

**CHC Worst Case Scenario 8:** You are experiencing a decline in health/ability and, as a result, have trouble participating as you have in the past. How should these changes be managed—how do you want to be approached by the CHC chair for a discussion or redirection of your efforts?

**Best CHC Outcome Scenario 8:** That we accept responsibility to monitor our own abilities and how changes in abilities affect our service to the CHC, as well as, our safety and the safety of others.

**1. Gather information — *What information do we need before taking action?***

- What changes have you noticed in your service from when you started to where you are now?
- How do those changes impact the work you perform for the CHC?
- Could any of those changes impact your safety or the safety of others?
- Could any of those changes impact your decision-making or the integrity of the CHC?
- Did your CHC leaders convey expectations of performance/abilities upon appointment/ reappointment?
- Did your CHC leaders ask you to be open about any issues that could impact your performance?
- Did you offer information about any issues that could impact your performance?

**2. Consider relationships — *What to keep in mind to maintain respectful relationships?***

- Know that this is a very emotional topic and that people vary in their ability to openly discuss these issues.
- Consider suggesting the CHC address aging/declining health and ability in a roundtable format.
- If your abilities decline to the point that you put yourself or others in danger, your fellow appointees have a legal and ethical responsibility to figure out ways to address the situation.
- At times when healthy/ability is declining, you can gain some of the control you may feel you have lost by being the one to decide that you will adjust responsibilities rather than someone else making that decision for you.

**3. Make a plan — *What actions should be taken to accomplish best case outcome?***

- Be open about any concerns you have about your ability to serve and voluntarily step back from CHC duties that may be too demanding or make you uncomfortable.
- If your abilities have changed over time, consider taking up a different role with the CHC or with individual CHC activities/events.
- Work with your CHC officers to designate ways to serve that are compatible with your abilities and provide opportunities for you to be useful and learn more.
- Train others to do what you do, so that when you need to reduce activity, someone will have your level of understanding and care.
- Establish with appointees an awareness of expectation with respect to self-monitoring.
- With annual onboarding and training, ask individuals to self-evaluate abilities and update a list of tasks each is willing to take on and any tasks each may be unwilling to perform.
- Rotate responsibilities so that no appointee becomes fixed in a position that is too demanding, or takes ownership to the point that the appointee is unwilling to let go of the position.
- Chair must be aware and recognize signs of fatigue amongst aging appointees and volunteers.
- Take/make opportunities to have this discussion with appointees on a regular basis, so that the discussions are expected and less confrontational.