illnesses such as Alzheimer’s Disease, Diabetes, Stroke and Multiple Sclerosis.
- ✘ Make decisions using consensus or majority rules.
- ✘ Elect or appoint residents only to leadership positions.
- ✘ Discuss alternatives and solutions to the problems they identify, find facts about these issues through education prior to submitting them as concerns.

ROLE OF THE FACILITY STAFF

BEFORE THE MEETING

- ⇒ Staff will assist residents with coordinating space for the meeting.
- ⇒ Post agenda and notices on bulletin boards, activity calendars, newsletter, and in any other announcements 2-3 weeks in advance
- ⇒ Staff can assist by getting speakers to the meeting.



DURING THE MEETING (when invited)

- ⇒ Make sure there is a beginning and ending time to each meeting. Staff and residents must accommodate attention spans of members.
- ⇒ Prepare agenda with resident input ahead of time. Leave room on the agenda for last minute additions.
- ⇒ Ground rules can assist in keeping meetings on target and focused on groups issues and not personal ones. Staff advisor can assist by keeping the meeting in an orderly manner and ensure democratic process ensuring all ideas are considered in discussions.
- ⇒ Offer residents paper and pen for the meeting if they desire it.
- ⇒ Residents should introduce themselves at each meeting to accommodate new members and make them feel welcome. Residents may want to wear name tags at the meeting.
- ⇒ Make sure there is someone to take minutes. Minutes should list all issues agreed upon in the meeting.

AFTER THE MEETING

- ⇒ Distribute minutes
- ⇒ If requested by the group, assist in follow-up on group issues.

HOW TO ORGANIZE AN EFFECTIVE RESIDENT COUNCIL

WHERE DO I START?

Residents have to feel that they live in a place that is open to suggestions on improvements.

This is their home, and like us, they have the right to make recommendations about how to improve the quality of their life without fear of neglect or retaliation. This type of empowerment has a ripple effect throughout the life of the facility. Residents become more confident and request changes in routines and practices. Staff must respond to these challenges with an open mind and flexibility that may not always be supported by company policy, scheduling or their own reluctance to change how things have always been done.

Staff, too, must feel that their issues are being considered. So,

There are 3 different types of resident council formats:

- **town meeting** groups present their issues as a whole to administrative staff
- **representative councils** have the resident leadership represent the issues of the whole group and
- **mixed groups** may use both methods depending on resident interest and participation

FIRST

- Educate residents on what is a resident council.
- **Have a brainstorming/exploratory/organizational meeting.** As many residents as possible, and key staff should be involved in the process from the beginning to the end.
- These ideas will help establish **when** they want to meet - schedule the meeting the time of day when residents are most alert. Also, make meetings at the same time and day to avoid confusion. Determine **where** residents will meet—privacy is important so meet in an area where there are few interruptions. Then, discuss **how** the staff should be involved.
- At each step, all ideas should be considered no matter how far fetched they seem. Then take each ideas and begin to build consensus around items where a majority of residents have the most interest.
- Review the role of residents and role of staff.
- Set the next meeting.

THEN

- At the **first meeting, residents can elect officers** and determine what format they will use for their meetings.
- Establish ground rules to make sure all ideas can be heard.
- Have administrator to come to the first part of the first meeting to show support of the resident council.
- Take minutes and have grievance forms available for individual concerns.

UNDERSTAND DIFFERENT TYPES OF GROUPS

Groups come in all shapes and sizes. The success of a group depends on their dynamics. This means that each person's behavior impacts the input and response of others in the group. Group members typically fall into four basic "types".

Guarded-This group member may be afraid to get involved due to: fear of reprisal, fear of stepping on toes, poor self-determination and value. Leaders can help this member recognize that there is anonymity in the group and there is support from others that can alleviate concerns or anxieties.

Enthusiastic-This individual wants to create success in the group, works hard to encourage participation. This type of group member can easily become frustrated and lose interest if they don't see "action" or results.

Members who fear failure-This member may not vote for action as they fear negative results. Leaders should focus on the positive outcomes possible through group actions and peer support. Promote small, manageable project that promote real success.

Simply Not interested-Some individuals are not interested in the participating in groups no matter what. They may event dismiss or discourage the work of others. Leaders should continue to communicate the activities of the group, focusing on the benefits, regardless their non participation.

Creating success by overcoming barriers.

➤ What if I have low resident input or interest?

Big changes can come from small groups. Work with the residents who **are** interested and they can identify ways to generate input from others. **It may take 2 to 20 trials to get residents interested in the resident council.** Residents may fear retaliation from staff due to suggestions and complaints discussed in the meeting. If meetings are run by staff, with staff always present, residents do not have an open forum for their concerns to be heard. **The anonymity of the group allows for a more reserved resident to have their issues considered along with those of others.**



➤ **What if the resident's feel the facility does not really support them? Empowered groups take more effort from everyone staff and residents alike.** If facility staff accept residents as capable of making their own decisions, and are ready to work with them on possible solutions great successes can occur. **Past group's performance does not reflect on the current group's ability to achieve success.** It takes both the residents and staff to work together as a team to find lasting solutions. Maintaining good communication among and between staff and residents will improve trust. Often this is as simple as being specific on the who, what, where, when, why and how of problem solving!

➤ What if health problems affect leaders of the group?

It is the nature of all groups that leadership will change. Staff leaders should deal with health problems factually and sensitively using the group to find ways to support each other through difficult health crisis. Always be mindful of privacy and confidentiality.

➤ What if residents do not want to take on leadership or co-leadership roles?

Leaders come in all shapes and sizes. Most individuals are worried about the "responsibility" of being a leader. Be clear on the role and responsibility of RC leadership. The resident should NOT be set up to take on all the complaints of other residents, staff or families. However, residents should:

run the meeting,

make sure that there are responses to the issues raised by the council,

assign committees to work on special issues, and

help determine which staff or outside resource can assist in solving the concerns brought up by the council.

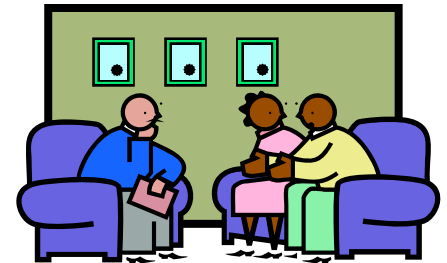
Communication is the Key to Successful Councils

Resident councils are a wonderful, non-threatening way for staff and residents to work together to accomplish the best quality of life for the residents. Long-Term care communities should educate their staff about what Resident councils can accomplish. Every department should be aware of the issues that are raised by the Council, since the entire “team” will be called upon to work on solutions. Often the Administrator, the Director of Nursing, the Activity Director, Social Worker and Supervisor in Charge are the key staff that works closely with Councils, but any staff can be included by invitation. Examples of other staff include dietary, maintenance, transportation, business office etc. The size of the facility should not hinder the development of a resident council. Small councils can be just as effective as larger ones. What matters is the line of communication is always open between staff and residents.

WE ALL LEARN FROM LISTENING

Active Listening is a great way to communicate with others. It helps to build rapport, understanding and trust. Are you listening when the resident is talking to you? Some active listening skills are

1. **Restating** what is said back to the person to ensure understanding
2. **Summarizing** all the facts and prioritizing them for action
3. **Giving feedback**, let the person know what your initial thoughts are on the situation,
4. **Probing**, ask questions to get more information; open ended questions gain more information; who, what, where, when, why and how,
5. **Validation**, acknowledge what is being said, including the emotions and accepting that there is a problem
6. **Silence**, allow for comfortable quiet time to slow down the exchange. It gives a person time to think, and respond,
7. **Redirecting**, if someone is showing signs of being overly aggressive, agitated, or angry, this is the time to shift the attention to something else.



ASKING QUESTIONS

Good problem solving begins with good information. It's important for leaders to gather information to make sure the residents want, concerns, needs, and desires are known.

Using the right kind of questions will lead to improved results.

1. **Open-Ended-** This will expand the discussion. **Using the words, how, what, where, who and which will lead to more dialogue, creative thinking and sharing solutions among group members.**
2. **Close-ended-** They usually get a yes or no answer. Leading questions with Is, Are, Do, Did, Can, Could, and would will result in yes, or no responses which will not give members enough information to begin thinking about solutions.
3. **Leading-** Asking a series of questions. Ex. The food is too cold right? Be careful with this type of questions. It does not give members a chance to have their own input, but assume the interviewer already knows the answer. Leading questions could appear to be offensive or condescending.

RULES THAT PROTECT RESIDENT'S COUNCILS

Nursing Home Reform Law: FEDERAL

F242 §483.15(b) Self-Determination and Participation

The resident has a right to

- (1) Choose activities, schedules, and health care consistent with his or her interests, Assessments and plans of care;
- (2) Interact with members of the community both inside and outside the facility; and
- (3) Make choices about aspects of his or her life in the facility that are significant to the resident.



F242 §483.15(c) Participation in Resident and Family Groups

- (1) A resident has the right to organize and participate in resident groups in the facility;
- (2) A resident's family has the right to meet in the facility with the families of other residents in the facility;
- (3) The facility must provide a resident or family group, if one exists, with private space;
- (4) Staff or visitors may attend meetings at the group's invitation;
- (5) The facility must provide a designated staff person responsible for providing assistance and responding to written requests that result from group meetings

N. C. Rules for the Licensing of Adult Care and Family Care Homes

The Following Resident Rights support resident councils in Assisted Living facilities. Rights # 1, 8, 11, and 15.




- #1 To be treated with respect, consideration, dignity, and full recognition of his or her individuality and right to privacy.
- #2 To associate and communicate privately and without restriction with people and groups of his or her own choice on his or her own initiative at any reasonable hour.
- #11 To be encouraged to exercise his or her rights as a resident and citizen, and to be permitted to make complaints and suggestions without fear of coercion or retaliation.
15. To have freedom to participate by choice in accessible community activities and in social, political, medical, and religious resources and to have freedom to refuse such participation.

www.facility-services.state.nc.us/

www.ahca.org

www.dhhs.state.nc.us/

RESOURCE PAGE

-  National Long Term Care Ombudsman Association
www.ltcpmbudsman.org
-  National Coalition for Nursing Home reform (NCCNHR)
www.nccnrh.org
-  Resident Council of Washington www.residentcouncil.org
www.pioneernetwork
-  www.facility-services.state.nc.us/
-  www.robertrules.org
-  www.sookefire.com/news/meeting.html
-  www.medicare.gov
-  Division of Medical Assistance
919.857.4011
-  Long Term Care survey Manual
www.ahca.org
-  Friends of Residents in Long Term care (FORLTC)
www.forltc.org 919.782.1530
-  N.C. Department of Health Services Regulations/
Adult Care Home Section
919.733.6650 1.800.624.3004
-  N.C. Division of Aging and Adult Services
919.733.3983
-  Disability and Rights of North Carolina
1.800.821.6922



For assistance with your resident council, contact:

Centralina Area Agency on Aging/Ombudsman Program
1300 Baxter Street, Suite 450
Charlotte, NC 29204

Laurie Abounader, Regional Ombudsman

704-348-2739

Anson, Cabarrus, Union

labounader@centralina.org

Heather Armstrong, Regional Ombudsman

704-688-6504

Mecklenburg County Assisted Living

harmstrong@centralina.org

Patricia Cowan, Regional Ombudsman

704-688-6503

Rowan, Stanly

pcowan@centralina.org

Hillary Kaylor, Regional Ombudsman

704-348-2724

Mecklenburg Nursing Homes

hkaylor@centralina.org

Cindy Kincaid, Regional Ombudsman

704-348-2715

Gaston, Iredell, Lincoln

ckincaid@centralina.org

Debi L. Lee, Lead Ombudsman-704-348-2714

dlee@centralina.org

