JOHNS HOPKINS UNIVERSITY Center to Eliminate Cardiovascular Health Disparities

Developing a Community Advisory Board









http://obssr.od.nih.gov/cphhd

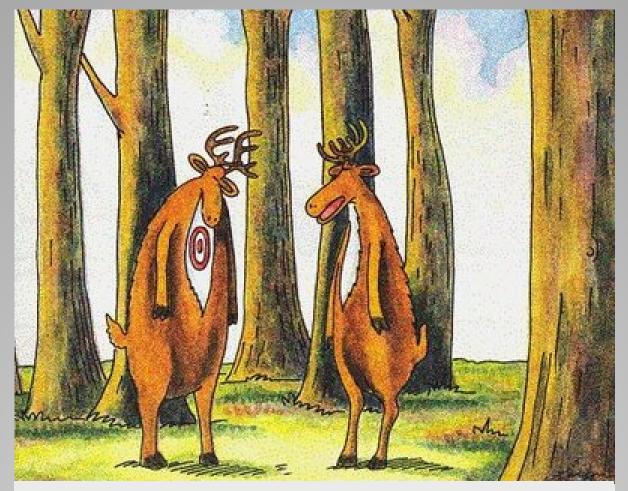
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 There are several ways to establish an effective Community/Consumer Advisory Board (CAB)

 The following are the elements that our Center found helpful

General Disclaimer

What is the Need for a Community/Consumer Advisory Board?



"Bummer of a birthmark, Hal."

Target Community

What is the Need for a CAB?

- Historically (and unfortunately), this is the way many community members have felt about their role/relationship with Hopkins research.
- A CAB seeks to improve that role and relationship.

What is the Need for a CAB?

- Funding Requirements
- Effectiveness of Research Initiatives
- Sustainability of Center
- Building a Bridge with the Community
- The Need to "Keep it Real"

Setting the Membership Parameters

- General Membership Parameters
- Establishing the Number of Members
- Expertise and Representation Not By Specific Persons
- Membership Composition
- Defining the Community Input Needs of the Center

General Membership Parameters

- Health Care Providers
- Community Based Organizations
- Community Members
- Consumers
- Experts in Certain Areas
 - Marketing
 - Public Health Initiatives
 - Faith-based Communities

Number of Members Needed

- Size Matters!
 - Too Small chance of not getting adequate input
 - Too Large chance of group not being effective, not coming to consensus
- We chose 30 as our optimum number

Membership Composition

- Not <u>primarily</u> based on individuals:
 - If you base it on individual people you are likely to have serious gaps to meeting the needs for the CAB
 - Tom cannot be replaced Tom's skills and knowledge can

Membership Composition

Based on Representation & Expertise

Skill

Community

Affiliation

Network

Knowledge

- So we have decided on the expertise and representation types and total number of members, now we must determine the number of individuals from each skill set or type of representation.
- Some redundancy is good...too much skews the picture

Composition Breakdown

 Now we need to see what our completed CAB would look like in the perfect world...

So we set up a matrix

Setting up a Visual Matrix

Visual Matrix

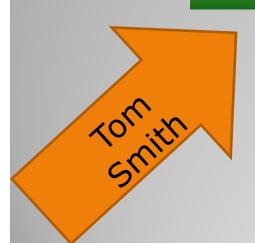
•	American Heart Association	(1)
•	Baltimore City Health Department	(1)
•	Baltimore County Dept of Health	(1)
•	Business/Marketing	(1)
•	Community-based Organizations	(2)
•	Community Health Worker	(1)
•	Coppin State University	(1)
•	DHMH	(2)
•	Elected Officials	(1)
•	Faith-based	(1)
•	Federally Qualified Health Center	(1)

•	Food Policy	(1)
•	Foundation	(1)
•	Health Care Access/Insurance	_(1)
•	Morgan State University	(1)
•	Monumental Medical Society	(1)
•	Neighborhood/Community	(3)
•	Patients	(5)
•	Pharmacy	(1)
•	Physical Activity	(1)
•	School System	(1)
•	University of Maryland	(1)

Membership Selection

Once the matrix is set, now you look at specific individuals to fill the designated slots.

Neighborhood Resident





Marketing Expert

Specific Community Input Needs

- Funding Requirements?
- Objectives of the Center
- Types of Input (Proactive/Reactive)
- Stages/Levels of Input
 - Level of Communication Input Desired by the Community

Membership Retention/CAB Sustainability

Primary Foundation: Communication

7 Principles of Communication for CAB Development & Maintenance

- 1) Respectful Communication
- 2) Proactive Communication
- 3) Consistent Communication
- 4) Transparent Communication
- 5) Receptive Communication
- 6) Responsive Communication
- 7) Conciliatory Communication

7 Principles of Communication for CAB Development & Maintenance

- 1) Respectful Communication
 - Just as you are the experts in research, they are the experts in community
- 2) Proactive Communication
 - Communicate up front expectations and limitations
- 3) Consistent Communication
 - Stick to a schedule don't go an extended period without communicating

7 Principles of Communication for CAB Development & Maintenance

- 4) Transparent Communication
 - Don't Hide or Misguide
- 5) Receptive Communication
 - Active Listening Openness to Change
- 6) Responsive Communication
 - Follow-up is Key; Answer What is Asked
- 7) Conciliatory Communication
 - If You Screw Up, Admit it!

Thank You!

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Questions ???????