

The HMP is a unique educational experience in which teams of students from different health disciplines learn from and with a mentor who has a chronic condition or disability, or is a caregiver. Mentors are key informants and expert witnesses of the health care environment.

Over 9 months student teams (3-4 students per team) form learning communities with an emphasis on reciprocal learning: mentor-student, student-mentor, and student-student. Students meet with their mentor 7 times, with each meeting focusing on specific topics. Students document their learning in online reflective journals. Faculty

read the otherwise confidential journals written after each meeting.

Sessions

- 1. Orientation and introduction to the health care team
- 2. Words and meanings and why they matter
- 3. Living with chronic disease/disability and Its management
- 4. The health care team and patient/client-centred care
- 5. Finding, managing, and sharing health information
- 6. Symposium
- 7. Partnerships, collaboration, shared decision making and the future

Program Goals:

- Students learn about the experience of chronic disease/disability
- Provide learning relevant to all six interprofessional competency domains identified in the Canadian National Competency Framework for Interprofessional Collaboration
- Students meet discipline-specific objectives related to topics such as the social determinants of health and communication skills

September	November		Janu	January		May	
Session 1	Session 2	Session 3 Session 4		Session 5	Symposium	Session 7	
•	•	۲	۲	۲	٠	٠	
Orientation Groups meet, get know each other, ground rules like dentiality, and pla they will work top	r, set ing we g confi- live with an how condition	the importance of m give to words, and ho and manage chronic	ean- Mentors m w to experience	pport Meeting neet to share es and discuss ques- t the program	Symposium Groups present journeys to thei visual presentat "Tweets" to sur messages	ir peers via tions using	

Mentors and Students

Mentors are recruited through community organizations. Applicants who meet the criteria are interviewed by previous mentors and a student graduate of the program.

Currently **235** mentors have been recruited and over **60** mentors have taught **3+** cohorts. Mentors have a wide range of chronic diseases/ disabilities including musculoskeletal, psychiatric, neurological, systemic, and congenital conditions. Many have expertise in managing more than one health condition.

Meet some of our mentors at: <u>https://tinyurl.com/yxdqo4vm</u>

Students are from audiology, clinical psychology, dentistry, dietetics, genetic counselling, nursing, kinesiology, medicine, occupational therapy, pharmacy, physical therapy, public health, and speech-language pathology.

What do students say? https://tinyurl.com/yyesl8e2

Since 2011, **2097** students have participated. The program is coordinated by Patient & Community Partnership for Education with funding from the Office of UBC Health.



		2011-12	2012-13	2013-14	2014-15	2015-16	2016-17	2017-18	2018-19	2019-20	2020-21	2021-22	2022-23	2023-24
Ment	tors	23	51	50	50	51	37	39	42	38	48	44	45	46
Stude	ents	89	197	200	184	200	142	154	160	128	192	157	144	150

Reflective Journals

- Students document their learning in online reflective journal entries. Students say that the journals:
- help them to develop reflective skills help them to consolidate their learning and link theory to practice

Symposium

Before their final meeting, the groups share their learning with other UBC students, faculty, and community members through a symposium. The event includes posterboard displays by each of the groups and provides the opportunity for guests to talk with students and mentors about their experiences in the program. A short phrase or "tweet" that describes one key piece of learning from the program is the centrepiece of each group's presentation.



Short-Term Impact

The short-term impact of the program has been tracked through reflective journals written by students after each group meeting, mid- and endof-program surveys, focus groups, and interviews. The program is highly rated by students and mentors.

"I learned that many illnesses are invisible or atypical, which can make it difficult for patients to connect with their support network and for healthcare workers to offer the help they need. Inter-professional programs like this work! It was wonderful working with students from other programs and comparing the differences in culture." Occupational Therapy Student



"The interdisciplinary students shared their expertise, roles, and perspectives. I found many opportunities to express gratitude for how each profession has nurtured my wholeness and given me hope. For the students, it may be an early and positive teamwork experience. The students' kind and curious questions brought into focus new aspects of living with disabilities. Their compassion softened my sufferings. They came to believe, as I do, that their work is sacred." Mentor

Worst Educational Experience 1	Post Program Satisfaction Evaluation	Students 4.00	Best Educational
		Mentors 14.67	Experience

Longer-Term Impact

Mentor Benefits: We surveyed 72 health mentors who mentored between 1-8 cohorts of students. Mentors perceive benefits in passing on their lived experiences to students, leading to personal growth and new activities. Program features that contributed to benefits included the non-clinical setting, informality of meetings and reciprocal learning, and feeling valued by the program and students.

Case-Based Student Assessment: Just before graduation, medical stu-

ARTICLES: Kline C, Riganti P, Moller-Hansen A, Godolphin W, Towle A. Patients benefit from mentoring students in an interprofessional health mentors program: A contextual-developmental analysis. *Medical Teacher*. (2022) 44(7):730-736

Kline CC, Park SE, Godolphin WJ, Towle A. Professional identity formation: A role for patients as mentors. *Academic Medicine*. (2020) 95(10):1578-1586.

Cheng PTM & Towle A. How patient educators help students to learn: An exploratory study. *Medical Teacher*. (2017) 39(3):308-314

Ng M. & Chu J. Increasing Patient Involvement in Health Professional Education. *Health Professional Student Journal.* (2015) *I*(1), 1-5.

Ruitenburg C. & Towle A. "How to do things with words" in health professions education. *Advances in Health Sciences Education Theory and Practice* 2015, 20 (4):857-872.

Towle A, Brown H, Kerston RP, Hofley C, Lyons H, Walsh C. The expert patient as teacher: an interprofessional health mentors programme. *The Clinical Teacher* 2014, 11(4)301-306.

Kladko, B. "A new window on patients' personal struggles." UBC Reports 2012, 58 (3) February 2012. http://tinyurl.com/m2xbq7g

PRESENTATIONS: Kline C, Macdonald J, Godolphin W, Towle A, Young M. Adapting to COVID-19: pros and cons of moving patient involvement in health professional education on-line. 6th Authenticity to Action Conference Celebrating Public and Patient Involvement in Health and Social Care Education, an international online conference sponsored by the University of Central Lancashire, 29-31 March 2021.

Riganti P, Moller-Hansen A, Kline C, Godolphin W, Towle A. Patients experiences as mentors in an interprofessional education program. 6th Authenticity to Action Conference Celebrating Public and Patient Involvement in Health and Social Care Education, an international online conference sponsored by the University of Central Lancashire, 29-31 March 2021.

Towle A., Kline C., Brown H., Hofley C., Cantner E. Maximizing Interprofessional Learning with Patients. *International Seating Symposium*. Vancouver, Canada. March 6-9, 2018. dents watched a video of a clinical scenario and wrote a care plan as the attending physician. Health Mentors students made significantly more statements that included the patient in care planning than their peers (P<.001, d = 0.4).

"Trying to really go in without any preconceived notion or try as best as I can to not make any assumptions and try really to know the person." said one resident.

Towle A. & Godolphin W. "I have her in my head" - The role of patient Health Mentors in professional identity development and shared decision making. *Association for Medical Education in Europe*. Helsinki, Finland, August 26-30, 2017.

Towle, A. Godolphin W. Interprofessional Health Mentors Program: Starting with words and meanings. *Research in Medical Education—Innovative Education Strategies. American Association of Medical Colleges Annual Meeting*, San Francisco, November 2012.

POSTERS: Di Silvestre C, Biehl C, Khalilie, K, Kline C. Qualitative study of student learning from health mentor patients. Qualitative Health Research Conference, Vancouver, BC. 25-29 Oct 2019.

Sawatzky B, Kline C, Towle A, Godolphin W, Armstrong L, Buckley H. Using case based assessment to evaluate the long-term outcomes of an interprofessional Health Mentors program: Lessons learned. *Where's the Patient's Voice in Health Professional Education?*, Vancouver Canada, November 12-14, 2015.

Towle A, Godolphin W, Kline C & Interprofessional Health Mentors Program Steering Committee. The Interprofessional Health Mentors Program symposium: a space for knowledge exchange. *Creating Space III—Arts, Humanities and Social Science in Medicine, Canadian Conference on Medical Education*, Quebec, April 2013.

WORKSHOPS: Sawatzky B, Kline C, Towle A, Godolphin W, Cheng P, Chauhan S, Johnson C, DeBeyer D. Maximizing interprofessional learning with Health Mentors. *Where's the Patient's Voice in Health Professional Education?*, Vancouver Canada, November 12-14, 2015.

Towle A, Brown H, Hofley C, Lyons H, Walsh C, Kerston RP. Maximizing interprofessional learning in a health mentors program. *Collaborating Across Borders IV*, Vancouver, June 2013.

VIDEOS: Mentor & Student Experiences, August 2013: <u>https://www.youtube.com/</u> watch?v=MsoPmSECgss (or search for UBC Health Mentors Program on Youtube).

 $\label{eq:second} Faculty, Mentors \& Students describe the benefits of the Health Mentors program, September 2013: https://www.youtube.com/watch?v=laK-p7JflFo.$

