

Patient and Family Advisor Application

Memorial Sloan Kettering Cancer Center

Thank you for your interest in joining the Patient and Family Advisor Program at Memorial Sloan Kettering Cancer Center. Our mission is to integrate the patient and family perspective into every aspect of MSK's efforts to prevent, diagnose, treat and cure cancer. Working in active partnership throughout the Center, this program strengthens communication and collaboration among patients, families, clinicians, staff and administrators, and proposes and participates in efforts to develop and improve programs, facilities, and services at MSK.

If you are a patient or family member or caregiver of a person treated at MSK, you are eligible to apply for the Advisor program.

Application Process

Prospective applicants are required to complete the attached application. This application will help to ensure that we match Advisors with opportunities that best fit their experience, interests, and availability. Please include the following information with the application:

- A current resume or biographical statement outlining personal, professional, and volunteer experience.
- An interest statement including, but not limited to, the following information:
 - Why you are interested in being an Advisor.
 - Why you believe you will be a good advocate for patient- and family-centered care.
 - What qualities and skills you will contribute to the program.
 - The amount of time you are willing to commit to this work.
 - Examples of your experience of group membership.

Please return the completed application and required documents to pfacq@mskcc.org.

If you have any questions, please call Elizabeth Krug at 646-888-5803.

After submission of the application, a telephone interview will take place and may be followed up with an in-person interview with current Advisors and MSK Staff. Please note that all Advisors are required to attend an Advisor orientation, obtain medical clearance, and fulfill MSK Human Resources requirements.

Demographic Information

First and Last Name:

Gender:

Address:

Primary phone number:

Secondary phone number:

Email address:

Emergency Contact

Name:

Phone Number:

Relationship to you:

History

I am applying as a:

Patient

Family Member/Caregiver

Both

Patient diagnosis (type of cancer):

Year of diagnosis:

Patient age at time of diagnosis:

Your age (if you are a family member or caregiver):

If you or your family member is still in treatment, where are you, or they, in the cancer journey? Or if your family member has died, how recently?

What did your/your family member's care involve? (Please select all that apply.)

- | | |
|---|---|
| <input type="checkbox"/> Surgery | <input type="checkbox"/> Physical/Occupational Therapy |
| <input type="checkbox"/> Radiation | <input type="checkbox"/> Social Work |
| <input type="checkbox"/> Chemotherapy | <input type="checkbox"/> Psychiatry/Counseling Services |
| <input type="checkbox"/> Immunotherapy | <input type="checkbox"/> Spiritual Services/Chaplaincy |
| <input type="checkbox"/> Interventional Radiology | <input type="checkbox"/> Pain Management |
| <input type="checkbox"/> Hormonal Therapy | <input type="checkbox"/> Child Life Services |
| <input type="checkbox"/> Integrative Therapy (e.g., massage,
Reiki, acupuncture, meditation) | <input type="checkbox"/> Supportive Care |
| <input type="checkbox"/> Nutritional Counseling | <input type="checkbox"/> Palliative Care |
| <input type="checkbox"/> Bone Marrow/Stem Cell Transplant | <input type="checkbox"/> Other (please describe) |

Areas of Interest and Experience

1. What are your particular areas of interest? Are there areas of the cancer care continuum that you feel MSK should be working to improve?

2. Please describe your availability to participate in in-person meetings, web meetings, and phone calls. (e.g., are you available only after 5:00pm on weekdays? Only during lunch hours?)

3. Please indicate your areas of interest (select all that apply):

- Reviewing patient and family satisfaction tools
- Developing and reviewing educational materials
- Planning for the inpatient care experience
- Improving the outpatient care experience
- Helping to design systems of care and facilities for the cancer experience
- Ensuring patient safety and the prevention of medical errors
- Educating clinicians and new employees about the patient/family/caregiver experience
- Improving the coordination of care and the transition to home and community care
- Joining the Patient and Family Advisory Council for Quality
- Other (please describe)

4. What are your expectations about what it will be like to be a Patient/Family Advisor at MSK? What will determine whether this ultimately turns out to be a good and valuable experience for you?

References

Please list two references (include their name, phone number, email address, and relationship to you).

Reference 1:

Reference 2: