Consumer Engagement—From Rhetoric to Reality: The Aligning Forces for Quality Experience

Consumer engagement was a key pillar of the Aligning Forces for Quality (AF4Q) program. The Robert Wood Johnson Foundation envisioned consumer engagement at the individual consumer level (consumers using publicly reported quality information to make informed choices about health providers and consumers managing their chronic conditions) and at the organizational level (consumer representatives on alliance leadership teams).

Because the alliance selection criteria and the AF4Q program requirements were disproportionately focused on public reporting provider quality performance, most alliances had no consumer engagement experience nor did they have a consumer constituency to work with. Alliances came to consumer engagement with a wide range of attitudes, from "kicking and screaming" to optimistic: “Oh, we need to do more of that consumer engagement thing, whatever that is.”

Not surprisingly, there was large variation across alliances in the level of embrace of consumer engagement. Two alliances, which had prior experience in consumer engagement and leaders who strongly supported the work, developed robust self-management programs and integrated patients into their quality improvement teams. The Humboldt County, CA alliance reached 1 in 103 adults in the county with an evidence-based self-management support intervention. The South Central PA alliance started a patient partner program in 2012, which has grown to 70 patients working in 58 clinics' quality improvement teams a year after AF4Q ended.

More commonly, alliances embraced other areas of consumer engagement that required less direct interaction with large numbers of individual consumers. The area most often embraced was involving consumers in alliance governance. Half of the alliances strongly embraced it, several changing bylaws to require 1-2 individual consumers on the organization’s board. Additionally, 7 alliances developed consumer-friendly public reporting websites, with 2 out of 3 of the following criteria: low reading levels, plain language, and evaluable displays, like stars.

The alliances that did not strongly embrace an area of consumer engagement often made a concerted, but limited, attempt to do work in the area. Often the alliances reported learning a lot through the experience, but since the efforts frequently were not natural fits for the organization, many were small in scope and short-lived. There also were several alliances that did minimal work in consumer engagement.

Overall, AF4Q enabled 2 alliances to develop robust consumer engagement programming. It exposed many other alliances to consumer perspectives on their work, which they likely would not have otherwise seen: "It's been helpful...I don't think we would have on our own headed down that path." The AF4Q program also pushed the consumer engagement field forward with technical assistance providers, evaluation team members, and alliance leaders publishing papers defining the concept and detailing approaches to implementing programs.

Based upon the AF4Q experience, future efforts to develop consumer engagement programs should involve consumer-facing organizations with existing expertise and commitment to consumer engagement. That would likely reduce many of the barriers to developing consumer engagement efforts experienced within AF4Q.