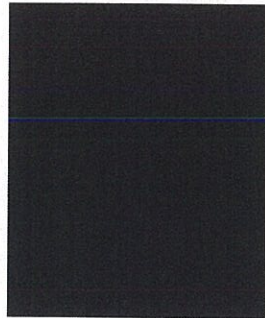
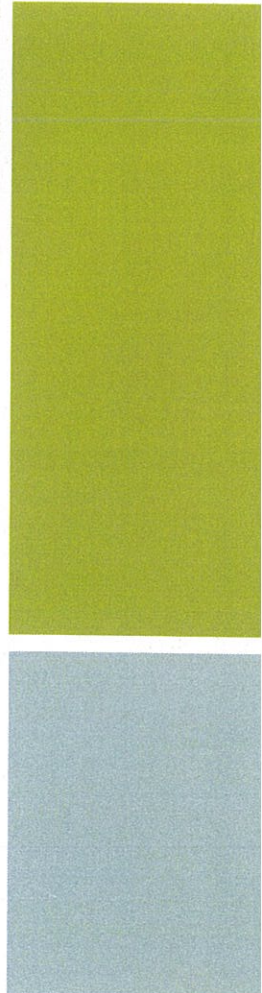


8. Please share a memorable experience you had with FMHC:

Thank you for your interest in Family Medicine Health Center, Patient & Family Advisory Group. Should you have any questions, please feel free to call Dave at 208-514-2500 ext. 1168 or Cory at 208-514-2500 ext. 1111. We appreciate you taking the time to fill out this application and would ask that you fax it to 208-375-2217 or mail to:

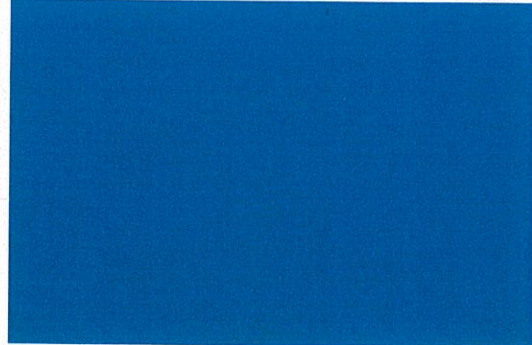
Patient and Family Advisory Group
Family Medicine Health Center
777 N. Raymond
Boise, ID 83704-83704-9251



FAMILY MEDICINE HEALTH CENTER



Patient & Family
Centered Care



Patient & Family Advisory Group

The group consists of patients and/or their family members and staff, who work together to strengthening partnerships between patients, families, and the health care community.

The group represents a diverse population of age, gender and cultural backgrounds. Together, they listen, communicate, plan and develop responsive services.

Join Our Patient & Family Advisory Group

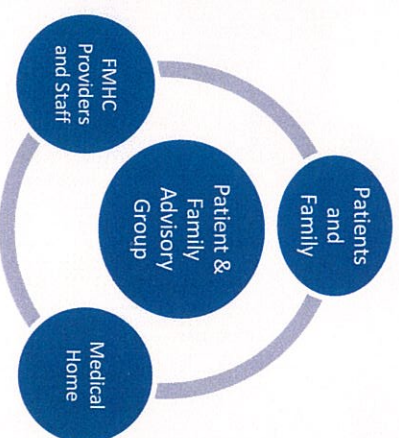
As part of our implementation of an innovative patient centered medical home, we are creating a **Patient & Family Advisory Group**.

A **Patient & Family Advisory Group** provides an opportunity for patients to have a voice in decisions that affect how they receive care. This is a setting for patients to engage in discussion and provide ideas how a patient may influence patient centered care at the Family Medicine Health Center.

Applications for membership in the group are currently being accepted.

We are looking for current patients or family members of current patients. Applicants do not need any specific background or experience to serve on the Patient & Family Advisory Council, but you should meet the following guidelines:

- A positive attitude and ability to share and see many different points of view.
- Good listening skills.
- Enthusiasm for FMHC's mission of excellence in patient care, education, and family advocacy.
- Ability to share both positive and negative experiences in a constructive way.
- Ability to communicate and work with families and staff whose backgrounds, experiences and styles may be very different from your own.



Can Change Really Happen?

Usually, change happens when people become aware of what needs to happen, how it needs to happen, and care that it happens. You can make change happen by getting involved; giving your time and energy to the Group, and helping others get involved.

Why should I serve?

- Gain an opportunity to help others, share what you have learned, and to help others learn.
- Influence the direction of activities, services, and policies. Your opinion matters. You can help shape how services or policies evolve and improve.
- Learn more about programs that may benefit you, your family members and other patients.
- Assist families in locating and utilizing services and programs.
- Learn or strengthen skills that help you in your present job or help you get a better one. Your experience with the group could strengthen your resume.
- Participation in the group may broaden your network and contacts.
- Making a difference. This is your opportunity to create positive change in the lives of individuals and their families.



Selection Criteria

Applicants

1. Should be an established patient.
2. Should be 18 years of age or older.
3. Should be able to commit to serve as a member of the group for one year period of time and attend quarterly meetings.
4. Should have had at least two visits within the previous 12 months.
5. Should have a constructive approach for providing views and feedback and be open to seeing different points of view.
6. Should be positive and supportive of the Mission and Vision of the Family Medicine Residency of Idaho and Family Medicine Health Center.
7. Should be respectful of other individuals with differing view and backgrounds.
8. Should be able to interact, collaborate, and communicate effectively in a group with many different people (ages, ethnicities, and backgrounds).
9. Work in partnership/collaboration with others.

Selection Process

A small workgroup will review completed applications. The group will then submit their recommendations to the Program Director and Chief Executive Officer, who will make the final membership selection.

The first meeting will be scheduled sometime in August 2012.

Questions?

208-514-2500 ext. 1168

208-514-2500 ext. 1111

Call for more information



FAMILY MEDICINE HEALTH CENTER

Patient & Family Advisory Group Recruitment Application

Last Name:

First:

Middle:

Street Address:

City:

State:

ZIP Code:

Phone:

Alt. Phone:

Fax:

Date of Birth:

E-Mail:

Check One:

☐ Male

☐ Female

1. How long have you been a patient or family member of a patient at Family Medicine Health Center?

2. Why are you interested in joining the Patient & Family Advisory Group?

3. Members are expected to attend meetings quarterly. Is this a commitment you are able to make?

☐ Yes ☐ No

4. What day(s) of the week is better for you to meet?

☐ Monday ☐ Tuesday ☐ Wednesday

☐ Thursday ☐ Friday

5. Will you require any of the following?

☐ Transportation

☐ Childcare Reimbursement

☐ Interpreter? If yes, what language?

6. Which clinic do you attend most often?

☐ Raymond Clinic

☐ Fort Street Clinic

☐ Emerald Clinic

☐ Meridian Clinic

☐ Garden City Clinic

7. Please describe any work, volunteer, or school experience which you think might be relevant?