Assessing the Benefit to Students from the Patient Companion Program Design

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**Background**: Patients are often encouraged to bring companions like a spouse, significant other, or friend to their medical visits to provide a variety of supportive functions and elderly patients with multiple health issues are more likely to bring a companion. Companions have shown a variety of benefits for patients at medical visits ranging from increased understanding of their physician’s advice to increased patient involvement. It stands to reason companions could also be beneficial for patients in long term care facilities who have unique risk factors for social isolation. The Patient Companionship Program (PCP) partners undergraduate and post-graduate students from Colorado universities with patients from the Veteran Community Living Center at Fitzsimmons and assess the impact of this patient companionship model on both the veteran patients and student volunteers. Additionally, the program serves as clinical experience for students pursuing careers in healthcare and a service to veteran patients in long term care. Students gain experience communicating with older adults, often chronically ill, and practice goal setting, visit navigation, and providing companionship.

**Objectives**: The primary objective was to provide meaningful volunteer opportunities to pre-health students while benefitting their patient companions living in the Colorado state veteran’s home. The secondary objective was to assess volunteer feedback regarding the program to improve upon the design and generate future avenues of research for the PCP.
Methods: To gather information regarding the feasibility of the Patient companionship Program, collect feedback from our student volunteers about strengths and weaknesses of the current design, assess the program’s ability to provide meaningful clinical experiences for the student volunteers, and to generate ideas for future research avenues, an audio recorded focus group session was conducted with the student volunteers from the first cohort. The focus group was conducted using a templated discussion format and a transcript was used for data collection.

Results: Strengths of the program included: student volunteers felt valuable to their patient when attending medical visits with them and helping their patients understand the medical care they received, they derived value from setting goals with their patient and helping them achieve several of those goals, they enjoyed and learned from the staff and expert guest lead lectures given during the program, they valued learning about and utilizing motivational interviewing techniques with their patients, and through interacting with elderly patients in long term care facilities, students witnessed and identified disparities in our healthcare system.

Weaknesses of the program included: lack of clearly defined staff roles which caused delays in communication and action, changes in program design and goals were not effectively communicated to student volunteers, student volunteers wished to have more direction from staff to direct volunteer interactions with their patients toward the program goals, and lack of data and measurable effect of student volunteers on patients.

Ideas to improve the program design and future research avenues included: creating ways to measure companion impact on patients (depression scores,
satisfaction scores, changes in outlook, improvements in health, and improvements in health literacy were discussed), tailoring lectures to student interests and goals they set with their patients, formal lectures or seminars related to helping students with their healthcare career ambitions (assistance with applications was discussed).

**Conclusions and Next Steps**: The feedback received from the focus group conducted with the first cohort of student volunteers indicated students found the program provides avenues for meaningful clinical experiences.

The focus group also elucidated strengths and weaknesses of the current program design and the dialogue generated many ideas for ways the PCP leadership can improve upon the design. PCP leadership worked to implement changes to the program consistent with the feedback received from cohort one such as tailoring lecture topics to student interests and clarifying both staff roles and the goals of the PCP.

Assessing the ability of the program to impact students’ views of our healthcare system, long term care facilities, geriatric healthcare, and veteran healthcare are potential next steps to be conducted with formal surveys. Additionally, formal surveys to assess the impact of student companions on outlook, mood, and understanding of healthcare decisions are potential next steps to be conducted with our veteran patients. At this time, IRB approval has not been sought for surveys. No data has been claimed to be generalizable. A focus group will be conducted with the second cohort of student volunteers using the same format to evaluate the same end points discussed in this paper. Using information gathered from these focus groups we aim to improve the program design and generate a hypothesis to be assessed using surveys with future cohorts.