



INSTITUTE FOR PATIENT- AND FAMILY-CENTERED CARE®

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PREPARING AND SUPPORTING PATIENT AND FAMILY ADVISORS

In order for patients and families to participate effectively as advisors, appropriate orientation, training, preparation, and support should be provided. Patient and family advisors should have a chance to discuss their questions or thoughts about the work with a staff member (often called a “staff liaison”) who has time dedicated to coordinating activities with advisors.

The orientation for patient and family advisors should include information on the following if it has not been provided during your recruitment process:

- ▶ The mission, goals, and priorities of the primary care or ambulatory practice
- ▶ Patient- and family-centered care
- ▶ Overview of patient experience, quality, and safety
- ▶ Specific skills and knowledge needed to be an effective team member (e.g., quality improvement methodology for those serving on a quality improvement team)
- ▶ HIPAA and the importance of privacy and confidentiality
- ▶ Communicating collaboratively:
 - Expressing your perspective so others will listen
 - How to ask tough questions
 - What to do when you don't agree
 - Listening to, and learning from, the perspectives of others
 - Thinking beyond your own experience

If the organization has a volunteer program, its orientation and training may be very useful for patient and family advisors. Other training issues to consider include:

- ▶ Speaking the organization's language, “Jargon 101.” While it is best to reduce the amount of jargon used in collaborative endeavors, sometimes it is impossible to completely eliminate jargon. If there are terms that will be used frequently in meetings, make sure that patient and family advisors understand them. Encourage them to ask for an explanation of anything they don't understand.
- ▶ Who's who in the organization or on the project team and how to contact team members.
- ▶ How to prepare for a meeting: what to wear, what to do ahead of time, and what to bring.

- ▶ How meetings are conducted: format, agenda, minutes, roles (e.g., secretary, timekeeper).
- ▶ Training for any technologies that will be used (e.g., conference calls, web-based tools).

SPECIAL TIP: It is extremely helpful for new patient and family advisors to have a “coach” or mentor who can provide informal ongoing support to them. A member of the council, clinical transformation team, or committee who has experience working on collaborative initiatives (either a staff person or an experienced patient/family advisor) can be assigned to this role. This person can ensure that patient and family advisors are prepared for each meeting. During meetings, this person can actively encourage participation of the advisor. They can debrief after each meeting to determine what additional information or resources patient and family advisors need. Most importantly, they can support patient and family advisors in participating fully on the team by providing feedback and encouragement.