How To Establish A Successful
Local CAHF Nurses Council

July 2010
BASIC GUIDELINES FOR ESTABLISHING A LOCAL NURSES COUNCIL

State Structure: The bylaws of the California Association of Health Facilities establish the CAHF Nurses Council in Article XI. The (Statewide) Council is made up of “licensed nurses who are officers, director/trustees, owners, or employees of an institutional facility or of an owner of an institutional member facility or associate member which is in good standing as an institutional member of this corporation” (CAHF).

Thus, every nurse owner or employee of a member facility is automatically a member of the CAHF Nurses Council. The Chairperson of the Council has a voting seat on the CAHF Board of Directors and on the Government Relations Committee. The Council meets at each statewide meeting of CAHF for education, information and networking. Member facilities should be sure their nurses who wish to participate are listed by CAHF under the appropriate facility/company.

Local Structure: CAHF also has affiliated CAHF Chapters throughout the state. Each is a separate corporation with its own Board of Directors, bylaws, articles of incorporation and reporting requirements, bank accounts, etc. Most are established as 501(c) (6) non-profit corporation. This separate identity is necessary for liability and legal reasons.

The State of California and the IRS requires groups who organize and collect dues or other types of revenue to be incorporated and to report their activities as well as other specific information including the names of the officers of the organization. Without a non-profit corporation organization, taxes might be due and liability may accrue to the leaders or organizers of the group. A bank will not open an account for such groups without an EIN number or the social security number of the organizational leadership.

CAHF’s (Statewide) Nurses Council is encouraging local nurses to organize in their regions and to come together for the mutual benefit of the local nurses and the companies they are associated with. However, such organizations need to have the protection and organization of a legal entity such as the incorporated local CAHF Chapter.

What Does This Mean?

• If you are going to organize a local Nurses Council it should be done as a subgroup of the local (separately incorporated) CAHF Chapter.
• Dues can be assessed specifically for nurses, but should be processed through the local CAHF Chapter bank account.
• You may also simply want to charge a fee to cover costs of specific events that are for nurses, but also process the funds through the CAHF Chapter.
• Nurses in the local chapter must be employed by CAHF member facilities.
• Non-member facility nurses may participate in specific events, but it is recommended that a higher fee for non-member facility individuals be charged.
• Nurses can meet at the same time as the CAHF Chapters or separately depending on preference.
• If a local group is unable/or unwilling to work through the CAHF Chapter, they must establish a non-profit corporation, with bylaws, articles of incorporation, etc.
• To help you establish a local nurses’ council, the following guidelines/suggestions have been prepared for your use.

Suggestions on How to Establish a Successful Local CAHF Nurses Council

The establishment of effective and functional local Nurses Councils is necessary to the overall success of the CAHF Statewide Nurses Council. Providing a voice for local nurses and a place to share best practices by starting, developing or improving local Nurses Councils, coupled with membership growth, is a primary objective of the Statewide Council. To assist in establishing effective local Nurses Councils, these suggestions are offered. Some of the existing Nurses Councils do not need any assistance, while for others, suggestions may be desirable. Some of the following material dealing with establishing a local Nurses Council has been obtained from several local councils which have an excellent track record for involvement in local issues and activities and for getting things accomplished. Individual Nurses Council representatives should examine the following material in an effort to identify and develop those sections of the suggested “model structure” that are adaptable to their particular area which might help them function more smoothly and efficiently.

SUGGESTED MODEL FOR THE STRUCTURE OF A LOCAL NURSES COUNCIL

I. INITIAL START UP

A. Contact with local CAHF Chapter President/Board:
   This is an essential first step to determine the support you can expect from the local CAHF Chapter organization and the relationship between the two. CAHF recommends the Council be a subgroup of the Chapter, so it can function under the existing corporate structure of the Chapter. Close coordination with the Chapter is essential for this to work. Once you have a sense of the interest of nurses in the area, have a group willing to take on the leadership, and organize; you can come back to the Chapter and Board to work out the details of the organization.

B. Contact With Potential Members:
   If a local Nurses Council has not been established in a particular area, obviously, it is necessary that the individuals involved in the start-up process take certain steps to solicit the participation of long-term care nurses in that area. The first step would involve contacting potential members. This can be accomplished by emailing or mailing out organizational meeting notices to all of the CAHF member facilities in the local CAHF Chapter. The local CAHF Chapter can be of significant assistance in encouraging member facilities to support their nurses’ participation in the initial organizational meetings.

C. Emphasizing Purpose of the Nurses Council:
   At the initial organizational meeting it is important to emphasize to the potential Nurses Council members the purpose of the statewide Nurses Council and to get their input about what benefit they would like to obtain from participation in a local nurses council. Those concerns are likely to be similar to the purposes of the statewide council.
The CAHF Statewide Nurses Council was formed to promote the profession and practice of long-term care nursing. The Statewide Council members can serve as spokespersons responding to the issues inherent or incidental to the provisions of quality resident care in nursing homes. The Council serves as a focal point for long-term care nurses to come together to share best practices and education that is specific to nurses service long-term care residents.

The Nurses Council’s goals should be highlighted and conveyed to the potential members. They are:

1. To promote quality care through development and maintenance of high professional standards.
2. To exchange ideas and information through regular meetings, publications and educational programs.
3. To promote recognition of the special characteristics and accomplishments of the long-term care nurse.
4. To be an effective representative of the profession to the legislature and to a number of regulatory agencies, consumers and the general public.
5. To interest and challenge nurse in long-term care as an opportunity for effectively dealing with a wide variety of issues.
6. To encourage an intentional and universal gerontological nursing component in basic educational nursing curriculum.

It is important that the potential member become aware of why the Council has been established and its primary goals and objectives. It is apparent that a career in long-term care nursing is different than a career in an acute care setting. Because of this, many of the challenges, concerns and rewards that the long-term care nurse may experience are different than those experienced by nurses in other career fields. This then is essentially the basis for the creation of a local Nurses Councils.

D. Benefits of Membership:
It is important to stress the benefits to individuals who are interested in becoming members of a local Nurses Council.

It is important to highlight the relationship that exists between the Nurses Council and CAHF. The Nurses Council can provide CAHF with input regarding state legislation or regulations that are introduced and its subsequent impact on the quality of care delivered to long-term care residents. In addition, the Nurses Council is a vehicle which can help provide status recognition to individuals in long-term care nursing, and it provides an opportunity and a forum for members to meet and discuss mutual challenges and issues of concern. The Nurses Council can also initiate and develop interest in the long-term care nursing field through participation at job fairs and various other career programs.

E. Follow Up on Potential Members:
After the initial contact has been made and a presentation is given to potential members, it is important for the Council members who initiated the organizing of the Nurses Council to follow up with those who attended the organizational meeting. Obviously, not all individuals that attend will become members of the local Council; therefore, a continued effort should be made to follow up on those individuals in an attempt to solicit their participation. Remember, all nurses employed in a CAHF member facility are members of the statewide Council.
II. COUNCIL FORMATION:

A. Officers and Duties:
There is no set standard for the number of officers a local nurses council should have. However, as a basic core it is suggested that the chapter contain at least three (3) of the following four (4) positions: President, Vice President, Secretary and Treasurer. Secretary and Treasurer can be combined into one office. The President of the local Nurses Council should, in essence, be the chief executive officer of the local group. The President should, subject to the control and direction of the local Nurses Council membership, have general supervision and provide direction with regard to the affairs of the local Nurses Council. The President should also preside at all of the local Nurses Council meetings and carry-out or cause to be carried out any policies, regulations, rules, motions or orders that are made by the local Nurses Council membership. The Vice President, by virtue of that office, would perform the President’s functions during any absence or inability to serve. The Vice President’s office can be an excellent training ground for the President’s office and because of this can provide the local chapter with a sense of continuity.

The Secretary of the local Nurses Council should keep or caused to be kept the minutes of the meetings and should be responsible for distributing meeting notices and/or other pertinent information to members of the local Nurses Council. The Treasurer should keep or caused to be kept and maintain adequate and correct books of the financial resources of the local Nurses Council Chapter and should be the direct link to the local CAHF Chapter and its Treasurer. This is necessary in order to obtain timely budget information relative to receipts and expenditures of the local Nurses Council, directly posted through the local CAHF Chapter accounts, if the local Nurses Council is NOT legally incorporated. It is important to note that a group of individuals cannot just gather into an organization, collect dues and give education classes for a fee, without a legal structure. The non-profit status of the Chapter provides a legal structure under which a local nurse council can collect dues, hold events, and represent nurses in the profession.

B. Committees and Duties:
The number of committees a local Nurses Council has depends largely upon the extent of participation by the local membership. As a core, the following committees might be established.

1. **Education Committee**: The Education Committee should provide Continuing Education Units (CEU’s) and speakers to members of the local Nurses Council on a regular basis. The Education Committee might also be responsible for organizing, planning and putting on a one-day workshop for Nurse Council members. Some chapters give scholarships from dues collected or funds raised. In general, speakers can provide the necessary CEU’s or they can be arranged through the local Chapter and/or QCHF.

2. **Public Relations and Outreach Committee**: The PR Committee should be responsible for the promotion of membership in the Council and outreach to the community supporting the profession of the long-term care nurse. Outside vendors and sponsors may also be solicited to support various meetings and events of the Council. The PR Committee should also be responsible for maintaining and establishing a good working relationship with the local media so that when items of interest arise, letters
to the editors need to be written, etc. an effort can be made to get positive news coverage in a timely, accurate and positive fashion.

Many other committees or task forces may be established depending on the number and time availability of the nurse members.

C. Creation of Operating Procedures:
The local nurse council may want to create a set of operating procedures to govern the workings of the Council. This will alleviate some of the problems that may arise during the course of the year, either through resignation of officers and/or questions concerning basic policies of the local Nurses Council. Bylaws are not necessary, unless the Council wishes to be separately incorporated.

D. Establishing Goals for Council Leadership and Committees
The local Council should establish duties for the leadership and committee goals which can be accomplished throughout the year. Initially, the duties and goals do not have to be extensive, however, assigning some specific goals and duties provide a roadmap for your leadership and a process for evaluating what you have accomplished.

E. Parliamentary Procedures:
The meetings of the local council can be a very informal affair. However, the leadership of the Nurses Council should become familiar with standard parliamentary procedures so that there is some form of structure to the council meetings.

F. Dynamics of a Nurses Council Meeting:
The importance of interesting and relevant council meetings cannot be overemphasized. The strength and effectiveness of the local chapter depends upon the extent of member participation, which in turn, many times is directly related to successful meetings. Attached, is a paper which has been developed dealing with holding “dynamic” Nurses Council meetings. This paper may help guide Nurses Councils in holding relevant, timely and informative Nurses Council meetings.

III. MEMBER PARTICIPATION:

A. Motivation of Members
Because the Nurses Council, like CAHF, is a volunteer organization, sometimes it is very difficult to obtain continued member participation and support. Many times one individual or a handful of individuals will pick up the majority of the workload and eventually they become “burned out”. Therefore, motivating the members of the local Nurses Council to have a sense of belonging, accomplishment, and interest is essential. The Nurses Council leadership should use their imagination in developing incentives which will promote continued member participation.

B. Committee Assignments:
One method of soliciting participation and providing motivation is through committee assignments. To obtain maximum participation from members, an effort should be made to refrain from assigning any nurse council officer to be a committee chairman. By doing this you can involve more members in the function of the local Nurses Council. Also, a letter can be sent at the beginning of the year asking the local Nurses Council members which committee they would be interested in serving on. In this way, the
local Nurse Council members may feel as though they have an opportunity to participate in an area in which they have some interest.

C. Participation at CAHF Statewide Meetings/Events
An effort should be made to involve the local Nurses Council members in the statewide CAHF meetings, events and training to stimulate their interest in the “big picture” as it relates to activities and issues at the state level. If the local Nurses Council is located in either the north or south they have an opportunity to participate in at least one statewide meeting.

IV. RELATIONSHIP WITH LOCAL CAHF CHAPTERS

A. Importance of Mutual Cooperation and Interaction
The relationship that exists between the local CAHF Chapter and the Local Nurses Council is very important. The local Nurses Councils are encouraged to use the local CAHF Chapter financial structure in handling the local Nurse Council finances. Whenever possible, the local Nurses Council leadership should explore having the local CAHF Chapter appoint a member of the Nurses Council on their local CAHF Chapter Board of Directors.

Additional steps the local Nurses Council can undertake to form a strong relationship with the local CAHF Chapter may include:

1. The Nurse Council should volunteer its members to participate on local CAHF Chapter committees.
2. The President of the Nurse Council may be part of the Chapter Board.
3. The members of the local Nurses Council should be willing to accept all assignments the local CAHF Chapter may ask them to undertake. The Council should ensure that all assignments are accomplished.
4. The Nurses Council should attempt to have a representative or spokesperson present at all of the local CAHF Chapter meetings.
5. The Nurses Council should try and set up joint meetings between the Nurses Council and the local CAHF Chapter on a periodic basis whenever appropriate programs may be timely and informative to both groups.
6. The Nurses Council should attempt to have their meeting schedules included on the CAHF Chapter calendar on the CAHF Website by working through the local Chapter officers or contacting the state level CAHF communications staff at info@cahf.org.
DYNAMICS OF HOLDING SUCCESSFUL NURSES COUNCIL MEETINGS

I. Prior to scheduling any meetings
   A. Appoint one person to be responsible for meeting arrangements.
      (Some Councils use their Secretary/Treasurer or Education Chair for this)
   B. Select a site for general conditions.
      1. Close to majority of all members – not necessarily in center of geographic area.
      2. Easily accessible from freeways.
      3. With adequate, secure, and hopefully free parking.
      4. With more than one meeting room – so you have room sizes to fit your needs.
      5. With a menu suited to the members’ personal tastes and cost expectations.
   C. Select a site for specific needs.
      1. Make sure the meeting room is just large enough to accommodate your group – a room that is
         too small makes it crowded and uncomfortable; a room too large makes it feel cold, empty, and
         the meeting appears to be a failure and poorly attended.
      2. Make sure the room is brightly lit – if you can reduce the lighting during the meal – all the better.
      3. Make sure the facility can accommodate various types of meetings such as providing flip charts,
         public address system, electrical outlets for PowerPoint, screen, etc. (These will likely cost
         additional money).
      4. Evaluate cleanliness of rest rooms and ease of access from the meeting room(s).
      5. Consider nature of the other groups when scheduling your Nurses Council meeting to ensure the
         meeting will not be distracted by other scheduled groups which may not be compatible on the
         date of your meeting.

II. Prepare a schedule for the year if possible
   A. Check the Association’s master calendar and select a day of the month which will not be in conflict
      with previously scheduled CAHF meetings, a training class by QCHF or a meeting date of the local
      CAHF Chapter.
   B. Check the calendar for holidays falling on the day of the month you plan to have your meeting on or
      an observed religious holiday for some of your members.
   C. Keep meetings on a “standard” day of the week and month whenever possible.
   D. Publish your full Nurses Council year’s meeting plan to include regular meetings as well as special
      training functions.
   E. Provide full addresses with telephone numbers and map if needed on your annual meeting schedule
      and have this posted on the CAHF Statewide Nurses Council web-site and in the local CAHF
      Chapter CAHF web-site.
   F. Do not move meetings off scheduled dates or to new locations unless absolutely necessary.
III. Arrangements for your meeting
A. The person responsible for meeting arrangements should have the room arranged for each meeting
B. Use round tables of 8 or 10 for meetings with meals.
C. Use class-room style or theater style arrangement for meetings without meals.
D. Avoid U-shaped, T-shaped, long-table style, and elevated “head-table” arrangements.
E. If your meeting requires a PA system, piano, projector set-up, flip charts etc., be sure to notify the
   site personnel management well in advance of the meeting and verify this has been done at least 1
   hour before the scheduled meeting time.
E. Have a registration table set-up at the door but not in the way.
F. Provide the registration table with at least two typed copies of the people attending, in alphabetical
   order, so all you have to do is check them off when they come in.

IV. Have “greeters” at the door to welcome new and potential Nurses Council members
A. Rotate this assignment to help everyone get to know everyone.
B. Give the “greeters” something fun to do during the meeting.
C. Greeters should help steer people to seats to encourage mixing and prevent development of clicks
   and exclusion of newcomers. Encourage nurses from the same facility to sit at different tables.
D. Greeters should introduce people at a table to each other. They should give “newcomers” VIP
   Treatment to make them welcome, introduce them to the members at their table, and thank them for
   coming at the end of the meeting and let them know you look forward to seeing them at the next meeting

V. Arranging the programs for your meetings
A. Appoint a person to be responsible for arranging the programs for your Nurses Council meetings
B. Do not be limited in the type or content of your programs. Although your nurse council members are
   primarily interested in LTC issues, they can also benefit from and enjoy meetings which include subjects
   related to customer service, innovative nursing care programs in the community and significant new
   trends in long-term care nursing.
C. Have variety in the “style” of meetings. Have some speakers lecture, some panel groups, some with
   visual power point, movies and some with extensive “audience participation”.
D. Be sure each meeting has some fun-time built into it, along with the business portion dedicated to
   business of your local Nurses Council Chapter.
E. Use as many components of your nurses council membership as possible at each meeting:
   1. Allocate about 15 minutes of each meeting for one of the Associate Members to address the
      council and get their message across. Associate members who attend regularly should have this
      opportunity at least once per year. They can be supportive of the work of your council and
      involved in various events.
   2. Allocate time for one or more committee reports on the program. Rotate these assignments to let
      the members know what the committees are doing and motivate the committees to do something
      positive they can report on.
   3. Include something of special interest at each meeting for each component of your nurse members
      represented, long-term care, hospice, rehabilitation, subacute, etc.
F. Offer CEU credits for as many of your programs as possible. Speakers (especially those representing
   specific vendors) will often already have the CEU’s available. The local Chapter and/or QCHF also can
   assist with obtaining CEUs.
G. Use local and knowledgeable speakers whenever possible. Many Associate members and their companies with timely clinical and resident care products and services will be more than happy to address the members of your nurses council.

VI. **E-mail and mail meeting notices on a regular basis**
A. E-mail, send and/or make reminder calls each month when you have a scheduled meeting. All nurses are very busy people and the courtesy of a reminder will be appreciated and will insure you get good attendance at your meetings. Be creative in your meeting notices and in describing your meeting program.
B. Whenever possible include a copy of the minutes of the last Nurses Council meeting so that your members can stay current and engaged from one meeting to the other. If this is not possible, make sure copies are available and distributed at the next regularly scheduled meeting.
C. Always provide a meeting agenda so that members have an idea of what to expect.
D. Include special promotional materials from or about your speaker or program. If your nurses council meeting is sponsored by an associate member, be sure to have their promotional material available for distribution at the meeting.

VII. **Elaborate on issues and goals, avoid rehashing what they already know**
A. The nurse council leadership should provide additional information on subjects which have been communicated to the members. Report on how this got to be an issue, what options were available to the leadership of the nurses council, and why the nurse council leadership select this approach. Why is “Pay for Performance” important, what does transparency mean to facilities they work for? Etc.
B. Relate how the local facilities they work for as nursing professionals fit in, what they need to do or can do, on an issue, subject, or project so they feel a part of the total local, state and national effort.
C. Call for action. Get feedback from your nurse council members on policy issues being considered so the President of your local Nurses Council can represent these viewpoints at other CAHF meetings or at the local CAHF Chapter. Set internal goals for your members to participate whenever possible. Make them feel involved and needed.

VIII. **Structure working committees of your Nurses Council**
A. Prepare a list of goals of all the things you would like to accomplish for the next 12 months.
B. Group these goals into general areas which could be handled by different committees.
   1. Write your nurse council’s committee objectives in simple, measurable terms, with deadlines.
   2. Include some fun things for each committee to do along with the “work objectives” of your council.
   3. Be sure your “outcome” goals are reasonably attainable.
C. Evaluate your nurse council membership to determine who can serve on each of these committees.
   1. Identify key, strong members for each committee area.
   2. Identify others who might be willing to help on a committee and be developed for future leadership in that area of interest.
   3. Match the resources available with the goals in that area and reduce the “wish” list to a realistic list of objectives for each committee.
E. Appoint only those committees you really need.
F. Be sure you provide a means for your Nurses Council to accomplish goals which parallel and support the CAHF Statewide Nurses Council, CAHF and the local CAHF Chapter.
G. The officers of the Nurse Council should meet with each committee to discuss their goals, ways to accomplish them, and allow the committee to modify, add or delete those goals – so they feel committed to the final set of goals and objectives.
H. Ask each committee chairman to give the Nurse Council board a status report and provide support guidance to them as needed.
I. Give each committee recognition as often as possible – at Nurse Council meetings, send personal notes to the chairman, etc.
J. Do a mid-year review of all your committees and goals
K. Use the committees of your Nurses Council to identify and develop new leadership for your Nurses Council Chapter.

IX. Cultivate the members
A. Involve every member of your nurses council in some project, committee at some point during the year.
B. Thank and praise individuals in private and public, verbally and in writing.
C. Seek ideas, comments, and suggestions and incorporate these into activities of your nurses council as much as possible.
D. Have fun.
E. Allow time for informal socialization and build in some planned fun things for your members at each meeting
F. Don’t let meetings drag on or become redundant.
G. When projects or goals don’t turn out as planned, avoid the temptation to assign blame. Instead explore new options and ideas for turning the negative into a positive.

X. Groom your successors
A. Identify and develop the next two levels of leadership who will take-over key roles in your local nurses council in the next couple of years.
B. Don’t expect to accomplish all of your goals in your term of office.
   1. Set the course, and set high goals.
   2. Accomplish as much as you can.
   3. Groom your successor on the nurses council to finish the things you have started.
C. Remember that the nursing profession with its challenges, will continue. As a leader in your Nurses Council, you need to chart the course, create the teams, build enthusiasm and provide an environment which – will allow your Nurses Council to flourish long after your term of office has expired.

(Rev 7/19/10)