Howard University Hospital Patient and Family Advisory Council

Car	ndidate Name:	_		
Dat	re:	_		
Role:		_ Patient	☐ Family Member	☐ Other
1	Can you share one positive experience and/ members') while receiving care from HUH?	or a negative ex	perience of your (or	your family
2	Do you know HUH's core values? Do you th	nink HUH employ	ees exemplify their v	ralues?
3	What professional or volunteer experiences have you had that might help you in your role as a Patient/Family Advisor? Based on these experiences, do you have any unique skills, strengths, or perspectives you would bring to the council?			
4	Being a PFAC member sometimes requires experiences and considering other perspect example of when you have done this before	tives and solution	ıs. Can you please gi	
6	Based on your experiences what would you your family?	change to impro	ve healthcare for you	ı and
6	What area(s) of healthcare are you most pas	ssionate about?		
7	The PFAC meets at least once a month and ects. Are there any circumstances that woul	•		
8	Are there any questions that you have for us	6?		