



Clinical Mentoring at the PCOM Philadelphia Campus: A Student Originated Program

Michael A. Becker, D.O., MS, FACOFP

Emily J. Eshleman, MS, OMS-III

Danielle C. Estrada, MS, OMS-II

Pat Anthony Lannutti, D.O.

Rationale for the Program

- Create an equitable opportunity for all students to connect with a DO faculty member
- Build a support network on campus
- Connect students with the resources on campus
- Better communication



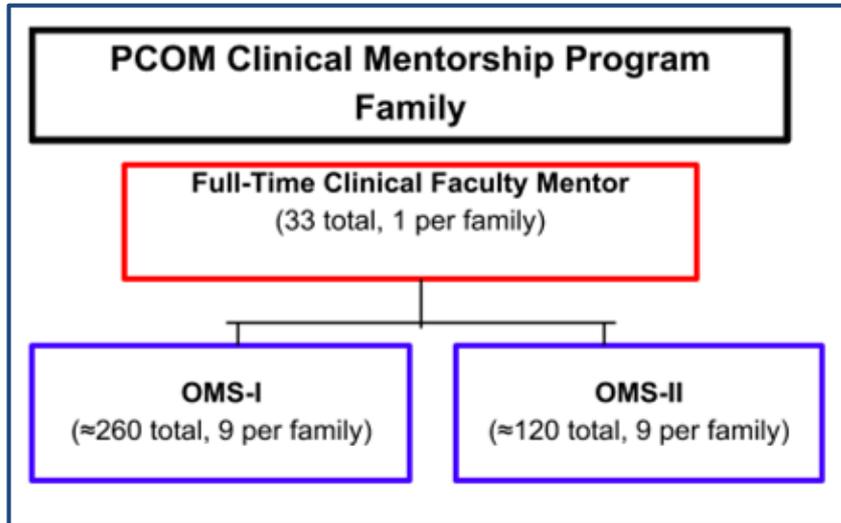
Program Design



- Evaluated the need and desire for a formal mentorship program through a survey sent out to students in the class of 2019 (N=60 out of 270)
 - 83% of students surveyed stated they did not have clinical mentors but most (95%) were very interested in acquiring one.
- Researched benefits of mentorship and logistical structures at other institutions
- Structure based off of priorities for program expressed by students in survey as well as the existing culture of our institution
- Term surveys were sent out to evaluate the progress of the program and whether or not program goals were being met



Program Structure: Pilot Year



Expectations for DO Student Mentees

- Mandatory one-on-one meetings with Clinical Faculty Mentor ≥ 1 /term
- Attend ≥ 1 Family Meeting each term with all family members on campus



Program Implementation Timeline



- **Feb 2016** - Support and endorsed from the PCOM Curriculum Committee
- **May 2016** - Approval from Kenneth J. Veit, D.O., MBA, FCOFP Provost of PCOM
- **June 2016** - Participation in the program was included in the **2016-2017** yearly Faculty Appointment Letter
- **July 2016** - received funds for initial family meetings
 - Coupons for PCOM cafeteria
- **August 2016** - Orientation for faculty mentors and mentor families created, randomly assigned all incoming first years and paired second years who opted into the program with their choice
- **Sept 2016** - Family meetings with all first year DO students in class of 2020 and the second years who opted in
- **Oct 2016** - Feedback surveys sent to mentees and mentors
- **Nov 2016** - First trimester mentor feedback meeting



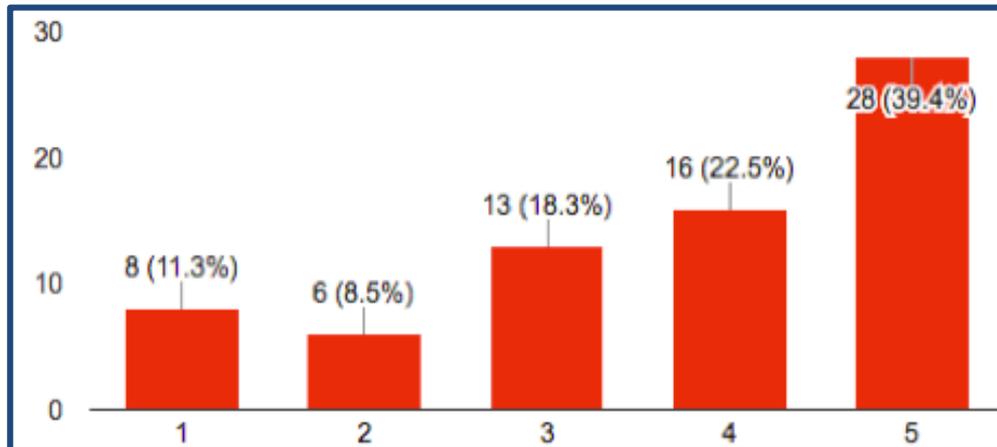
Student Feedback in Pilot Year

1. What topics did you discuss at your meetings? (N=65)

- a. Academics (89.2%), Career (84.6%), Other (7.7%)
- b. Others (N=5): Boards, Life outside of medical school (N=2)

1. How do you feel overall about the program? (N=71)

(1=very dissatisfied, 2=dissatisfied, 3=neutral, 4= satisfied, 5=very satisfied)



Student Feedback in Pilot Year

Positive Feedback	Negative Feedback
Concept of the program and "Knowing someone is there" (N=8)	No communication with Mentor & Difficulty with scheduling meetings (N= 5)
Contacts in field of interest & Shadowing Opportunities (N=3)	Not in Specialty of interest (N=4)
Family Meeting/Community (N=4)	Program needs more structure & guidance for the mentors (N=7)
Connection with a Physician (N=13)	Busy Mentors & would like to meet with them more often (N=5)
Opportunity to talk to someone who went through this process (N=4):	
Answering questions/connecting to PCOM's resources & access to a faculty member (N=7)	
Career & Academic Advice (N=4)	



Student Feedback in Pilot Year



“Every time I walk away from a meeting with my mentor **I get a reminder that it's ok to just love learning medicine** and enjoy that. We talk about it every time (not in the same words) but I need that reminder every once in a while after I've somehow stressed myself too much.”

“I like the outlet of **being able to speak with someone who understands what I am going through** as a medical student and is able to talk about topics from a wide spectrum of interests that have guided my career interests.”

“I like having the connection to a mentor. It's easy to get lost in a sea of 270 students, **this made the school feel smaller.**”

“Connecting with a physician. Since our class sizes are large, it's a good opportunity to speak to physicians/faculty, without having to make a huge effort to approach one before, during, or after class.”

“I like that the program gave us an opportunity to meet with a clinician. **I would've been a little hesitant to set up my own meeting** with a clinician in the field I was interested in.”

“We talked a lot about what I wanted to do with my life and where I saw myself in years to come and it really **helped me solidify my short and long term goals.**”

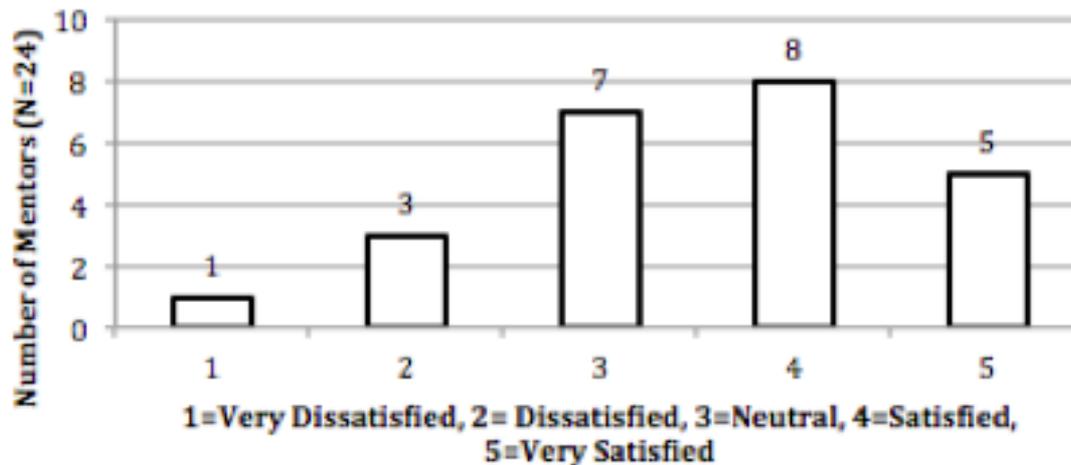
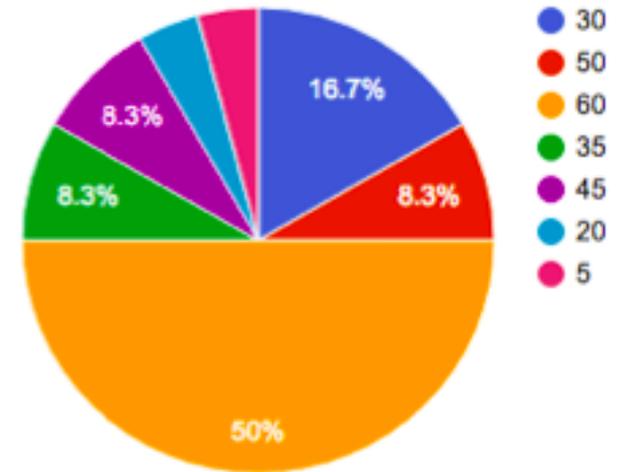


Mentor Feedback in Pilot Year

How do you feel overall about the program? (N=24)

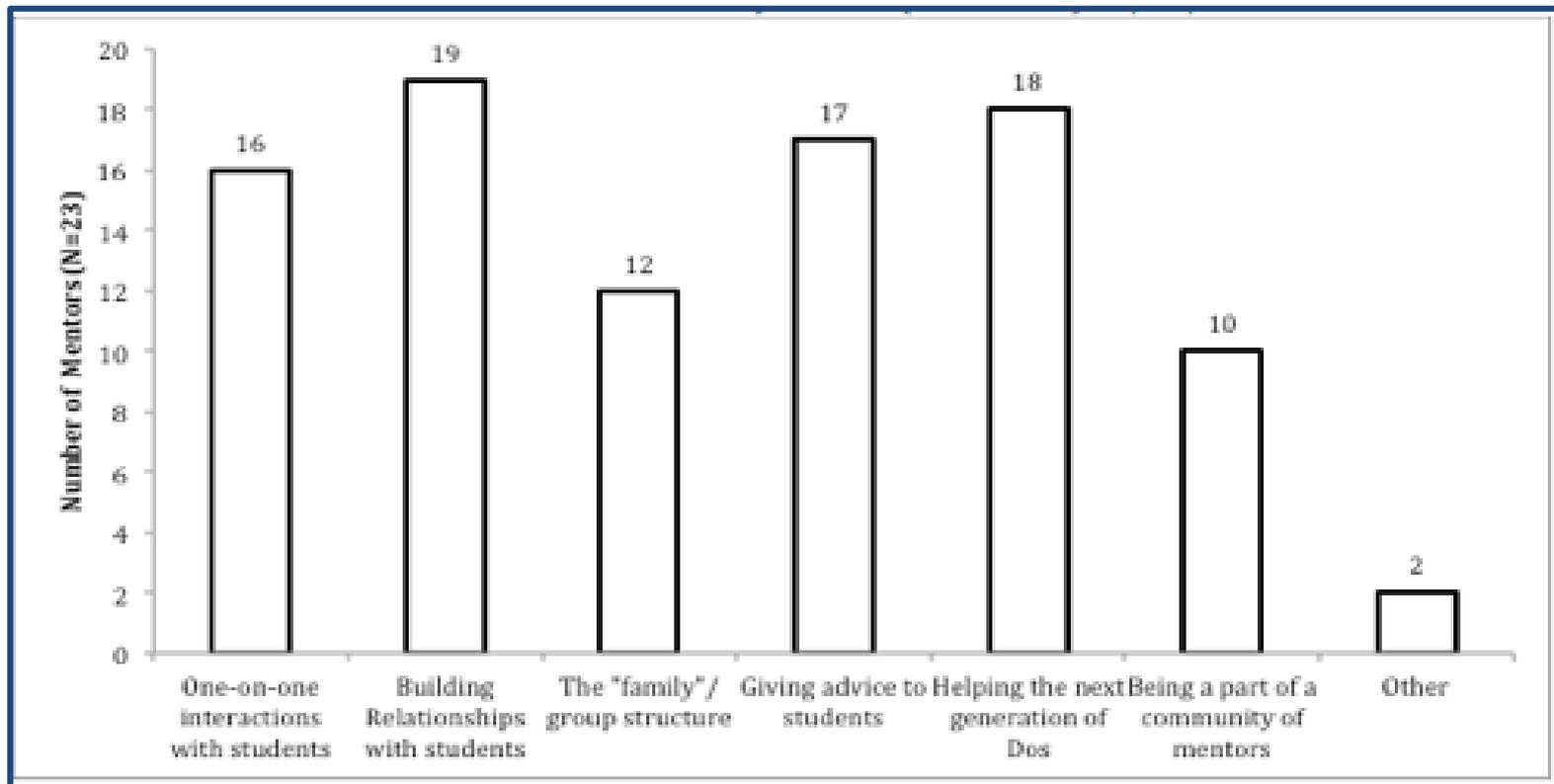
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How long (in minutes) was your group/ family session? (N=24)



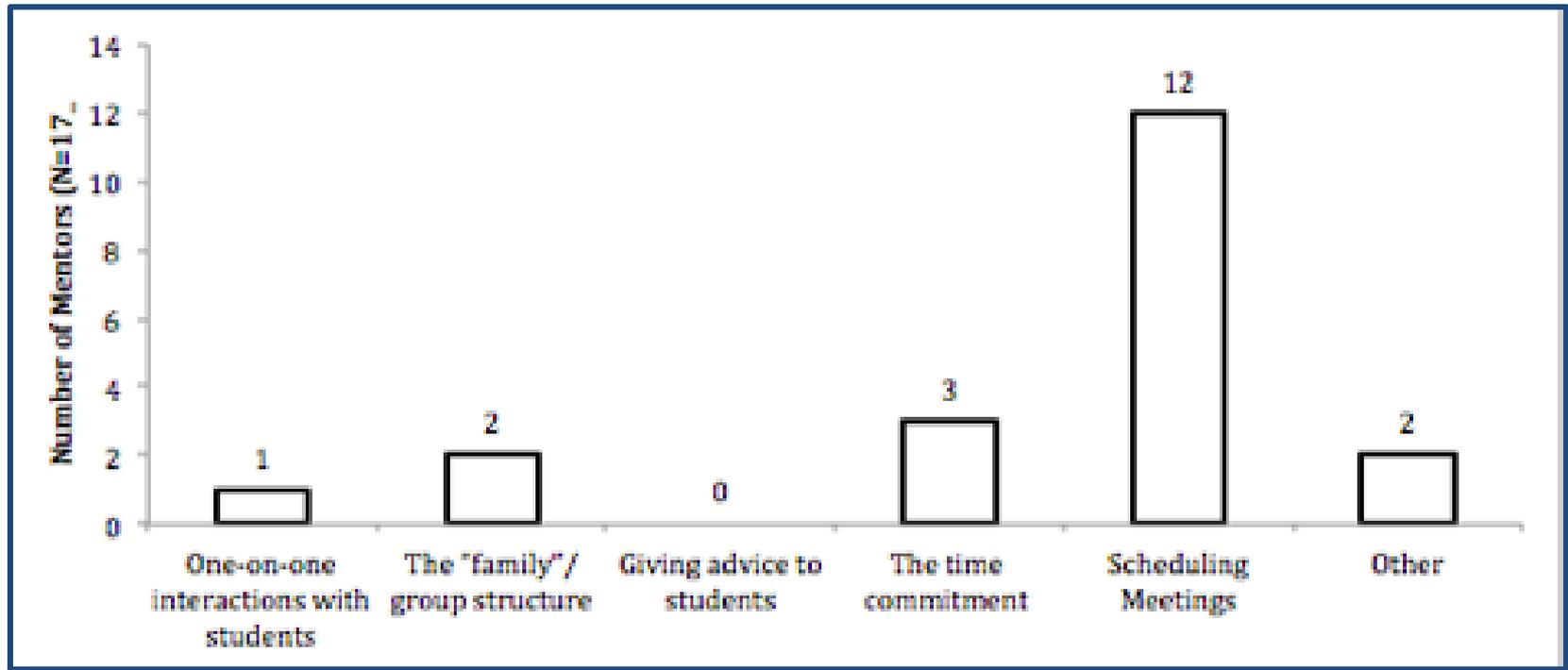
Mentor Feedback in Pilot Year

What do you LIKE about the program? Please select all that apply (N=23)



Mentor Feedback in Pilot Year

What do you DISLIKE about the program? Please select all that apply (N=17)



Mentor Feedback in Year 1: Suggestions for Improving the Program



- “I need **help coordinating** meetings, etc”
- “I think it would be helpful to have a **minimal time built into your schedule.**”
- “If students can visit the Healthcare Centers for their one on one meetings, that would make scheduling time with my students a lot easier. **Distance and time available to mentor can be a challenge.** It's a good program that needs some fine tuning.”
- “We are already strained to capacity with work and most of us already work many extra hours in the evening and on weekends, but we are not allowed to block time to do this. This can **unwittingly contribute to burn out in the mentors, or lack of commitment.**”





Transitioning from Pilot to Year 2



- Creation of the Student coordinator position
 - Created a committee within the DO student government with a student chair
 - Rationale: sustainability of the program to be run by an annually selected student so that the program remains student driven
- Summer 2017: Mentor meeting
 - Mentors were educated to mental health services available to students
- Meeting Mentors during Orientation instead of early in first term
- Partnering with Office of Student Affairs
 - Paired with Anatomy tables
- Taken out of the yearly Clinical Faculty Appointment letter
 - All voluntary.
 - Result: 35 mentors → 28 mentors
- Paired some mentors
 - Rationale: for off-campus mentors or those with time constraints, they could work with another mentor so the students would have two people to access





Introducing Mentorship to the Class of 2021



DO Orientation Week Survey for the Class of 2021

“I expect a mentor to be there for us and help guide us through the tough times and decision making as we transition into medical professionals.”

“I look forward to having a contact of someone who has already been through medical school and loves their job. I also feel that it's someone I could go to if for some reason I am having difficulty.”

“Gain insight about what is next to come and gain wisdom about how to best handle what is coming next(what is worth stressing and what is not)”

“Help navigate the system and prepare for what's ahead in the long run. Like, how to get the residency we seek. What they know about different fields.”

“Honestly, I expect to be so consumed in studying that I won't have too much time to actually form a relationship with my clinical mentor.”

Residency and Career mentioned 12 times

Guidance mentioned 14

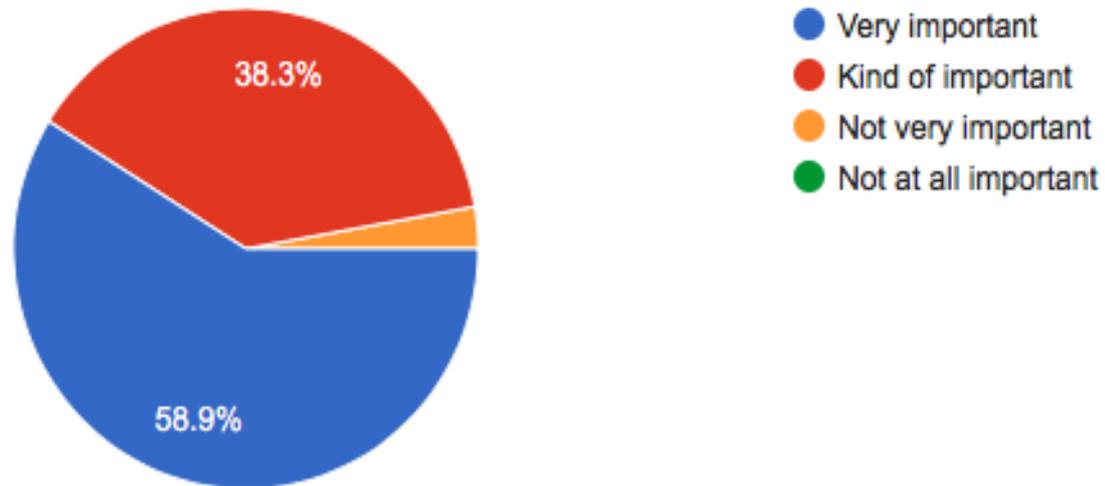


DO Orientation Week Survey for the Class of 2021



How important do you think mentorship is to your success as a medical student?

107 responses

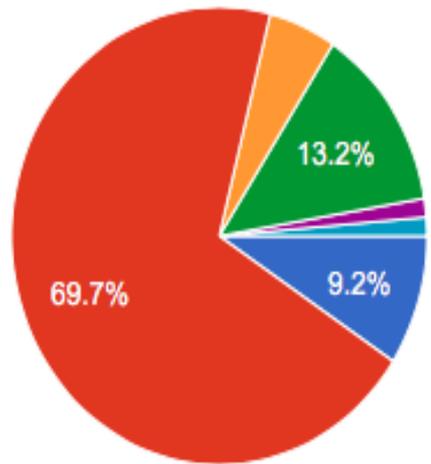


Term 1 Survey of the Class of 2021



In the next term I want to use my mentor for:

76 responses



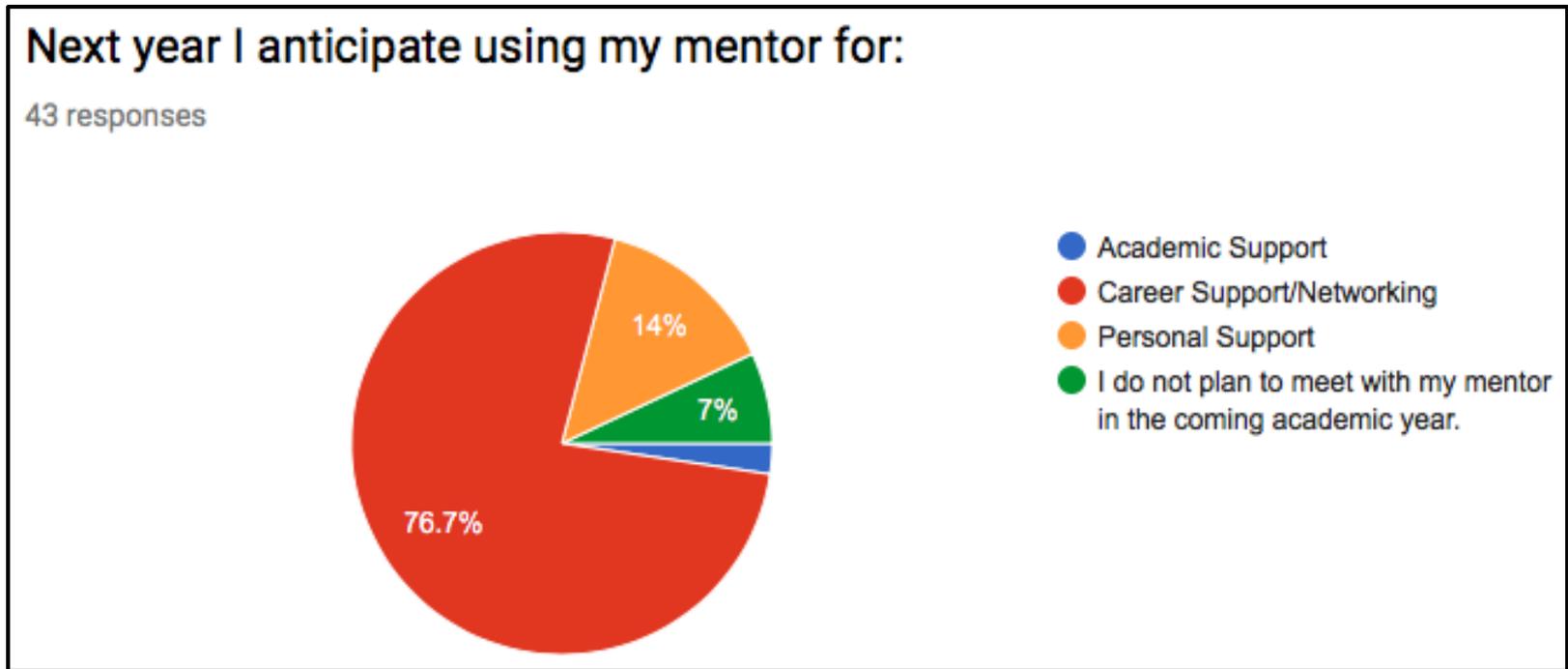
- Academic Support
- Career Support/Networking
- Personal Support
- I do not plan to meet with my mentor in the coming academic year.
- Guidance on preparing for residency and rotations
- I got to know [redacted] somewhat, but wouldn't necessarily say I would go to him for academic support. He was a...



Year 2 Student Feedback



- OMS1 vs OMS2...not that different



Faculty Perspective

Opportunities

Fosters relationships
Give back
Break from the RVU
pressure
Institutional Awareness
Broadens Our Role
Success
Team building with other
faculty mentors

Challenges

Faculty Time Pressures
Student Needs & Schedules
RVU Pressure
Campus Proximity
Prioritizing Commitments
Out of My Expertise



Lessons Learned (1 of 2)

- Still learning new things
- Uncovering a need and expectation for more career counseling
 - OMS1: want to know what to do between 1st & 2nd year
 - OMS2: order of scheduling rotations, COMLEX & USMLE
 - Both: career and residency advice
- Connecting students and educating faculty regarding support services on campus
 - Result: Increase in the use of campus mental health resources
- Attendance at family meetings decreases as the year progresses



Lessons Learned (2 of 2)



- Logistics: Need for a mentee leader/liaison for each group
 - Help with scheduling & coordinating with physician mentor
- Introducing students to the program during Orientation
 - Result: Enhanced the transition to medical school
- Pairing the families with the Anatomy tables
 - Result: Fostered quick relationships within the families
- By making the program volunteer-only, we lost 5 mentors
- Food helps!



Future Directions

- Interviewed and selected Year 3 Student Coordinator
- Elicit feedback from students and mentors for Year 2
- Address impact of OMS1 and OMS2 interest in residency and career advice
- Discover ways to continue Term 1 momentum into Term 2
- Consider developing a budget for the program
- Create a way to recognize and thank mentors via an annual mentor award



Coating the Next Generation



Thank you



This program would not be possible without the support and hard work of the following individuals:

- Kenneth J. Veit, D.O., MBA, FACOFP—Dean & Provost of PCOM
- Margaret Wilkins, D.O., FACOFP
- Tina Woodruff, EdD, Chief Student Affairs Officer of PCOM
- Ruth Conboy, DNP, LPC, NCC Counselor
- Nicole Dillard, B.S. —Assistant to Provost of PCOM
- Rachel Brown, OMS III
- Kelley Dickson, OMS II
- Michael Marino, OMS II
- Richard Tumminello, OMS III
- Michael Bova, OMS IV



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