

06-27 Seminar Meeting: Resident Advocacy, Financial Report, and Community Concerns
Date & Time: 2025-06-27 10:00:24
Location: [Insert Location] Attendees: [Speaker 1] [Speaker 5] [Speaker 8] [Speaker 10] [Speaker 3] [Speaker 6] [Speaker 12] [Speaker 7] [Speaker 9] [Speaker 4] [Speaker 2] [Speaker 11]

1. Treasurer's Report for May Conclusion

The organization's finances remain stable with a small disbursement and no income for May, ending with a balance of \$13,102.

Discussion Points

1. [Speaker 2]:The financial status is stable with minimal disbursements.
 - Beginning balance for May: \$13,131.30
 - No income
 - Disbursements: \$29.30
 - Ending balance: \$13,102

2. Distribution and Access to Meeting Minutes Conclusion

Conclusion

Meeting minutes are available electronically and can be printed upon request to minimize paper usage.

Discussion Points

1. [Speaker 3]:Meeting minutes are distributed via email to the front desk and can be printed on request to reduce paper waste.
 - Five copies brought to and from last month's meeting
 - Minutes sent to front desk via email

3. Leave of Absence and Advocacy Forms Conclusion

Residents are encouraged to complete leave of absence and advocacy forms, and may opt to list their advocate in the resident directory for transparency.

Next Steps

- ☐ Residents to fill out leave of absence forms when away overnight or longer; review and consider completing

advocacy forms; optionally provide advocate information to be added to the resident directory.

Discussion Points

1. [Speaker 1]:Residents should fill out leave of absence forms when away overnight or longer for operational awareness.
2. [Speaker 1]:Advocacy forms are valuable for designating someone to share medical or location information with others, in compliance with HIPAA. - HIPAA laws prohibit sharing medical information without consent - Advocacy forms allow a designated person to share information with permission
3. [Speaker 4]:Advocates can be listed in the resident directory if residents wish to share that information.

4. Handling and Storage of Advocacy Forms Conclusion

Advocacy forms are to be submitted to nursing staff for proper record-keeping.

Discussion Points

1. [Speaker 1]:Completed advocacy forms should be given to the nursing staff for inclusion in medical records.

5. Library Catalog and Volunteering Conclusion

A new library catalog is in place and more volunteers are sought for library operations.

Next Steps

- ☐ Residents interested in volunteering for the library are encouraged to participate.

Discussion Points

1. [Speaker 1]:A new library catalog is available, organized by title and author, and new books have been added.
2. [Speaker 1]:Additional library volunteers are needed.

6. Request for More Interesting Programs Conclusion

Residents are invited to collaborate on planning additional programs, working in coordination with Roxana.

Next Steps

- ☐ Residents interested in program planning should contact [Speaker 1] to form a group and coordinate with Roxana for scheduling.

Discussion Points

1. [Speaker 1]: There is a need to explore and plan more interesting programs and speakers to encourage engagement.
2. [Speaker 1]: Residents can form a group to discuss and plan programs, which will not conflict with Roxana's official activity planning role.
 - Roxana is responsible for official activity scheduling
 - Residents have historically planned their own group activities

7. Bottle Bank Fundraising Report

Conclusion

The bottle bank fundraising is on track, with appreciation for community support and encouragement to continue.

Discussion Points

1. [Speaker 7]: The bottle bank project is progressing well and is expected to reach the annual goal.
 - 14 bags delivered in June
 - Total of \$58.48 collected
 - Annual goal: about \$700
2. [Speaker 7]: The project is valuable and should continue.

8. Liquor Service Compliance

Conclusion

Staff are taking necessary steps to comply with liquor service regulations to continue providing cocktails at events.

Discussion Points

1. [Speaker 1]: Serving hard liquor requires staff to complete a 20-hour online course; Angie is licensed, Roxana is currently completing the course.
 - 20-hour online course

required for serving hard liquor - Angie already licensed
- Roxana is taking the course

9. Announcement of Upcoming Food Committee Meeting

Conclusion

Residents are encouraged to attend the Food Committee meeting on July 8, at 10:30 to share ideas or questions about dining.

Next Steps

- ☐ Ensure the meeting is displayed on the screen and encourage participation.

Discussion Points

1. [Speaker 1]:Encouragement to Attend Food Committee Meeting - Food Committee meeting scheduled for July 8 at 10:30. - Past meetings were perceived as negative, but recent ones are more positive and fun.

10. Expression of Gratitude for Group Discussion and Report Preparation

Conclusion

The group discussion and resulting report were collaborative efforts, widely appreciated, and considered valuable for future affiliation discussions.

Discussion Points

1. [Speaker 1]:Gratitude for Participation and Committee Work
 - 40 people attended the group discussion. - Rod developed and led the program and typed up post-it results.
 - Yvonne formed a committee with Pam Bledsoe, Jo Ann Wink, Kendi Naughton, and Margaret Michon. - Kendi did the write-up distributed to all. - Mary read the report and found it extremely valuable for potential affiliates.
2. [Speaker 8]:Emphasis on Group Contribution - The document was a group effort with everyone contributing equally. - The process involved reviewing all information from Rod, critiquing notes, and compiling recurring themes,

especially gratitude, frequently mentioning the dining room, CNA, and nursing staff.

11. Concerns About Positivity Bias and Lack of Negative Feedback in the Report

Conclusion

While the report focused on positives for the purpose of affiliation, there is recognition of the need to also address areas for improvement.

Discussion Points

1. [Speaker 1]:Report Presents an Overly Positive Image - The report makes the community sound perfect, like 'Utopia' or 'Shangri-La', with no problems mentioned.
2. [Speaker 4]:Acknowledgment of Minimal Negative Feedback - There is a page listing things needing fixing, but it is minimal.
3. [Speaker 1]:Purpose of the Report Clarified - The report was meant to express what is most valuable in the community for potential affiliates. - Discussion of improvements can happen internally.
4. [Speaker 3]:Need for Honesty About Areas for Improvement - It's important to also discuss what needs improvement, not just positives.
5. [Speaker 6]:The report has a "utopian bias" and is considered "a piece of a jigsaw puzzle" rather than a complete picture.

12. Discussion of Non-Negotiable Values and Affiliation Concerns

Conclusion

There is a need to clarify and communicate non-negotiable values and concerns, especially regarding property, board composition, and affiliation, and to ensure these are addressed before final decisions.

Next Steps

- ☐ Send the report to John Casey for inclusion in the board's consent agenda; board members to review before the meeting.

- ☐ Residents can submit questions to Mary for response at the leadership meeting on the second Wednesday in July.

Discussion Points

1. [Speaker 5]:Non-Negotiable Items Missing from the Report
 - Example: The 14 people in the flats should not be evicted after new management.
 - Proposal: Add a non-negotiable that the real estate of the heritage will not change ownership for the next 30 years.
 - Concerns about board composition after affiliation, and the need to address "harder issues" as a group rather than behind closed doors.
2. [Speaker 1]:Some Decisions Are at the Board Level
 - Certain non-negotiables will be decided by the board.
 - Assumption that flats are too valuable to be sold and residents are safe.
 - There are three possible affiliates being considered, with the board currently focused on financial information.
3. [Speaker 9]:Suggestion for Affiliate Residents to Undergo Same Process
 - If an affiliate is chosen, their residents should also do a similar values-identification process.
4. [Speaker 11]:Timing of Expressing Non-Negotiable Issues
 - Non-negotiable issues should be communicated before an affiliate is selected, not after.
5. [Speaker 1]:Board's View on Non-Negotiables
 - Board has five broad non-negotiables focused on culture: caring, compassion, cooperation, etc.
 - Specifics discussed by residents fall under these broader categories.
6. [Speaker 8]:Discomfort with 'Non-Negotiable' Language
 - Expressed discomfort with the term "non-negotiable," feeling like a small person dictating terms to a larger entity and acknowledging they are not in charge.

13. Procedures for Raising and Addressing Resident Concerns

Conclusion

The formal process for raising concerns is to submit them in writing to Margaret, who will ensure they are addressed at the leadership meeting; informal conversations with Mary also occur but are not the official channel.

Next Steps

- ☐ Residents to submit concerns in writing to Margaret for formal consideration.

Discussion Points

1. [Speaker 12]: Formal Process for Submitting Concerns - Concerns should be put in writing and submitted to Margaret. - The Executive Council and Residence Council pass comments to Mary for response at the leadership meeting.
2. [Speaker 1]: Informal vs. Formal Channels - Residents often speak to Mary informally, but formal written submissions are the official process.
3. [Speaker 5]: Leadership's Role in Aggregating Concerns - Resident council leadership is responsible for aggregating concerns and passing them on for leadership or town hall meetings. - Concerns were raised about the difficulty of getting issues addressed if not through the formal Resident Council channel, referencing a letter from Randy Gridley, Chairman of the Board.

14. Loss of Social Work Support After Health Center Closure

Conclusion

The closure of the health center and loss of social work support is a significant concern for some residents.

Discussion Points

1. [Speaker 10]: Negative Impact of Health Center Closure - Closure led to loss of social workers who provided valuable support, perceived as a way to "save some more money." - Personal anecdotes highlighted the importance of social workers over the past 13 years, with the speaker feeling strongly about this loss.

AI Suggestion AI has identified the following issues that were not concluded in the meeting or lack clear action items; please pay attention:

1. The community's non-negotiable values and concerns—such as property ownership, board composition, and resident security—have not been clearly defined, formally communicated to the board, or incorporated into official documents. There is an urgent need to clarify, document, and discuss these values before any affiliate is selected to ensure they are protected and understood by all stakeholders.
2. The process for submitting resident concerns remains inconsistent and unclear, leading to confusion between informal and formal channels. It is necessary to standardize and reinforce a formal written submission process to Margaret, ensure concerns are aggregated and addressed at leadership meetings, and communicate this process clearly to all residents.
3. The loss of social work support following the health center closure has not been addressed, leaving residents without essential services. There is a need to revisit the impact of this loss and actively explore options for restoring or replacing social work support for residents.
4. Compliance with liquor service regulations is at risk, as Roxana has not yet completed the required 20-hour course and it is unclear if all staff serving liquor are properly licensed. Immediate monitoring and verification are needed to ensure all legal requirements are met and to avoid potential legal liabilities.
5. The advocacy and privacy procedures for residents are not fully understood or consistently followed. There is a need to clarify the process for completing and submitting advocacy forms, formalize the listing of advocates in the resident directory, and communicate these procedures to all residents to ensure privacy and advocacy needs are met.