

The Lewin Group
Meaningful Consumer Engagement Webinar Series
Training Consumers For Engagement
July 23, 2015 - 2:00pm to 3:00pm

Amy Herr: Thank you and welcome, everyone. Thank you for joining us today for the Meaningful Consumer Engagement webinar series and today's webinar on Training Consumers for Engagement: Developing a Curriculum that Empowers Members.

The webinar is the second in a series presented in conjunction with Community Catalyst and The Lewin Group and supported through the Medicare/Medicaid Coordination Office at the Centers for Medicare and Medicaid Services. MMCO is developing technical assistance and actionable item tools based on successful innovations to care models, such as this webinar series. To learn more about the current efforts and resources please visit our website at ResourcesForIntegratedCare.com for more details.

The presentation slides, recording, and questions and answers from today's webinar will be posted on the Resources for Integrated Care website within a few days. Please also contact RIC@lewin.com if you have any questions or comments.

Before we get started I would like to remind you again that all microphones will be muted throughout the presentation but we will have a Question-and-Answer opportunity at the end of the webinar. If you have a question during the webinar please feel free to use the chat feature on the WebEx. At this time, I would like to introduce our Moderator.

William Dean is the Delivery System and Consumer Engagement Manager at Community Catalyst. William builds collaborative relationships with Medicare/Medicaid health plans providing these and other safety net delivery systems with technical assistance and consultative services about consumer engagement and patient activation tools that lead to improved care delivery, better health outcomes, and lower costs of care.

Prior to joining Community Catalyst, William was a consultant to the California State Senate Sub-Committee on Aging and Long-term Care where he staffed bills, analyzed legislation before the Committees on Human Services, Health and Budget and Fiscal Review, and conducted oversight and informational hearings on a variety of issues affecting seniors and people with disabilities. A former geriatric social worker, William is a graduate of Boston College, Salem State University School of Social Work, and the University of the Pacific McGeorge School of Law. William?

William Dean: Thank you, Amy, and hello everyone. As Amy said I am with Community Catalyst. We are based in Boston and we work as a national, nonprofit consumer health advocacy organization in over 40 states to bring the consumer voice to any discussion that impacts their healthcare whether it be at the policy level, the delivery system level, or individual patient/provider level. So let me go ahead and introduce our two presenters.

Margo Michaels is the Principal with Health Action and Access Consulting. Margo has extensive experience in adult education focusing on consumer advocacy. She is considered a national expert in improving research through community engagement and was the founder of the Education Network to Advance Cancer Clinical Trials, ENACCT. Bringing 20 years of progressive leadership in consumer and patient advocacy organizations, the National Cancer Institute, and consulting with medical providers she has a strong commitment to social change through effective community engagement about healthcare issues. Margo has co-authored 13 peer-reviewed publications and holds an M.P.H. from UNC Chapel Hill School of Public Health.

Next we have John Arnold, Project Manager for UHCAN Ohio. John directs and coordinates a statewide coalition of stakeholders, advocates and enrollees in the My Care Ohio Dual-Eligible Demonstration Project to advance policies to the state and CMS that improves the delivery of care for older adults and people with disabilities. He is responsible for evaluating models of care and quality metrics and for recommending new models and metrics that lead to better health outcomes. John also recruits and trains consumer advocates to advocate for themselves and to join their Managed Care Organizations' Consumer Advisory Committee through face-to-face interactions, focus groups, presentations and Q&A forums with consumers. Prior to joining UHCAN John worked in critical organizing and outreach capacities for the Ohio Democratic Party and individual political campaigns and has served in the United States Air Force as well as on many executive boards, including the Salvation Army and Goodwill Industries. John has a B.A. from Park College and an MBA from Dominican University. Next slide.

I am going to just go over the agenda for today's webinar. First I will discuss how training fosters meaningful consumer engagement, and a little bit about the toolkit we developed here at Community Catalyst and the training tool that is within that toolkit, and the on-site training services that we do provide to health plans who are developing consumer advisory committees and would like to have on-site training for their committees.

I will turn it over to Margo who will talk about curriculum development, including objectives and activities that are in the curriculum that she has developed for us and the survey instrument that we used recently in a pilot with Aetna Health Plan in Ohio. Margo will turn it over to John who will then talk about consumer experience of participating in a training program as part of their membership and advisory committee, and he will share with you the skills that folks needed to participate effectively, some of the ground rules they developed, the roles that they play in effective consumer advisory committees, and the feedback that they offered after they participated in the training.

We will also take a couple of polls of you all to find out a little bit more about what you are doing and what you are interested in doing going forward to improve your training capacity and your engagement of consumers on advisory committees. Then, of course, we will turn it over to our presenters for a Q&A period so that you can ask specific questions of them and get some answers to your questions. Next slide, please.

Why training? Well first of all it makes advisory committee members more committed and more effective in their role of advising the health plan. Many members haven't served on an advisory

committee before so they can benefit from orientation to each other, to the customer engagement process and to the delivery system that is caring for them. It also teaches them beneficial skills they can use in their activities on the committee. Finally, it structures the dialogue so the goals of the members of the committee as well as the goals of the health plan come together and everyone knows what the purpose is of the committee going forward.

The end result, we really believe, is a successful committee; one in which the members have information and skills and the goals are shared. Next slide, please.

Just a brief overview of the project I work for, Voices for Better Health, it provides technical assistance to health plans and advocates and consumers working together to improve care delivery. As part of that project we have developed a toolkit in collaboration with a lot of stakeholders across the board; from policy makers to health plans to community health centers. That toolkit is available on our website at the link right here. We also do, as I said, provide on-site training services, and if you are interested in those and learning more about that you should email me at WDean@communitycatalyst.org.

The last webinar we did a couple of weeks ago on consumer advisory committees we really did have a lot of questions and so I would urge all of you to email me if you have more questions. A lot of those answers will be posted on the Resources for Integrated Care website in the future but we are thinking about doing a learning community. So if you are interested in participating in a learning community on a monthly basis for an hour and learning from each other focusing on the consumer engagement realm at health plans and trying to figure out how to do a lot of these things best we would love to basically facilitate that learning committee. So please email me if you are interested in that. Next slide.

I think we are going to turn it over to Margo Michaels to tell us about curriculum development.

Margo Michaels: Great, thank you, Bill. I want to start off by talking about the importance of curriculum in ensuring that we have meaningful and quality consumer engagement. I think everyone here knows it is easy to fall into a pattern of just having meetings because we need to have meetings rather than having meetings because we want to have meaningful engagement and input. Underlying this entire curriculum and the training initiative is to empower consumers to feel engaged and to feel that they have an important role at the table and that they are not just there to just listen but they are there to engage, and to help plan, and to help see the impact of their input into the changes in the plan.

When we started to develop the curriculum the first thing we had to do of course was to figure out what was important to include. That included talking to key informants; folks that were involved with the different plans both in Ohio, where we did the pilot, and nationally. We also had folks who had been integrated into these kinds of initiatives review the outlines and the content that we came up with. We looked at the literature that was out there and we also applied the principles from the toolkit that Bill just talked about.

The philosophy, as I mentioned, is we wanted to focus on changing behavior and changing attitudes with a focus on action. The idea of meaningful engagement, again, is not to sort of be

grateful that one is on a consumer advisory committee but rather that one is providing insight. Built into that is obviously building confidence. Many of these folks that have not had any experience in working on these kinds of committees, we want to make sure that we instill a sense of confidence and also a sense of their own skill and qualifications in being members of this important initiative.

The other thing we need to focus on too is "nice-to-know" versus "need-to-know." This is critical because as policy people and as people who care about this we want to shove as much information as we possibly can into the training. This is something we have to constantly fight ourselves with but as those of you who know and who engage in these kinds of programs we have to curtail ourselves and realize that more is not necessarily better and we always need to be asking ourselves, "Do people need to know this or do people want to know this?" Excuse me, I'm sorry.

The final thing is that we want to make sure things are participatory. The meaning of that is we don't want to sit and have slides be presented over and over again and then have lunch and then go home. We want to have people participate and try things on for size during a training program. Next slide.

When we think about the objectives we came up with; again, these were iterative over time as we continued to develop the curriculum, there were a couple of things that were important for us to make sure we had in there. One was people had to have a sense of what the demonstration projects are about. That this is not just something you need for their state or you need for their plans. This is something that is going on nationally and they are part of a national consumer movement.

Second is we wanted to give them a sense of what consumer advisory committees or councils are, and what that means for the benefit of their plan and the benefit of and care for the people in their community. Another thing that we had here is we wanted to make sure people had an ability to be able to talk about their own concerns and hopes. This is really important because many of us sort of hold those fears especially to ourselves; thinking things like I can't possibly contribute or I don't know what I'm doing or I've never been in a meeting like this before, never recognizing that actually a lot of those concerns are shared.

Also, what hopes are. Those can be realistic hopes or unrealistic hopes and by sharing those in a room that can actually help to make it clear what we can do. For example, universal healthcare might be a hope that all of us want but that is not sort of a realistic expectation of a consumer advisory council. Next slide.

Then I want to get into some nitty-gritty about meetings. Again, some of these folks may have been comfortable being in a formal meeting situation and some of them may not but we really wanted to provide a lay of the land about how these meetings take place, how they work, what the purpose is, how they prepare for them. We also wanted to give them a sense about what could be effective in a CAC meeting and what could be less effective. You will see when I give you some examples that was a very interesting activity for them to think about because I don't

know if many of them had thought about gosh, is this really a good use of my time or a good use of all of us sitting here around the table?

Finally I wanted to give a sense to them about the importance of the feedback loop. Again, these meetings and this committee is a part of their plan's administration and a part of their plan's policies and procedures that is not just limited to them in that room, or the people that are sitting with them in that room, but really a part of the plan's leadership. That kind of feedback loop has to be constantly fed and reiterated. Next slide.

We also let folks talk about what are the qualities that effective CAC members have. Again, we could have sort of just listed these in a slide and have everybody nod and then move onto the next section, but we engaged them in a number of activities to help them think through what this means, what this would mean to them personally, what this would mean to their particular committee and also what they think is important. What I think is important may not be what they think is important but really coming up with a group understanding of those important qualities and then really getting a sense of where their strengths and weaknesses are. Not as a report card but as a sense for them to think, "Oh wait. I really need to improve on that, I don't really need to improve much on this." Of course, all of us need to improve in various areas whether we are experts or whether we are newbies on a particular activity. Next slide.

I want to share with you just two examples of activities we did to get at some of the objectives that I mentioned. The first, on the left side, are cartoons of two different kinds of conversations. One talks about a van picking the person up late and now I can't see my doctor and I'm angry and what should I do? Then the right side was the same person but instead of talking about himself is saying I wonder how many people miss their appointments because of transportation problems? Juxtaposing these two situations is really helpful for the group, and John will be talking more about what we got to as a result of that conversation, but helping people understand the differences between a personal support group and understanding how my issues really are only important as far as this committee goes as it relates to other members, and really understanding that the collective responsibility is more important here than the individual responsibility.

On the right hand side I have copied an example of one activity we did called "Meaningful Agendas, or Not?" We did this in small groups where each small group had to take a look at one of these agendas and see: do you think the plan is seeking meaningful feedback or not by an agenda like this? What would you change? There were a lot of "a-ha" moments in the group both in small groups and large groups about "wow, I never thought this might not be an appropriate use of my time because I am being talked at for two hours rather than being engaged with." Other people said things like "we should really be involved in forming an agenda rather than just receiving an agenda." These are just two examples of the activities I wanted to share with you. Next slide.

The materials that we provided were pretty comprehensive. We provided a Trainer's Guide for Trainers. I was one of them and John was one of them. John will talk about his experience being there. That was able for anyone to be able to pick up this guide and be able to be a presenter of this material with the idea that person is not an expert but is actually a facilitator for group discussion based on committee activities. We had a Workshop Guide that was for consumers that

was short. One was duplicating all of the slides as we often do but actually really focusing on key points, activity sheets, etc. This is the agenda. As you can see it went from 9:00am to about 4:00pm. It was a tight day and also a long day, but it was also a day that I think was very energizing. I think this can also work as two shorter days rather than one long day. Next slide.

We also did, as every good trainer should do, an evaluation at the end of each training. Because most of our group had illiteracy challenges we wanted to use smiley faces and frown faces and the middle sort of was neutral faces, meaning okay/Well. As you can see here this is a summary of our scores, and you can see where there is a sad face and there is no score that is actually good. That actually means we had very few sad faces in the room.

You can see that most people were actually in the Well or Very Well category looking at sort of how well they feel they can now do these things. This is obviously self-report. I will show you at the very bottom here about “how well prepared do you feel now to be part of the CAC” and you can see that was Well and Very Well. We would like certainly to do that as a pre-post to really get a sense of how people's assessment might change pre and post. Next slide.

When we asked for qualitative feedback we got some positive results there as well. We found that people enjoyed the participatory aspects of it. They were also provoked into thinking about new kind of things like goal setting or parking lots that were things that they had not thought of. As a result of this training there were several people who became more vocal and John will talk more about that in a second but we saw even those changes in the room while we were there. Next slide.

Now let's turn it over to Bill who is going to ask you some questions about consumer training and what you are currently doing or what you are thinking about doing.

William Dean: Thank you, Margo, for sharing your knowledge and experience on training advisory committee members. Before we turn it over to John I have just one poll – we are going to do and then we will do the second poll after John – to learn a little bit more about you all and what you are doing and what you hope to do to onboard consumers to your advisory committee.

The first question is, "Which of these consumer training activities do you currently use to onboard new consumer advisory committee members? Pick all that apply. Formal training curriculum, like we have been describing to you. Basic review of the advisory committee purpose, ground rules, code of conduct and/or confidentiality standards. Effective communications skills; maybe that is just one activity you do just on communication skills and then you move on and do your meeting. Sharing of personal stories. Team-building exercises and ice-breakers. Or none of the above. Maybe you don't do any onboarding or training at all and you just meet with the folks and try to gather their feedback."

Take a minute to select your answers and then we will take a look at them. [results shown] It looks like more than half of you actually do some review of the basic purpose of the committee and maybe some ground rules or code for behavior within the meetings. About one-quarter of you do a formal curriculum, communication skills, and another quarter of you do none of the above. So maybe there is some opportunity to learn a little bit more from John to see if we can

encourage you all to do at least some of the above activities to onboard your advisory committee members.

With that I think we will turn it over to John to talk about the experiences of some of the viewpoints of the consumers.

John Arnold: Thank you, Bill. I also want to thank my colleague and partner, Margo, for co-facilitating a great day of training. I am going to briefly go through the selection process of a managed care organization's training activities and also some of the feedback.

UHCAN Ohio and Community Catalyst believed that it was essential to partner with the managed care organizations in training and recruiting for their Consumer Advisory Committees. For the first step, UHCAN and Community Catalyst convened and facilitated a separate call with all of the participating managed care organizations on the consumer engagement toolkit. So we went through the toolkit and answered some very good questions posed by the plans. Upon conclusion we asked the plans for their commitment to not only use the toolkit but to commit to allowing UHCAN Ohio to help in the recruiting process. One plan said yes right away to both questions.

UHCAN and the plan's Community Liaison did a number of Q&As and forums with the enrollees. Out of that we recruited 21 participants and all 21 received applications to complete. Seventeen applications were returned to us. Our goal was to recruit 15 members but we decided to allow all 17 to participate, in the event that we had one, two or three that dropped off. At the first Consumer Advisory Committee meeting we did the sign-off on the plan's confidentiality agreement and we also discussed that it was necessary for them to be consistent and to commit to this process in order to have an effective consumer advisory committee.

We also shared with the members. What Margo talked about was that feedback loop. They are going to come to the meeting and they are going to discuss the issues and concerns that have been raised not only about themselves but their friends and their family members. Those will be forwarded to the Governing Board. The Governing Board will come back to the next meeting with the members with resolutions and time frames. Also, we did inform and tell them that in order for this to become an effective consumer advisory committee we would be scheduling training.

When we scheduled the training we had to be flexible not only in the hours, which Margo talked about, but also in the days and the hours. So you have to take into consideration if that member has dialysis or if that member needs his or her personal care attendant to join them at the consumer advisory committee. Next slide, please.

You can call them what you will; meeting norms, team agreements, rules of engagement or conditions for success. But in order to have an effective consumer advisory committee it is necessary to set up a few ground rules before you get started. If you truly want buy-in you must ensure the members are advancing and participating in the creation of the ground rules. So we made this an activity to create the ground rules. We asked the members to list ground rules or

what they think should be part of the ground rules, then we asked them to rank them, and what you see here listed are the eight to 10 ground rules they came up with.

Everyone agreed that the ground rules that were created would now be a guide adopted for future meetings. Again, with the ground rules you must be flexible and not too rigid. For example, on start/stop times, cell phones being off or on vibrate, but it is very important to be flexible. Next slide, please.

Consumer Advisory Committees are not just about one individual's issue or concerns. It is very important that the members understand that "this is not just about me, myself, my issues or my concerns only." So we had them think about what they think is the role of a consumer advisory committee member. We did this in an activity as well. We asked them to list the roles- what they perceive as the role to be an effective member of a consumer advisory committee. So I recall that one member cited going around to every member in her building that she knew participated in the dual-demonstration and asking about their concerns or their positive experiences so she can discuss it at the next Consumer Advisory Committee meeting.

We said to them, this is an example of what? A lot of the other members shouted out, "She's representing others." As you can see, "we represent others" became the first one that they all agreed upon and gave the highest marks. Next slide, please.

Along with the role of consumer advisory committee members we wanted the members to start thinking about what they had to contribute, because each individual is unique and brings something different or a different perspective to the Consumer Advisory Committee. So we did an activity to list what skillset do you believe you bring to the table? In listing their skillsets we asked them to think about their own strengths. So as we listed the skills many of the members there were surprised when they thought about the skills they came to the consumer advisory committee to contribute.

For example, a number of members told one member that was there in the training, "We are so surprised you are now opening up to speak," because this member who was now opening up was asking probably the best questions of everyone sitting there and also she was very articulate in the answers she responded to us. As a matter of fact, she could at least in my mind, could have been a facilitator. So listed on this slide were all of the commonalities among the group. Next slide, please.

To be effective there are certain behaviors that must be avoided. If these behaviors cannot be avoided it could affect the commitment to improve the care. So we did an activity where we asked the group to choose the behaviors they think are most appropriate to avoid. I can tell you that the group really had strong feelings about the top three listed on this slide; the smart phone, unrelated stories, and being disrespectful. They really had a lot of very strong feelings about this. What is important here on the meeting killers, if you will, is that members themselves must manage the process. The group agreed that now they have a code of conduct for the Consumer Advisory Committee moving forward. Next slide, please.

As Margo mentioned, the training received great results on the feedback from the members. A month later the regular Consumer Advisory Committee convened. The committee Chair, which is a UHCAN Ohio recruited member, created the agenda with the feedback from other members. So the Chair opened the meeting and he discussed how much he got out of the training and the Chair and other members were mentioning to the members that did not participate how they thought when they arrived at the training it was just going to be another day-long of regular consumer advisory committee meetings. To their surprise they had this great training. Also, in the training itself we had not only that specific region Community Liaison there we had two other regions from the plan their Community Liaison there. Their feedback to us was “We want our committee members to be trained and trained soon.”

I know the member were engaged because they asked the plan Community Liaison “Where is the flip chart? Where is the flip chart? We know we will have some parking lot items to be placed on the parking lot.” The Chair stood up and explained exactly what a parking lot item is to the members that did not attend the meeting. When the meeting concluded the members stated, not only to the Community Liaison but the Chief Operations Officer who happened to be there, and they mentioned how productive the meetings had become and they said now they feel there is a sense of accountability with time frames that has been included in the process.

I now turn it back over to Bill.

William Dean: Thank you, John. Thanks for that perspective on the consumer experience of the different activities that went on during the training we did in May with Aetna in Ohio. Again, we just want to thank Aetna Ohio for participating. There may be some folks from Aetna on the call today. We want to extend our gratitude for collaborating with you all in Ohio on this piloting on our training which we think had an excellent result and really fed the members with a lot of skills, experience, and knowledge they are taking forward to their committee meetings as they move forward. Again, thank you, John.

We are going to move to the second poll question now that you have heard from both Margo and John about their training experience working with an advisory committee in Ohio. What new consumer training approaches do you now plan to use to improve your own consumer advisory committee onboarding process? Again, we saw that there were about half of the folks who did some sort of training. Did you learn anything new today? We would love to know what that might be and if not it might be during the Question-and-Answer period we could see if there are some opportunities for further education.

Choice one would be formal training curriculum if you plan to use that in the future. An overview of the plan benefits, or some health insurance literacy, so folks understand more about the plan they are in and how they can improve upon it. The development of ground rules for the advisory committee to take action. Skills for effective communication or representing others; as you have heard, a lot of folks on the committee in Ohio felt strongly they wanted to represent others when they were coming together to meet as an advisory committee. Or sharing of personal stories. Or none of the above. Please select your answers and we will see what we can do to help you all.

Wow, a lot of high numbers which is pretty fantastic. We are glad to see that response especially around communication and representing others and around some ground rules for making sure the advisory committee can take action in the way it needs to to help the health plan to improve upon its delivery of care. So that is really great. Just the fact there are 40% to 50% minimum of folks who want to do a lot of these new approaches is really great. Thank you so much for completing that survey and for your interest. Again, if you are interested in learning a little bit more about our services on training or participating in the learning community please email me.

With that I will thank Margo and John and get ready for some more questions. I am going to turn it over to Amy to facilitate our Question-and-Answer period. Again, thank you everyone.

Question-and-Answer Session

Amy Herr: Thank you, William, Margo, and John. We really appreciate you sharing your experiences on training consumers for engagement. The slide you see now is our participant survey. We are going to leave that up during the Q&A session so please take a moment to complete the survey. Your feedback will help us to continue to provide quality webinars in the future.

In the remaining time we have left let's turn our attention to the questions. As a reminder, if you have a question there are a few ways you can submit them. You can utilize the chat feature or you can use our AT&T operator. Melissa, at this time could you remind our participants how to ask a question on the phone line?

Operator: Yes, ma'am. Ladies and gentlemen if you would like to ask a question please press *1 on your phone. A voice prompt on the phone line will notify you when your line is open. You may remove yourself at any time from the queue by pressing *2. If you are using a speaker phone please pick up the handset before pressing the corresponding digits. Again, if you have a question please press *1 at this time.

Amy Herr: Okay. While we wait for the first caller to dial in we had a question that came in through the Q&A feature here. It is a question for John. You talked about meeting killers. How do you prevent these things from happening?

John Arnold: First of all thanks for that question, whomever submitted the question. The first thing you need to do is realize there are meeting killers that take place. You have to get the group to agree there are a number of areas that will make the meeting and delay the meeting. Once you list those meeting killers out, as I said in the presentation, it is up to the members themselves that are on the committee to manage the process and it will be even better if they have already selected a Chair. So it starts with the Chair. Then it starts with the other members to hold the other members accountable. Because remember, they agreed that moving forward this was the code of conduct they would adhere to. So it is going to be incumbent again on the members and the Chair to manage the process.

Amy Herr: Great, thank you. Melissa do we have any questions that have come through the phone line?

Operator: Yes, we have a question. Caller please go ahead.

Unidentified Speaker: Do you have a training budget for the committee?

Margo Michaels: This is Margo. Bill maybe you are better off in answering it. The plan we were able to get a site donated for this plan to host the training and the plan paid for lunch and breakfast. Bill, I don't know what you would add to that.

William Dean: Thanks, Margo. To answer that part of it this was a pilot so we provided the training services au gratis to work with us to determine if they were good activities and if it was going to be successful and figure out ways we could tweak the training as well. So if you wanted to contact me I can let you know about what kind of pricing structures we could determine for training your advisory committee. In terms of if you were going to do it yourself you could budget for, like Margo said, venue, transportation, refreshments, and obviously the staff time it takes to develop and facilitate the training.

Amy Herr: Thanks. Do we have other questions on the phone?

Operator: If you have a question please press *1.

Amy Herr: Okay, we have one that has come through the Q&A module here. How do you prevent your training session from becoming an actual consumer advisory committee meeting? Have you set rules that set the two apart?

Margo Michaels: I'm sorry could you repeat that? I didn't really understand it. Could you repeat it?

Amy Herr: Sure. How do you prevent the training session from turning into an actual consumer advisory committee meeting? How do you set those two meetings apart?

Margo Michaels: That is a great question. One of the very important things to be very clear is this is not a regular meeting. This is a special event. We set out ground rules at the beginning about what this meeting is and is not going to do, what this training is and is not going to do. And we also have a parking lot which is a very effective way, and many of you are familiar with this, a very effective way of running meetings and running trainings. There were issues that came up that really we could not address because it was really a part of a future discussion that needs to be at a CAC meeting, not here. People understood that was needed. Sometimes we are able to come back to the content of the question. Sometimes people understood that the content was more appropriately placed at a future CAC meeting.

So I think setting those ground rules, using the parking lot in terms of expectations, needs to be pretty clear. We did not have full participation at the training. Some people thought it was a long day. Some people had problems with other appointments and issues. So that is obviously a barrier you want to try and prevent as much as you can in terms of getting full participation or reasonably full participation of the members there.

John Arnold: Let me add the parking lot was very effective. So after the meeting was over we went back over the parking lot issues. The Community Liaison that was there took notes and by the time we convened the meeting one month later she already had action plans and had discussion points as part of the agenda with the Chair to have it ready for discussion at the meeting. So definitely have a parking lot ready and let the members know they will be getting those addressed.

Amy Herr: Great. Thank you both. Our next question, could you talk more about building meaningful agendas on an ongoing basis so that members are providing meaningful input into important systems and quality issues?

Margo Michaels: Sure. One of the things that we emphasized in the training was everyone's desire to have a meaningful engagement process and not to go to meetings for the sake of having meetings. I think it is a value everyone strongly agreed upon. When we did the activity around meaningful agendas again my style and I think most people who do training style is not to just say, "Here is what a meaningful agenda looks like." Rather to put together some strong agendas and some not-so-strong agendas and have people look at them and ask, "What makes it weak? What makes it strong? What would you do next time?" Through that activity we were able to help them define for themselves what they thought the criteria would be and how they would know if something was lousy or strong and what they could do about it.

One of the things that came up in the room was gosh we didn't realize or we didn't think we had the ability to inform an agenda. One of the things that came across was the idea of the feedback loop and that we would have old business and new business discussed so we aren't just going to discuss something one meeting and then forget about it. So all of these things are values that I think we all know intuitively and that we can easily put into sort of a binder and say, "Look, here is what a meaningful agenda is," but my experience is helping people come to those conclusions themselves and reflecting on it themselves can be actually more impactful. It also lets them set up a set of their own values and criteria as a group so that they can know moving forward "hey wait, this agenda looks like there is five people talking at us for two hours and we have lunch. I don't think I want to go to a meeting like that and I don't understand how that is an opportunity for me to provide and our community to provide meaningful input into plan policies and procedures."

John Arnold: Also, if I can add that is if you do not have a Chair already selected by the committee members please select one. If not, select two or three people that will put together the agenda with input from the remaining committee members. That is how you are truly going to have buy-in and commitment, because they feel now that they are trained and they know what an effective agenda looks like, you will get buy-in from them if they are putting together the agenda.

Margo Michaels: One more thing I want to add is that this is a pilot and this is the first time these folks have been trained in these areas. I think that this training would be valuable for more experienced people or a mixed group but we also have ideas about doing a second-level of training once sort of that initial socialization has happened and the initial successes are under

their belt I think it is very appropriate for us to do additional training for them to gain more expertise and confidence in dealing with more complex issues. I don't think this is the only training they would get. I think they would love to see and that they would be interested in doing additional training that again would help push the envelope and help them push a little further around the things that are critical for their community.

Amy Herr: Thank you. Melissa are there more questions on the phone?

Operator: No, ma'am.

Amy Herr: Okay. We have a few more here for Margo and John. How did you get consumers to agree to an all-day training?

John Arnold: Well, it started with the relationship that the Community Liaison had with the members and because of HIPAA they couldn't give me telephone numbers but fortunately because I helped with the training and the recruitment we both were able to get on the phone and ask them if they wanted to participate. Most of them said yes right away. However, they may have had difficulty or they may have doubts or they may need to have their PCA, their Personal Care Assistant, come with them and that is why I said you have to build-in some flexibility in terms of the number of days you want to have it, the time and the length of time you have it.

But once we got on the telephone and started having those discussions the majority of them had already said yes they wanted to participate in the training.

Margo Michaels: I also want to say we could have done many different models including doing two hours one night a week for a month, or some things on the phone using just a telephone, not a computer, and combining that with live sessions. So I think you do need to be flexible and obviously people have full-time work and doing a full day training is not possible, except we also were open to doing it on the weekends. I think the flexibility that John talked about is really critical.

Amy Herr: Great, thanks. After the initial training how often would you repeat a training session like this for an advisory committee?

Margo Michaels: I would not repeat this training. I would use reinforcing training so that they can see what still remains to be a challenge and then also take them to the next level, level 2.01. I do think the training is just the beginning. I don't want to say insert training equals a successful community advisory committee. I think it is part of technical systems and support that you need to be thinking about on an ongoing basis for a committee like this. This training is one important step in that direction but not certainly a panacea.

John Arnold: I also would add that it is very important for the committee members that were not able to attend, that they get the training. We are currently working with the plan to make that happen for the six members that were not able to attend as well as the other regions for the plan.

Amy Herr: Great, thank you. Another question here. Did a diverse group of consumers participate or only the most high-functioning consumers?

Margo Michaels: I will let John answer that. I think it was diverse. There were several people that had literacy issues. There were several people who had mobility issues. There was one blind person who was there. I think that for the most part we were able to because of the way we developed the training in terms of the participation and because we didn't want to rely on slides or use reading as the first and foremost thing one has to do to participate I think that all of them got something out of it. There was one gentleman, maybe John might say how he might have done, but I think it was a diverse group of people in terms of capabilities. John?

John Arnold: It was definitely a diverse group of people and the one gentleman Margo is speaking of there was an illiteracy issue. However, because we did not read verbatim or – because we did these activities he got a lot out of the training. So we were able to tailor it to meet his needs as well.

Amy Herr: Great. Okay, our last question, how long has the Consumer Advisory Council been meeting, and what is the retention rate?

John Arnold: The plan that I am referring to, they have already had three meetings; the first one is when we talked about what the consumer advisory committee was all about. Then they had another one three months later. Then they had the training. Then 30 days later is when the next one convened. So right now to-date there have been three committee meetings with this particular plan. To answer your question in terms of retention, it has been between 13 and 15 members that would show up at every meeting. Remember, we recruited a total of 17 applications. Seventeen applications were received and we have the same group that has been showing up for the past three committee meetings.

Amy Herr: Great. Okay. At this time I would like to thank all of our speakers again and thank everyone on the line for your time and participation. If you haven't done it yet please feel free to complete our participant survey which the link is on your screen right here. As a reminder, the slides from today's presentation, a recording and a transcript will be available on our website in a couple of days at www.ResourcesForInnovativeCare.com. If you have any questions feel free to email us at RIC@lewin.com.

Have a great afternoon. Thank you.

Operator: That concludes our conference for today. Thank you for your participation and for using AT&T Teleconference Service. You may now disconnect.