

Deputy's Diary: *Rogue or Zombie: Both Gotta Go!* Wayne Nelson Ph.D.

During the recent District Investigators (DI) training, we explored the DIs' leadership role and its link to program quality. We had a vigorous discussion of what constitutes effective advocacy. The DIs strongly believe that program effectiveness depends on the ombudsmen's achievements, including problem identification, issue resolution, resident empowerment, enhanced quality of life, improved services and other resident-centered results. These are the key measures of ombudsman program effectiveness, and the DI is there to help ombudsmen achieve these goals.

Like the field officers, part of the DI's job is to identify ineffective ombudsman behaviors and help ombudsmen overcome challenges and barriers. They also strive to motivate and empower each Certified Ombudsman. This is a complex, difficult, but important task.

During our discussion I used the term "rogue ombudsman" (*Rogus loco hostilius*) to describe a certain type of ineffective ombudsman. We had invited a guest who was observing our training pursuant to a national ombudsman review project. At the break, she wanted to know more about rogue ombudsmen. Webster's defines rogue as a "Vicious and solitary animal that has separated from the herd." I went on to tell her that rogues' hearts are often in the right place, but they act in a very aggressive manner, employ nasty and unfair shoot-from-the-hip tactics, show blatant contempt for all care providers and generally create more problems than they solve. They seldom do their homework, rarely have their ducks lined up, never pick their fights well and demonstrate a profound lack of people skills. They are nitpicking nabobs of nastiness, long on spunk, but short on credibility.



However, in reality the true rogue ombudsman is actually quite a rare rascal—there have been very few rogues in the entire history of the program. Nonetheless, the legend of the rogue ombudsman never dies, but lives on to the detriment of program credibility, especially among providers.

Later, I confirmed this by asking the twenty or so program leaders, Field Officers and District Investigators if they knew of any rogue ombudsmen. I counted hands. As I suspected, only four hands pierced the air. We went on to discuss a more pervasive threat to program effectiveness and program credibility: the zombie-ombi.

Zombudsmen come in all shapes and sizes, but they have one thing in common. They don't do effective ombudswork. A zombie is a reanimated corpse. I define an ombi-zombie as one with the title of ombudsman, but in whom the spirit of ombuds-advocacy is quite dead. Some ombi-zombies are mere friendly visitors, who enjoy the company of residents, but don't want to move outside the safe and nurturing realm of warm fuzziness. Some ombi-zombies are aware of problems, but have come to accept a certain level of bad care because they believe that to be a realistic expectation. Others simply can't see problems, even when they stare them directly in the face. Still others want to be effective but lack the skills. Some just don't do anything. They represent the ombi-zombie subspecies of *Tigris papyrus*, or paper ombudsmen, who rarely even visit their facilities.



When asked how many had Zombudsmen in their districts, every DI, Field Officer and Meredith Cote the State Ombudsman, raised a hand. All agreed this is our biggest program effectiveness issue. The group committed to fight Zombudsmenia by modeling proper behavior, providing training on problem diagnosis and resolution, and by giving constructive feedback.

We concluded by agreeing that the rogue ombudsman and the ombi-zombie have one thing in common: they both are creatures with big hearts who are, as Webster would say, "separated from the pack." We want our rogue and zombie brothers and sisters to come back into the fold. We are committed to help them. We need them and the residents need them. But if rogues cannot be tamed and zombies cannot be brought back to life, at some point they have "gotta go," as one DI put it. This might sound harsh, but it is true. Resources are too scarce, and the credibility of the Ombudsman Program too important to allow these behaviors to go uncorrected. We owe the residents more.