



# Because I Understand What You're Going Through: Patient/Family Mentor Program in Adult Patient Population

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## Introduction

The Patient/Family Mentor Program (P/FMP), adopted by the Patient-and Family-Centered Care Advisory Council (PFCCAC) at Penn State Hershey Medical Center, is based on actual patient s' experiences of providing mentorship to others. A PFCCAC Advisor led the project and with support of the PFCCAC developed the Patient/Family Mentor Program.

The program is hallmark of Patient- and Family-Centered Care by:

- Providing support,
- Encouraging participation from family members,
- Empowering patients and families to partner with the medical team.
- Systematically implementing the program hospital-wide.

## Background

Mentors apply through the Penn State Hershey Medical Center's Volunteer program, attend the volunteer orientation, and an additional 2.5 hour training for their roles as Mentors. This Mentor training includes information about the matching process, role playing, troubleshooting difficult situations, and peer to peer support for Mentors. Matching patients and families who have been in similar circumstances with current patients/families is the principle goal of the P/FMP.

### Mentor Responsibilities:

- Listen attentively and empathically, providing emotional support.
- Provide NO medical advice, doctor preferences, etc.
- Encourage patients/families to ask questions and have discussions with their medical team.
- Report any immediate concern to bedside nurse, then Coordinator.
- Provide patient/family with Coordinator's or their contact information.
- Report patient/family visit information to Coordinator.

## Comments from Staff and Patient Family

- Bundled Payment Initiative and Joint Commission standards for certified, Comprehensive Stroke Centers are necessitating increased attention to family readiness for transition of care from acute hospital stay, particularly how we evaluate the emotional response to illness and the ability to support the patient after discharge. During the May 2013 Joint Commission site visit, reviewers were impressed with the role that Chris Ewing, P/FMP Coordinator, fulfills...and recommended Coordinator document in the online medical record. - *Kathy Morrison, MSN, RN, CNRN, SCRN, Stroke Program Manager.*



- The (P/FMP) program allows patients and families to have a constant while many things are changing, i.e. diagnoses, treatment, etc. support may be in the form of rehab recommendations, Hospice, support groups and long term planning. In my role as a Social Worker, the program allows Chris and her team to provide much of the emotional support that I am unable to give (due to time constraints). It is truly a benefit to all parties involved, and we are grateful for the time and efforts put into the program. - *Emily Kraus, MSW*

- Time after time Chris' knowledge became my knowledge, her compassion comforted me and her unselfish support became my emotional lifeline. I am extremely thankful to her and the Medical Center for allowing the Patient Family Mentor Program to impact my life. Our original contact was in October 2012 and follow-up continues today. - *Marilyn Lehman, wife of acute Myasthenia Gravis patient.*



- She gave me a chance to vent! A caring member of the neuro ICU nursing staff directed me to Chris Ewing "just to talk" and talk I did. I never experienced a better listening ear. I learned that Chris' gift of intuition of when to speak and when to listen came from her experiences in a very sad and similar circumstance. We are grateful for all her visits even at the rehabilitation facility and follow-up by phone after discharge from there. - *Lindell Conrad, wife of a severe aneurysm, neurosurgery patient.*

## Outcomes

The effectiveness of the P/FMP is measured partly by the number of mentor matches, number of referrals made by staff, as well as relevant questions on the patient satisfaction survey.

In the last 17 months, there have been seven Patient/Family Mentors and seven more have applied. Approximately 25 to 30 referrals are received per month. About 10 to 12% are mentor matches and 70 to 80% are PFCC matches. Additionally, the P/FMP is expanding into other units and specialties including Palliative Care, Cancer Institute and soon the Trauma Unit.

## Lessons Learned

- Valuable to staff, patients and families
- Starting with an inpatient, pilot group allowed for finalizing details of logistics before branching out to other units and specialties.
- It is imperative to have a system that is used uniformly by all units and specialties for the P/FMP, including recruitment criteria, training, and matching logistics.
- Coordinator position for adult patients is being pursued through grant funds.