

## 1. Welcome!

Thank you for taking the time to complete this survey!

The purpose of the survey is to understand your experience participating in the Aligning Forces for Quality (AF4Q) project in your community.

Your responses are confidential. Although a few questions ask about the groups you may represent, that information will not be shared with your community's AF4Q project in connection with your responses.

The information from this survey will help your community's AF4Q project learn how people involved in the project feel about their participation. It will also help other AF4Q projects (there are 17 across the country) get ideas about how to make the most of their members' participation.

## 2. Your perspective

The next few questions are about the perspective you bring to the AF4Q project. It is helpful to understand what perspectives are represented in AF4Q. Please remember that this information is confidential and will not be connected to your responses.

\* **1. Please select your AF4Q community**

Community	Alliance
	<input type="text" value="6"/>

\* **2. Are you working with the AF4Q project as a consumer representative, or an individual consumer?**

**Note:**

**A consumer representative is a person who works at a nonprofit, mission-oriented organization that represents a specific group of consumers or patients. Their main emphasis is on the needs of consumers and patients, and they do not have a financial stake in the health care system.**

**An individual consumer is a person who has significant personal experience with the health care system, either as a patient or a caregiver.**

**I am a(n)...**

- Consumer representative
- Individual consumer
- Neither a consumer representative NOR an individual consumer

### 3. Your perspective, continued

**1. If you are a consumer representative, please tell us the name of your organization. Please remember that this information will NOT be connected with your responses.**

**2. If you are an individual consumer, which particular population(s) do you represent? Please check all that apply, and feel free to add any others in the comment box below**

- Seniors
- Caregivers
- People with chronic conditions
- Children
- No specific population

Other (please specify)

## 4. Your involvement

Please respond to these questions about your experience in the AF4Q project.

### 1. How long have you been involved with the AF4Q project?

- Less than 6 months
- 6 months to less than 12 months
- 12 months to less than 18 months
- 18 months to less than 24 months
- 24 months or more

**2. The 17 AF4Q communities have different names for their committees or work groups. Please look for the work group names below that are closest to the group names in your community, or feel free to write other work group names in below.**

**Have you been involved with any of the following groups?**

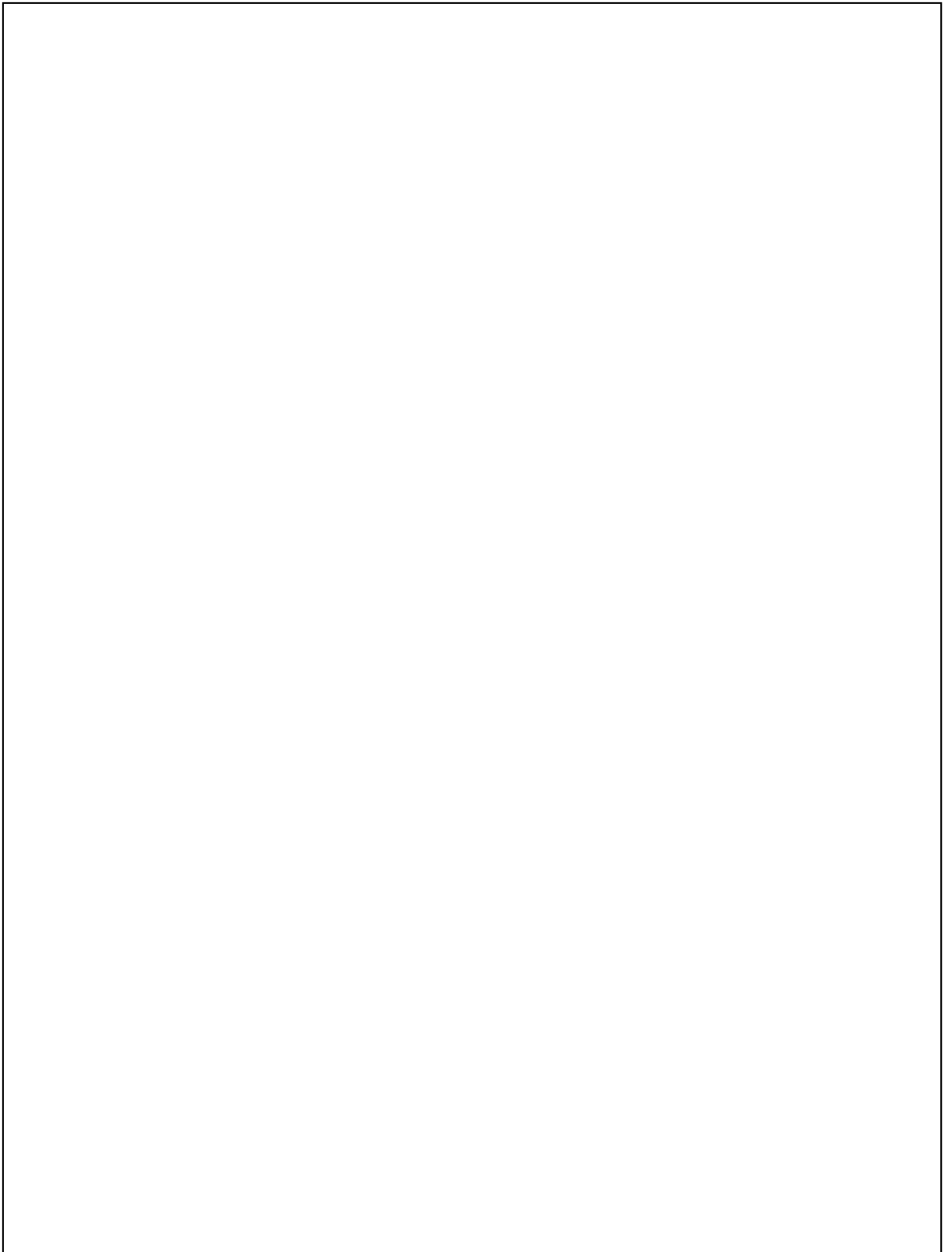
	Yes	No
Steering Committee	<input type="radio"/>	<input type="radio"/>
Leadership Team	<input type="radio"/>	<input type="radio"/>
Executive Leaders Group	<input type="radio"/>	<input type="radio"/>
Physician Advisory Group	<input type="radio"/>	<input type="radio"/>
Consumer Engagement Team	<input type="radio"/>	<input type="radio"/>
Measurement and Reporting Work group	<input type="radio"/>	<input type="radio"/>
Equity Work Group	<input type="radio"/>	<input type="radio"/>

Other (please specify)

**3. Have you served as a Chair or in another leadership role in any of the groups you've worked with?**

	Yes	No
Steering Committee	<input type="radio"/>	<input type="radio"/>
Leadership Team	<input type="radio"/>	<input type="radio"/>
Executive Leaders Group	<input type="radio"/>	<input type="radio"/>
Physician Advisory Group	<input type="radio"/>	<input type="radio"/>
Consumer Engagement Team	<input type="radio"/>	<input type="radio"/>
Performance Measures and Public Reporting Workgroup	<input type="radio"/>	<input type="radio"/>
Equity Work Group	<input type="radio"/>	<input type="radio"/>

Other (please specify)



## 5. Your involvement, continued

### 1. To what extent have you been involved in any of the following activities?

	Not at all involved	A little involved	Somewhat involved	Very involved
Developing the goals of the AF4Q project	jñ	jñ	jñ	jñ
Developing the policies of the AF4Q project	jñ	jñ	jñ	jñ
Making decisions about the data or measures to be included in public reports	jñ	jñ	jñ	jñ
Making decisions about the design of the public reports	jñ	jñ	jñ	jñ
Making decisions about the design of the website	jñ	jñ	jñ	jñ
Developing marketing messages, materials, or products	jñ	jñ	jñ	jñ
Distributing marketing messages, materials or products	jñ	jñ	jñ	jñ
Shaping quality improvement activities for hospital or doctor's office (such as a Patient Centered Medical Home Initiative)	jñ	jñ	jñ	jñ
Other (please specify)				

**2. Sometimes consumers are involved in shaping key decisions within their Alliances. We're interested to know if this has been true for you. Please describe any times when you have been involved in key decisions. These might include strategic planning, setting direction, or using resources in different ways.**

### 3. How much do you agree with the following statements?

	Strongly disagree	Disagree	Agree	Strongly Agree
AF4Q staff or leaders seek my input and feedback for decisions about the project's strategic planning or direction	jñ	jñ	jñ	jñ
AF4Q staff or leaders seek my input and feedback for decisions about how to use resources	jñ	jñ	jñ	jñ
AF4Q staff or leaders use my input and feedback for decisions about the project's strategic planning or direction	jñ	jñ	jñ	jñ
AF4Q staff or leaders use my input and feedback for decisions about how to use resources	jñ	jñ	jñ	jñ

Please add any comments about the above

### 4. How much do you agree with the following statements?

	Strongly disagree	Disagree	Agree	Strongly Agree
People in the AF4Q meetings I attend use language that is easy for everyone to understand	jñ	jñ	jñ	jñ
I know who I can contact if I have questions about the work of AF4Q	jñ	jñ	jñ	jñ
Being involved in the AF4Q project is worthwhile for me	jñ	jñ	jñ	jñ
My involvement in the AF4Q project makes a difference to the project	jñ	jñ	jñ	jñ

Please add any comments about the above

## 6. Resources and Support

Please respond to these final questions, about resources or support you have received while participating in AF4Q.

### 1. Have you received any of the following from the AF4Q project?

	Yes	No
Pre-meeting discussions (on the phone or in person) to review key decisions facing the AF4Q project	<input type="checkbox"/>	<input type="checkbox"/>
Pre-meeting discussions (on the phone or in person) to review your role as a consumer or consumer representative	<input type="checkbox"/>	<input type="checkbox"/>
Post-meeting discussions (on the phone or in person) to review key decisions facing the AF4Q project	<input type="checkbox"/>	<input type="checkbox"/>
Post-meeting discussions (on the phone or in person) to review your role as a consumer or consumer representative	<input type="checkbox"/>	<input type="checkbox"/>
Agenda and materials prior to meetings to familiarize yourself with upcoming issues, decisions, etc.	<input type="checkbox"/>	<input type="checkbox"/>
Fact sheets, materials, etc. on AF4Q focus areas to enhance your content knowledge	<input type="checkbox"/>	<input type="checkbox"/>
Peer-to-peer support from consumer representatives participating in other AF4Q communities	<input type="checkbox"/>	<input type="checkbox"/>
AF4Q staff designated as a main point of contact for you	<input type="checkbox"/>	<input type="checkbox"/>
Training on communication	<input type="checkbox"/>	<input type="checkbox"/>
Training on leadership	<input type="checkbox"/>	<input type="checkbox"/>
Training on meeting facilitation	<input type="checkbox"/>	<input type="checkbox"/>

Other training or support (please specify)



**2. How useful would each of the following be?**

	Not useful	A little useful	Somewhat useful	Very useful
Pre-meeting discussions (on the phone or in person) to review key decisions facing the AF4Q project	jñ	jñ	jñ	jñ
Pre-meeting discussions (on the phone or in person) to review your role as a consumer or consumer representative	jñ	jñ	jñ	jñ
Post-meeting discussions (on the phone or in person) to review key decisions facing the AF4Q project	jñ	jñ	jñ	jñ
Post-meeting discussions (on the phone or in person) to review your role as a consumer or consumer representative	jñ	jñ	jñ	jñ
Agenda and materials prior to meetings to familiarize yourself with upcoming issues, decisions, etc.	jñ	jñ	jñ	jñ
Fact sheets, materials, etc. on AF4Q focus areas to enhance your content knowledge	jñ	jñ	jñ	jñ
Peer-to-peer support from consumer representatives participating in other AF4Q communities	jñ	jñ	jñ	jñ
AF4Q staff designated as a main point of contact for you	jñ	jñ	jñ	jñ
Training on communication	jñ	jñ	jñ	jñ
Training on leadership	jñ	jñ	jñ	jñ
Training on meeting facilitation	jñ	jñ	jñ	jñ

Other / comment

**3. In what other ways, if any, would you like to be involved with the AF4Q project?**

**4. Please feel free to share other comments or feedback related to your experience with the AF4Q project.**

## 7. Thank you!

Thank you very much for taking the time to respond to this survey. Your input will help AF4Q projects across the country make the most of their valuable members.