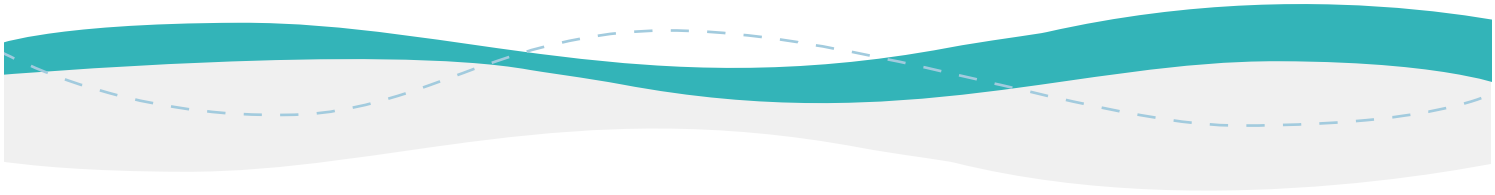

4. Which unit(s) provided care for you or your family member: (check all that apply)

‰ [Insert name of unit]

‰ [Insert name of unit]

‰ [Insert name of unit]

‰ [Insert name of unit]

5. We recognize that our patient and family advisors have busy lives. How much time are you able to commit to being a patient and family advisor? (Check one)

‰ Less than 1 hour per month

‰ 1 to 2 hours per month

‰ 3 to 4 hours per month

‰ More than 4 hours per month

6. Are you available to serve as an advisor for at least 1 to 2 years?
(You can still be an advisor if you answer "no.")

‰ Yes

‰ No

7. How do you want to help? I want to: (Check all of your interest areas) [NOTE: Edit the list below as appropriate for your hospital's priorities]

‰ Serve as a member of the patient and family advisory council. Potential advisory council members should be ready to commit to serving on the council for at least 1 to 2 years. The advisory council meets once a month for 1 ½ to 2 hours.

‰ Help develop or review informational materials for patients and family members.

‰ Help improve patient safety and the prevention of medical errors.

‰ Help improve the patient and family role in care decisionmaking.

‰ Help improve the hospital facilities (for example, patient care areas or family resource room).

‰ Help educate or train hospital staff and clinicians.

‰ Review procedures and provide input to improve the hospital admission process.

‰ Provide input as we implement bedside shift report, where nurses who are going off duty share information with nurses coming on duty at the patient's bedside.

‰ Review procedures and provide input to improve transitions in care (for example, between hospital units or discharge from hospital to home).

‰ Other issues (please describe) _____

_____

_____

_____