A CHECKLIST FOR ATTITUDES ABOUT PATIENTS AND FAMILIES AS ADVISORS

Use this tool to explore attitudes about patient and family involvement in their own health care and as advisors and/or members of improvement and redesign teams. It can be used for self-reflection and as a way to spark discussion among staff and physicians before beginning to work with patients and families as members of advisory councils, and quality improvement, policy and program development, and health care redesign teams.

Answer and discuss the following questions:

At each health care encounter:

- Do I believe that patients and family members bring unique perspectives and expertise to the clinical relationship?
- Do I work to create an environment in which patients and families feel supported enough to speak freely?
- Do I listen respectfully to the opinions of patients and family members?
- Do I encourage patients and family members to participate in decision-making about their care?

At the organizational level:

- Do I consistently let colleagues know that I value the insights of patients and families?
- Do I believe in the importance of patient and family participation in planning and decision-making at the program and policy level?
- Do I believe that patients and families bring a perspective to a project that no one else can provide?
• Do I believe that patients and family members can look beyond their own experiences and issues?

• Do I believe that the perspectives and opinions of patients, families, and providers are equally valid in planning and decision-making at the program and policy level?

If you have experience working with patients and families as advisors and/or members of improvement or other teams, answer and discuss these additional questions:

• Do I understand what is required and expected of patients and families who serve as advisors and/or members of improvement or other teams?

• Do I clearly state what is required and expected of patients and families in their roles as advisors?

• Do I help patients and families set clear goals for their role?

• Do I feel comfortable delegating responsibility to patient and family advisors and improvement team members?

• Do I understand that an illness or other family demands may require patients and family members to take time off from their responsibilities on these teams?

Adapted from Jeppson, E. & Thomas, J. Essential Allies: Families as Advisors (1994) Institute for Patient- and Family-Centered Care, Bethesda, MD.