

Tips for Developing a Community Advisory Board

A community advisory board (CAB) can be an essential resource for your equity-focused quality improvement efforts. The participants, who are recruited from the same community as your patient population, can provide valuable insight into the underlying dynamics of certain disparities. These complex issues include cultural beliefs and values that can inform critical aspects of intervention design, as well as patients' perspectives of healthcare delivery in your organization. Your CAB can help maximize the chances that your equity-focused quality improvement interventions will succeed.

While the benefits to your quality improvement efforts can be exceptional, it is important to understand the level of effort necessary for initiating and maintaining a CAB. An optimally-functioning CAB is time-consuming and intensive. By creating a CAB, your organization is agreeing to participate in an ongoing collaborative relationship with members of your local community. If your organization cannot realistically support a CAB, it may be better to hold focus groups to learn about and specific patient perspectives.

The tips and resources below can assist your healthcare organization with developing and maintaining an effective CAB.

Organizing a CAB

- Begin to identify process goals and outcome goals for the CAB. In other words, the group will have goals to reach and will need methods to reach those goals.
- Begin to plan for logistical issues. These questions do not need to be answered before the group meets, but it is helpful to discuss these issues with senior leadership while planning for your CAB.
 - Considerations for group meetings:
 - How often will they be scheduled?
 - Where will they be held?
 - How long will they last?
 - How formally will the meetings be structured? Will you use Robert's Rules of Order?
 - Will you provide food, childcare, or cover transportation costs?
- Identify a specific individual to oversee the process of organizing the CAB. This role is critically important because this person will be responsible for bringing together community members and organization staff to discuss difficult issues and work together to develop appropriate responses.
 - If someone from within your organization takes on this role, ensure that s/he has protected time specifically for their CAB responsibilities.
 - Consider hiring an individual from the community for this role.
 - Evaluate personality traits and interpersonal skills to assess suitability for this position. Cultural competence is particularly important.
 - Once the CAB is set up, the members can determine leadership structure for the group.
- Recruitment and retention
 - Recognize that recruiting and retaining CAB members is an ongoing process, not a one-time event.

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- Plan your CAB structure to be responsive to cultural norms that influence group decision-making processes.
- Clearly explain the purpose of the CAB.
- Recognize that the individuals in the CAB may have social and political agendas that aren't shared by the majority of the group. Keep the group focused on priorities that the group as a whole has identified as relevant. (Marshall & Rotimi, 2001)¹
- Determine where and how recruitment for the CAB will be completed. Will individuals be recruited in person or via letters, phone calls or emails?
- Community members
 - Identify key community organizations that should be represented.
 - Individual interests may not coincide with community interests; these can be separate and, at times, conflicting. (Weijer, 1999)²
 - How will you gauge interest in CAB and organization goals?
 - Will you require prospective participants to receive their care at your organization? If not, how will you assure their ability to understand the patient's perspective?
- Determine which individual characteristics are essential for a representative CAB.
 - Consider race/ethnicity, sex, age, language
 - Is it important to have people who have any specific diagnoses?
 - Plan for the inclusion of individuals with different levels of education, literacy and technological knowledge.
- Health care organization members
 - Outline the process for identifying which staff will serve on the CAB. Organization involvement should not be limited to leadership or clinical staff.
 - Ask staff for feedback about developing a CAB.
 - Consider how your staff will respond to the CAB's input on internal processes.
 - Respond to their concerns about the CAB's influence.
 - Discuss how the CAB's input will be incorporated into organization protocol.

Once a CAB is established

- Consider including team-building activities in the initial CAB meetings.
- Establish boundaries for all CAB participants.
 - Create a safe space for participants to provide honest critiques of the healthcare organization and its practices.
 - Members should not be censored or penalized.
 - Clarify that even though every idea will be heard, not every idea will be implemented.

¹ Marshall, PA & Rotimi, C. (2001) "Ethical Challenges in Community-Based Research." *American Journal of the Medical Sciences*. 322(5):241-245.

² Weijer, C. (1999) "Protecting Communities in Research: Philosophical and Pragmatic Challenges." *Cambridge Quarterly of Healthcare Ethics*. 8:501-513.

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Selected Resources for Additional Information

Popular Literature

- Coulter A. (2011) *Engaging Patients in Healthcare*. Open University Press: New York.
- Gawande A. (2009) *The Checklist Manifesto*. Metropolitan Books: New York.
- Gittel JH. (2009) *High Performance Healthcare: Using the Power of Relationships to Achieve Quality, Efficiency and Resilience*. McGraw Hill: New York.
- Kaner S, Doyle M, Lind L, Toldi C, Fisk S, Berger D. (2007) *Facilitator's Guide to Participatory Decision-Making*. Jossey Bass: San Francisco.
- Surowiecki, J. (2004) *The Wisdom of Crowds*. Anchor Books: New York.

Peer-reviewed Literature

- Bunderson, JS & Reagans, RE. (2011) "Power, Status, and Learning in Organizations." *Organization Science*. 22(5):1182-1194.
- Elfenbein, HA & O'Reilly III, CA. (2007) "Fitting In: The Effects of Relational Demography and Person-Culture Fit on Group Process and Performance." *Group & Organization Management*. 32(1):109-142.
- Israel BA, Schulz AJ, Parker EA, Becker AB. (1998) "Review of community-based research: Assessing partnership approaches to improve public health." *Annual Review of Public Health*. 19:173-202.
- Langlely GJ, Moen R, Nolan KM, Nolan TW, Norman CL, Provost LP. (2009) *The Improvement Guide: A Practical Approach to Enhancing Organizational Performance*. Jossey-Bass: San Francisco.
- Minkler, M. (2004) "Ethical Challenges for the 'Outside' Researcher in Community-Based Participatory Research." *Health Education and Behavior*. 31:684-697.
- Wheelan, SA. (2009) "Group Size, Group Development, and Group Productivity." *Small Group Research*. 40(2):247-262.

Development and implementation sources

- Masaoka, J. "What is an Advisory Board and Should We Have One?" *Blue Avocado*. Aug 23, 2010. <<http://www.blueavocado.org/content/what-advisory-board-and-should-we-have-one>>
- "How to Develop and Maintain Community Advisory Boards." The National Mental Health Association. Oct. 19, 2005. <<http://ncstac.org/content/materials/ConsumerAdvisoryBoard.pdf>>