NEW JERSEY HEALTH CARE QUALITY INSTITUTE

PERINATAL COMMUNITY ADVISORY BOARD (PCAB) TOOLKIT:

A Guide for Hospitals to Build Community-Driven Change to Advance and Improve Maternal Health Outcomes







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The Power of PCABs:

Advancing Care Through Community Voices and Collective Partnership

Imagine a patient navigating pregnancy, labor, and postpartum care—attending appointments, asking questions, and making decisions about their care. There may be moments when they feel supported and heard, and others when their concerns are overlooked or not fully understood. These experiences offer important insight into how care is delivered in practice.



Stories like these reveal nuances that clinical data alone cannot capture. They highlight gaps in communication, barriers to access, and opportunities to improve care.

This is where Perinatal Community Advisory Boards (PCABs) play a critical role. By creating a structured space for individuals and families to share their lived experiences, PCABs bring community voices directly into hospital decision-making.



PCABs ensure that care is designed not just for patients and communities, but with them. They elevate diverse perspectives and help hospitals identify gaps, strengthen trust, and co-create more inclusive, responsive solutions. This collaborative approach creates ongoing opportunities for feedback, accountability, and alignment.

Ultimately, PCABs translate lived experience into action, improving care experiences, advancing health equity, and driving more meaningful and sustainable improvements in maternal care.

Section I: Introduction

A Perinatal Community Advisory Board (PCAB) is a formal partnership between hospitals and community members. It creates a structured way to ensure that the voices and experiences of people who are pregnant or have given birth inform the design, delivery, and improvement of perinatal care.

PCABs bring hospitals and communities together to strengthen maternal health through meaningful collaboration. They help shape hospital policies, improve services, and promote care that is respectful, responsive, and centered on the needs of people giving birth. Unlike traditional advisory groups, PCABs emphasize shared decision-making, mutual respect, and authentic engagement—positioning community members as active partners in shaping perinatal care and outcomes.



PCABs help hospitals:

- **Understand patient experiences and barriers to care**
- **Identify inequities in maternal health outcomes**
- **Improve trust between health care systems and communities**
- **Inform hospital policies, procedures, and quality improvement initiatives**
- **Ensure that interventions reflect community priorities and needs**

The Impact of Community Partnerships on Health Outcomes

Community partnerships, such as PCABs, play a critical role in improving maternal health outcomes by building trust, enhancing patient experience, and increasing engagement in care (National Partnership for Women & Families, 2023; Urban Institute, 2025).

When community members are meaningfully involved,healthcare systems gain deeper insight into real-life experiences, needs, and barriers, leading to more informed and responsive decision-making. By centering lived experience, these partnerships promote more equitable, culturally responsive practices and help address systemic barriers.

PCABs create opportunities to redesign care so that it is respectful and responsive to patient needs. Over time, this form of collaboration strengthens relationships, improves accountability, and supports sustained engagement (Center for Health Care Strategies, 2019). The result is more effective, community-driven improvements in care and maternal health outcomes.

Purpose and Use of The Toolkit

This toolkit provides a flexible, step-by-step framework for building and sustaining a PCAB. It supports organizations in assessing readiness, establishing strong structures for engagement, and integrating community input into care improvement efforts.

Who Should Use This Toolkit?

This guide is designed for hospitals, health care providers, facilitators, and community partners working to improve maternal health outcomes. It offers practical guidance for engaging communities and supports both staff and community members in co-designing solutions that drive meaningful change.

New Jersey PCAB Model

In 2023, PCABs were established through a pilot initiative to improve maternal health care experiences and outcomes. This work was informed by the National Partnership for Women & Families' (NPWF) Raising the Bar for Maternal Health Equity and Excellence: Actionable Strategies for Healthcare Systems.

Led by the New Jersey Health Care Quality Institute, the pilot was implemented in partnership with two health systems, Capital Health Medical Center and Penn Medicine Princeton Health, to inform improvements in care through community collaboration. As a result, their PCABs have contributed to:

- Strengthening communication and cultural responsiveness in care
- Informing changes to hospital policies, practices, and patient materials
- Addressing gaps in maternal health care
- Creating consistent feedback loops between the community and clinicians

Their efforts demonstrate the value of centering community voice and co-leadership in improving care. As the model continues to expand across New Jersey, it is helping scale more equitable, respectful, and person-centered approaches to perinatal care.

Section II: Planning & Implementation Foundations

Building a PCAB requires thoughtful planning, organizational alignment, and a clear commitment to partnership. By prioritizing transparency, shared goals, and community-driven approaches, hospitals can create strong foundations for meaningful engagement and ensure community voices inform maternal health efforts.

Hospitals should assess their readiness, secure leadership support, and identify internal champions to guide the work. Early planning should also address recruitment, logistics, compensation, and how community input will inform improvements.

New Jersey PCAB Model

In the New Jersey pilot, hospitals spent approximately 6–7 months internally preparing with hospital and maternal health leadership before launching their PCABs.

This preparation phase focused on building internal alignment, securing leadership support, defining goals, and establishing the structures needed for meaningful engagement.

Once established, PCABs took an additional 12–18 months to build relationships, align priorities, and develop sustainable structures that support ongoing collaboration and impact.

Key Preparation Steps:

- Define hospital goals, PCAB scope, and how community input will inform hospital decision-making
- Establish membership criteria to ensure diverse representation
- Recruit PCAB members through partnerships, referrals, and community networks
- Onboardi members through orientation
- Prepare essential materials (e.g., member agreements, consent forms, etc.) to support transparency and structure

The following areas support effective, organized, and sustainable PCAB efforts:

Understanding the Maternal Health Landscape

- Conduct a maternal health landscape analysis to understand local services, data, and community resources and needs
- Use data to help guide informed, community-driven decision-making



Progress Tracking for Accountability

- Develop timelines, workplans, and tracking tools to monitor progress
- Use a tracker to align goals, activities, and outcomes
- Schedule regular check-ins to assess progress and adjust as needed



Sustainability Planning

- Engage hospital leadership early in sustainability discussions
- Identify long-term resources and staffing
- Integrate the PCAB into existing systems



Compensation & Incentives

- Offer stipends, gift cards, or other compensation to honor members' time and contributions
- Provide childcare, transportation, or meal support to reduce barriers to participation



Communication & Engagement

- Maintain regular communication with PCAB members between meetings
- Share updates on how community input is being used
- Celebrate milestones and acknowledge contributions publicly



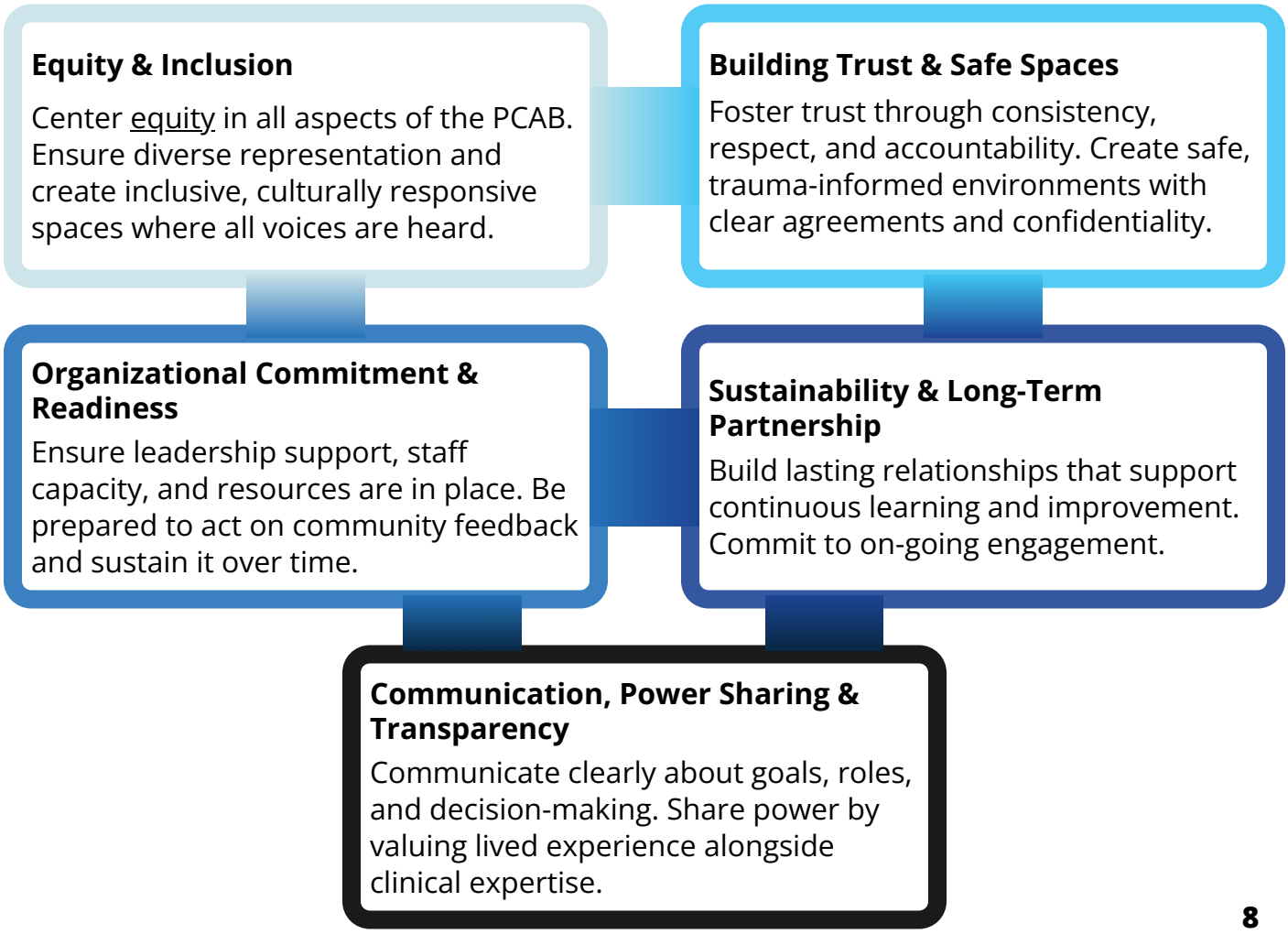
Understanding Historical Context and Community Impact

Before engaging communities, hospitals should understand the historical and systemic factors that shape community experiences with health care. Many communities have experienced harm, making acknowledgment essential to building trust. Engagement requires humility, active listening, and valuing lived experience alongside clinical expertise. By recognizing community strengths and perspectives, hospitals can build more equitable partnerships and support meaningful improvements.

Guiding Principles for Community Engagement

Effective engagement is grounded in equity, respect, and shared power. PCABs should recognize community members as experts in their lived experiences. This requires transparent communication, clear roles and expectations, and a commitment to ensuring community input informs decision-making. Engagement should be culturally responsive, inclusive, and consistent.

PCAB Principles At a Glance



Accessibility, Compensation, and Supports

Equitable participation requires reducing barriers to participation and recognizing the value of community members' time and expertise. Providing compensation also demonstrates respect and build trust. Financial compensation should be standard, reflecting their role as **partners and co-creators in this work**.

Compensation should be **communicated clearly**, provided consistently, and **aligned with the level of time and contribution expected**. When financial compensation is not available, alternative supports should be provided to enable participation. These may include childcare, transportation assistance, and meals or groceries to take home.

Best practices from national guidelines:

- Recognize compensation as an equity issue and value lived experience as expertise (UI, 2023; HHS, 2022)
- Engage community members as partners, not just participants (NPWF, 2023)
- Align compensation with time, expertise, and level of involvement (PCORI; UI, 2023)
- Reduce barriers to participation alongside compensation (HHS, 2022)

New Jersey PCAB Model

The New Jersey PCAB pilot implemented a compensation model to support equitable participation and reduce barriers to engagement.

PCAB members (excluding hospital staff) each received $175 per meeting:

- $100 participation stipend per meeting
- $45 for childcare, based on $15 per hour for a 2–3 hour meeting
- $30 for transportation support

Following the pilot, hospitals have approached sustaining compensation differently. One has continued providing stipends, reinforcing their commitment to equitable engagement and ongoing partnership. The other faced challenges due to funding and organizational changes. They are working with hospital leaders and PCAB members to identify sustainable solutions.

These experiences highlight the importance of early sustainability planning, leadership alignment, and flexibility. While maintaining compensation can present challenges, continued commitment to equitable participation remains essential to sustaining trust and meaningful engagement.

PCAB Materials and Forms

Prepare materials outlining purpose, roles, and expectations. This may include member agreements, confidentiality forms, and onboarding materials. Clear information supports transparency, helping members engage with confidence and clarity.

See Appendix D: Sample Forms, Templates, and Resources for the following:

1. **PCAB Member Agreement (Roles, Expectations, Participation)**
2. **Confidentiality Agreement**
3. **Onboarding/Orientation Materials**
4. **PCAB Overview Document (Purpose, Goals, Structure)**
5. **Consent and Media Release Forms**
6. **Meeting Agendas and Facilitation Guides**

Section III: Building Your Own PCAB

Authentic engagement requires a shared commitment to respectful, collaborative participation and clear roles. PCAB members should understand their role as active contributors, bringing lived experience, perspectives, and ideas to shape initiatives.

At the same time, hospitals must create inclusive, safe environments. Intentionally shift power by valuing lived experience alongside professional expertise. Demonstrating how community input leads to tangible changes in policies and practices is critical.

PCAB Participation Expectations

- Attend meetings regularly
- Contribute lived experience and perspectives to inform and shape care delivery

Term Length

- Typical term is 2-3 years

Membership Composition

A strong PCAB intentionally reflects the diversity and experiences of the community.

Total Membership	10-12 members
Prioritize	Birthing people, support persons, and community representatives
Majority	Voices impacted by maternal health disparities and a range of birth experiences (positive and negative)

Governance and Decision-Making

How will the PCAB operate? Consider leadership roles, communication, and meeting frequency. Clearly define their role in decision-making, including how members influence policy and practice.

PCAB members should:

- Provide input to inform decisions
- Participate in decision-making
- Contribute to or vote on recommendations

Hospitals must create inclusive, safe environments, intentionally shifting power by valuing lived experience alongside professional expertise. Demonstrating how community input leads to tangible changes in policies and practices is critical.



Recruitment and Selection

Effective recruitment strategies are essential to building a PCAB that reflects the diversity and lived experiences of the community. Use multiple outreach approaches to reach and engage community members, including:

- Partnering with community-based organizations
- Leveraging patient referrals and existing relationships
- Conducting targeted outreach through social media and local networks

Consider the following:



Patients & Support People

- Individuals who live in the region and had or will have a perinatal care experience in your health system
- Spouses, partners, grandparents, or close supports



Community-Based Partners

- Community health workers
- Doulas
- Faith-based leaders
- Local grassroots and community-based organizations
- Midwives
- Social service organizations
- Community leaders



Hospital Representation

- No more than 5 members
- Clinical staff (e.g., obstetricians, pediatricians, midwives, nurses)
- Patient experience or quality improvement staff
- Maternal health and hospital leadership

A thoughtful selection process helps ensure readiness and alignment. Selection should be guided by clear, pre-established criteria that balances lived experience and representation.

Once selected, members should receive formal invitations, orientation sessions, and onboarding materials.

Tip

Recruitment is not just about filling seats—it's about building diverse representation and trust.

Section IV: Running an Effective PCAB

PCABs rely on thoughtful preparation that prioritizes clarity, inclusivity, and purpose. This includes preparing facilitators, setting clear objectives, and anticipating sensitive topics. Strong preparation creates a structured yet flexible environment.

Strategies to support sustained engagement:

- Establish consistent and accessible meeting structures
  - Set a regular meeting frequency
  - Choose a format (in-person, virtual, or hybrid)

- Co-develop and share agendas in advance
- Provide participation supports
  - Offer financial compensation;
  - Provide childcare, transportation, and language support
- Respect members' time and contributions

New Jersey PCAB Model

New Jersey PCAB members found in-person meetings to be more effective for strengthening relationships and engaging in the work. For focused projects, they increased meeting frequency to maintain momentum.

Meeting Preparation Checklist:

- ☐ Agenda and sign in sheets
- ☐ Meeting materials (e.g., slides, handouts, talking points)
- ☐ Participant list with contact information
- ☐ Technology setup
- ☐ Notetaking and feedback tools

Priority Topics and Collective Work

Effective PCABs move from discussion to collective action. Focus areas should be co-developed using lived experience and data to guide priorities. Early conversations should create space to share experiences, concerns, and ideas, helping to identify barriers and opportunities for improvement.

Hospitals can support this by:

- Reviewing maternal health and patient experience data with the PCAB
- Assessing existing partnerships and internal policies and practices

These insights inform the selection of focus areas that are meaningful, equitable, and actionable. PCABs should translate priorities into clear action steps, initiatives, or practice changes—with defined responsibilities, timelines, and follow-up processes.

Tip

Use data to inform but let community voice lead priorities. By turning community insights into action, PCABs can directly influence maternal health and system improvements.

Section V: Sustaining and Improving Your PCAB

Sustaining a PCAB requires early planning, aligning with strategic priorities, securing resources, and integration into existing systems.

Key Considerations Include:

Securing Funding
for compensation, staffing, and operations

Embedding the PCAB
into hospital policies, workflows, and decision-making

Communicating Impact
regularly to leadership and stakeholders

Exploring Additional
partnerships and resources to help further efforts

Continuously Recruiting
and on-boarding members to maintain diversity and momentum



Leadership Development and Capacity Building

Supporting leadership development and building capacity among PCAB members strengthens engagement. It also promotes shared ownership of the work. Create opportunities for members to grow as leaders, contribute more deeply, and take on active roles within the PCAB.

Strategies include:

- Offering and supporting leadership roles (e.g., co-chairs, facilitators, project leads)
- Providing training/skill-building opportunities (e.g., advocacy, quality improvement)
- Creating mentorship opportunities between members and staff
- Evaluation helps assess impact, engagement, and effectiveness while demonstrating value to leadership.

Evaluation and Continuous Improvement

Evaluation helps assess impact, engagement, and effectiveness while demonstrating value to leadership.

Consider how you will:

Measure Impact
on maternal health outcomes and patient experience

Assess Engagement
of members and satisfaction

Identify Strengths
and areas for improvement

Demonstrate Value
to sustain leadership support and funding

Using Findings for Improvement

Actively use evaluation findings to strengthen and refine the PCAB over time.

Approaches include:

- Sharing results with members and other stakeholders
- Incorporating feedback into meetings
- Adjusting recruitment and engagement strategies as needed
- Tracking progress on implemented recommendations

Best Practices and Lessons Learned

The New Jersey PCAB pilot demonstrated how meaningful community partnerships can lead to tangible improvements in maternal and perinatal care. Several key lessons emerged that can inform and strengthen future PCAB efforts.

Prioritize Relationship-Building and Trust

Building trust over time is foundational. In New Jersey, the first year focused on relationship-building and creating space for members to connect and share experiences. Successful PCABs prioritize consistent engagement, transparency, and follow-through. Close the feedback loop so members understand how their input informs decisions. When recommendations cannot be implemented, openly communicate constraints and reasons to maintain credibility and trust.

Co-Design with Community Members
Co-design is a core best practice. In New Jersey, PCAB members contributed to the development of patient-centered spaces and strengthening of services, including a NICU family area and maternal mental health fellowship. Their input also improved materials and communication tools, making them culturally responsive and inclusive.

Strengthen Community Partnerships
Building connections with community-based partners strengthens care beyond the hospital setting. Initiatives such as doula engagement events and community open houses improved collaboration between clinical teams and community providers, improving continuity of care and support for families.

Sustain Engagement Beyond Meetings
Sustaining engagement beyond formal meetings emerged as a key success factor. Community members participated in one another's events, shared testimonials, and supported outreach efforts—reinforcing the PCAB as an ongoing partnership.

Remain Adaptable and Center Equity
Remain adaptable and responsive to evolving community needs while consistently centering equity and lived experience. Recognizing and celebrating member contributions further supports engagement and sustainability.

Together, these practices demonstrate that when hospitals authentically engage communities as partners, they can drive more responsive, equitable, and impactful improvements in maternal health outcomes.

Appendix A

Frequently Asked Questions

What is a Perinatal Community Advisory Board (PCAB)?
A PCAB is a partnership between hospitals and community members that ensures the voices and experiences of people who have given birth, will give birth, or those who support them inform perinatal care and decision-making. The goal is to improve maternal health outcomes and advance equity in care.

Why should hospitals create a PCAB?
PCABs help hospitals better understand community needs, improve patient experience, reduce disparities, and design and improve more effective, community-informed interventions and policies.

Who should be part of a PCAB?
PCAB members should include individuals who live or work in the community or region the hospital serves. Consider including: Birthing people who had or will have a childbirth experience at the health system, support people, midwives, doulas, community health workers, community lactation counselors, faith-based leaders, local community organizations, social services organizations, and community leaders.

How often should a PCAB meet?
Most PCABs meet bi-monthly or monthly, depending on goals and capacity, with flexibility to adjust as needed.

Should community members be compensated?
Yes. Providing stipends or other forms of compensation demonstrates respect for members' time, expertise, and contributions—and reduces barriers to participation.

How is PCAB input used?
Hospitals should clearly define and communicate how PCAB contributions will inform policies, programs, care delivery, and quality improvement efforts.

What makes a PCAB successful?
Strong facilitation, clear expectations, trust-building, shared decision-making, intentional co-design and consistent follow-through on community input are keys to success.

Appendix B

One-Page Quick-Start Guide

Getting Started
□ Secure leadership buy-in and identify internal champions
□ Define the PCAB's purpose, goals, and scope
□ Allocate resources (staffing, compensation, logistics)

Build the Foundation
□ Define membership criteria (diversity, lived experience, skills)
□ Create key materials (agreements, confidentiality forms, onboarding resources)
□ Establish guiding principles and group agreements

Recruit and Onboard
□ Conduct outreach through community partners and networks
□ Select members to ensure diverse representation and experience
□ Send invitations and host orientation sessions

Plan for Meetings
□ Set a consistent meeting schedule and format
□ Prepare and share agendas in advance
□ Arrange participation supports (compensation, childcare, transportation, etc.)

Facilitate and Engage
□ Use inclusive, trauma-informed facilitation practices
□ Encourage shared leadership and active participation
□ Create space for open, respectful dialogue

Act and Improve
□ Translate input into clear action steps
□ Communicate how community input informs decisions
□ Track progress and share updates regularly

Sustain and Evaluate
□ Provide ongoing support and leadership opportunities
□ Gather feedback and evaluate impact
□ Refine and strengthen the PCAB over time

Appendix C

PCABs in Practice – New Jersey Case Studies

These case studies highlight the impact of PCABs implemented in two New Jersey hospitals, demonstrating how community partnership can drive improvements in care. They offer practical insights and real-world applications to inform future PCAB efforts.

Hospital 1

PCAB At a Glance

Members:	Hospital Staff:	Meetings:	Format:
10-12 *(majority community)*	≤ 5	In-person quarterly, virtual ad hoc	Hybrid

Co-Designed Patient Spaces

Proposed and helped develop a NICU nesting room, shaping the design and messaging to ensure it was welcoming and accessible.

Built Partnerships with Doulas

Created doula meetings and open houses, strengthening relationships between hospital staff and community-based providers.

Expanded Family Support Services

Discussions highlighted gaps in support, leading the hospital to commit to developing a budget for a dedicated maternity care social worker position.

Strengthened Mental Health Support

Developed a maternal mental health fellowship program, increasing access to support and referrals for postpartum parents.

Advanced Inclusive Communication

Input led to more inclusive language practices in care delivery.

Hospital 2

PCAB At a Glance

Members:	Hospital Staff:	Meetings:	Format:
10-12 *(majority community)*	≤ 5	Every other month	Hybrid (in-person quarterly

Focus: Strengthening Community Connections and Engagement

Improved Restfulness

Provided input on strategies to promote restful environments for patients during the postpartum period, informing updates to care practices.

Revised Patient Education and Communication

Collaborated on a maternity care tour video and patient education materials to ensure a family-centered, culturally responsive approach reflective of diverse experiences.

Expanded Community Engagement

Supported the hospital's bi-annual community baby shower, leading to increased community participation and board members hosting tables.

Supported Community-Led Initiatives

Increased hospital support and participation in PCAB members community efforts, including a food packaging event and breastfeeding awareness campaign, reinforcing ongoing collaboration.

Elevated Community Voices

Shared testimonials, highlighting the value of community voice in improving care and building trust.

Appendix D

PCAB Resources

Find curated resources on:

- **Community engagement best practices**
  - National Partnership for Women & Families. (2023). Raising the bar: The role of community partners in maternal health equity. https://nationalpartnership.org/wp-content/uploads/2023/04/rtb-community-partner-role.pdf
  - Urban Institute. (2018). Fostering partnerships through community engagement. https://www.urban.org/research/publication/fostering-partnerships-community-engagement
- **Advisory board facilitation**
  - Center for Health Care Strategies. (2019). Engaging community members: A guide to equitable compensation. https://www.chcs.org/engaging-consumers-and-communities-to-meaningfully-transform-care/
  - Urban Institute, (2024) Tools and Resources for Project Based Community Advisory Boards. https://www.urban.org/sites/default/files/2024-03/Fostering%20Partnerships%20for%20Community%20Engagement.pdf
- **Trauma-informed engagement**
  - Courtney, W. T., Hartley, B. K., Rosswurm, M., LeBlanc, L. A., & Lund, C. J. (2020). Establishing and Leveraging the Expertise of Advisory Boards. Behavior analysis in practice, 14(1), 253–263. https://doi.org/10.1007/s40617-020-00503-1
  - Prevention Institute. (2017). Adverse community experiences and resilience: A framework for addressing and preventing community trauma (Executive summary). https://www.preventioninstitute.org/sites/default/files/publications/Adverse%20Community%20Experiences%20and%20Resilience%20Executive%20Summary.pdf
  - Weinstein, E., Wolin, J., & Rose, S. (2018). Trauma-informed community building and engagement. Urban Institute. https://www.urban.org/sites/default/files/publication/98296/trauma-informed_community_building_and_engagement_0.pdf

Appendix E

Sample PCAB Forms and Templates

The templates listed below are included in the following pages:

- PCAB Member Application
- PCAB Member Offer Letter
- Confidentiality Agreement
- Photo/Media Release
- First Meeting Agenda

Please feel free to use or modify these documents to fit your hospital and/or PCAB needs.

Sample PCAB Member Application

Thank you for your interest in serving as a Board Member on the Perinatal Community Advisory Board (PCAB) at **[hospital]**. We are seeking Board Members who reflect the diverse experiences of patients and families who use maternity services and clinics. This group will work with **[hospital]** to help inform maternal and infant health strategies and support sustainable change.

Please complete this brief application. A selection committee will review all submissions.

The commitment to serve on this Board is a 2-year term and includes attendance at **[frequency]** meetings. There may be additional optional opportunities for involvement. Board placements are based on available openings, a candidate's interests and experience, and the needs of **[hospital]**.

Please print:
First Name: _____
Middle Initial: _____
Last Name: _____
Preferred Name: _____
Best phone number to reach you: (___) _____
Email address: _____
Language(s) you speak: _____
Pronouns: _____
Age: _____
Race/Ethnicity: _____
Address: _____
City: _____
State: _____
Zip Code: _____
Best way to contact you:
□ Phone (circle best time): Morning / Afternoon / Evening
□ Email

Please answer the following questions:

1. Which group(s) do you identify with? Select all that apply.

□ Birthing person
□ Support person
□ Doula
□ Community health worker
□ Community member
□ Lactation consultant
□ Faith-based organization: _____
□ Community organization: _____
□ Other: _____

2. In the past, have you served on or volunteered for community projects, initiatives, or committees?

3. Please tell us why you are interested in serving on this Board.

4. How did you hear about the Perinatal Community Advisory Board (PCAB)?

If selected to be a Board Member:

5. Which days of the week are you available to meet in person? Select all that apply.

- □ Monday
- □ Tuesday
- □ Wednesday
- □ Thursday
- □ Friday

6. Which time of day is best for you to attend the meetings? Select all that apply.

- □ Morning (7 AM - 11 AM)
- □ Afternoon (12 PM - 4 PM)
- □ Evening (4 PM - 7 PM)

7. Please share any needs or requests to support your participation (e.g., ASL interpretation, translation, accessible meeting spaces, etc.):

Please return this application to **[Email]** or mail to:
[Contact Name and Title] [Hospital Name] [Address}

If your application is selected, we will contact you for an interview. For questions, please contact us at **[Phone Number]**.

We look forward to partnering with you. Please feel free to share this opportunity with others who may be interested.

Thank you.

Sample PCAB Member Offer Letter

Date

Dear **[Name]**,

Congratulations! We are pleased to invite you to serve on our Perinatal Community Advisory Board (PCAB). We are excited for the opportunity for you to share your valuable insights. PCAB members reflect the diverse needs and experiences of community members, and this group will help inform maternal and infant health strategies and support sustainable change.

The PCAB will meet at minimum bi-monthly, with possible subcommittee work between meetings.

- Our first meeting will be held on **[Date]**.
- The meeting will begin at **[Time] [AM/PM]** and end at **[Time] [AM/PM]**.
- We will meet at **[location]**.
- Dinner and refreshments will be provided.
- The PCAB will determine future meeting dates based on a survey of members. Future meetings will take place at locations that are most convenient for PCAB members.

Please send a signed copy of your participation considerations letter by email to **[Email]** or by mail by **[Date]**.

Please don't hesitate to contact us if you have any questions about the participation considerations letter, the orientation session, or if you need assistance with any forms. We look forward to advancing maternal health together and creating long-lasting change for birthing people and families.

Sincerely,

[Name]
[Title]
[Organization]
[Contact Information]

Sample PCAB Confidentiality Agreement

STATEMENT OF CONFIDENTIALITY

I understand and agree that in the performance of my duties at [Hospital Name], I must hold patient, employee, committee, peer review, and all other business operation information in confidence. This includes any confidential information I may come across in the line of duty or inadvertently, regardless of how it is presented to me (hard copy, verbal, audio, and which is electronically generated or stored). I also understand that **[Hospital Name]** information is only accessible to fulfill the obligation needed to plan, provide, complete, and document the service provided.

Upon the conclusion of my term with the Perinatal Community Advisory Board (PCAB), I agree to promptly surrender and deliver any documents, records, notes, or other Confidential Information to the Perinatal Community Advisory Board.

I understand this data and information is confidential and proprietary and protected by law. I agree as a part of my participation on this Committee that I will not use or disclose in any manner this information outside the Committee. I also understand that should I use or disclose this information outside the Committee, I may be subject to applicable legal penalties

I have read the above CONFIDENTIALITY Statement and agree to its terms and conditions.

Date _____

Print Name _____

Signature _____

Home Address _____

City, State, Zip _____

Home Phone _____

Cell Phone _____

Sample PCAB Photo Release Agreement

Name: _____
Date of Birth: _____
Phone Number: _____
Home Address: _____

Capture of Images
[Hospital] would like permission to take photos or videos of me, or have a partner take them. These images may be shared with the public.
I give permission for **[hospital]** and its partners to take and use my photo or video in any format (digital or print).

Use of Images
I give permission for my images to be used for (check all that apply):
[ ] Newspapers, magazines, TV, or radio
[ ] National news
[ ] Newsletters
[ ] Advertising (TV, billboards, print)
[ ] Websites
[ ] Social media
[ ] Other: _____

Term/Expiration
I understand that I am not required to sign this authorization and that I do so voluntarily. My decision will not affect my health care or payment for care. If I do sign, my images may be shared and may no longer be private. ***This authorization will expire in 24 months.*** However, any images used or collected during that time may continue to be used after the 24-month period.

Your Right to Cancel
I can change my mind and cancel this permission. To do this, I can contact **[hospital]** at **[Contact Information]**.

Signature: _____
Date: _____

Sample First Meeting Agenda

I. Welcome & Introductions

II. Icebreaker Activity

III. Introduction & Overview
- PCAB Overview
- Defining the PCAB
  - Purpose, goals, mission, vision, timeline, and commitment
- PCAB Roles & Ground Rules
  - Creating a collective impact
  - Review of Agreements
  - Brief overview
    - Sign required documents, if needed

IV. Break
- Open discussion and Q&A

V. Maternal Health Data Review
- Hospital Data
- Community Data

VI. Planning Next Meeting
- Confirm date, time, and location
- Review overall timeline

VII. Next Steps
- Action Items
  - Review and sign PCAB documents
  - Review assigned materials (data, article, book, or podcast)

Sample PCAB Member Recruitment Guideline Chart

Community Partner Type (birthing person, community organization, doula, etc.)	**Do you have a prior connection with this contact?** (Yes or No)	**Name(s) and Title**	**Organization** (if applicable)	**Notes**

PCAB Membership:

Board members should include diverse representation from the community within the area the hospital serves, along with hospital-level representation. Examples include:

- Birthing people who had or will have a perinatal experience at the hospital
- Partners, grandparents, or close friends of birthing persons
- Midwives
- Community leaders/members
- Doulas/Doulos
- Doulas/Doulos
- Community Health Workers
- Community Lactation Consultants
- Faith-Based Organization/Church Leaders, and/or Membrs
- Local Grassroot/Community Organizations
- Social Services Organizations

Sample PCAB Member Recruitment Guideline Chart

Recruitment Organizations

The list below provides example organizations and institutions where PCAB members may be recruited. These organizations may also be able to help with recruitment outreach, such as sharing PCAB recruitment in a newsletter, email blast, etc.

- Childcare Centers
- Housing Organizations
- Faith-based organizations
- Women's Shelters
- Libraries
- Local Businesses (food vendor, beauty salon, etc.)
- Home Visiting Programs
- Parent Support Groups
- Family Success Centers
- Clinics
- Maternal Child Health Consortia
- Community Doula Organization
- Advocacy Groups
- Resource Distribution Organizations

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Acknowledgements

About the New Jersey Health Care Quality Institute:
The New Jersey Health Care Quality Institute (Quality Institute) is an independent, non-profit organization dedicated to improving the safety, quality, and affordability of health care. Since 1997, we have led statewide efforts to transform health care by bringing together our diverse members — including health systems, insurers, providers, consumer groups, and employers — to find solutions grounded in evidence and collaboration.

Our work spans policy development, quality improvement, and community health initiatives that advance evidence-based policies and champion best practices. The Quality Institute advances maternal health across New Jersey through a comprehensive portfolio of programs focused on policy, practice, and workforce support:

- The Maternity Action Plan (MAP) advances policy solutions and strengthens midwifery integration to improve maternity care statewide.
- Perinatal Mental Health First Aid provides training for community health workers and others to recognize and respond to mental health symptoms or crises among pregnant and postpartum individuals.
- TeamBirth NJ is a statewide initiative to improve communication and ensure respectful care that aligns with patient preferences.
- Raising the Bar for Maternal Health is a statewide initiative dedicated to advancing equitable, high-quality maternal care. Through our Maternal Health Benchmarking Survey and the establishment of Perinatal Community Advisory Boards (PCAB), participating hospitals and health systems gain critical insight into care delivery across settings and embed community voices directly into perinatal decision-making.

Together, these programs promote safer and more respectful maternity care for all families. With a membership of more than 120 organizations, the Quality Institute serves as a trusted convener working to advance meaningful change in New Jersey health care.

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NEW JERSEY HEALTH CARE QUALITY INSTITUTE

PERINATAL COMMUNITY ADVISORY BOARD (PCAB) TOOLKIT







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