

The Health Mentor Program: Year Two (Y2)

Orientation and IPE Small Group Session

[Insert date]

Session A: [insert time]

Session B: [insert time]

Faculty Instructions

Course Goals:

- Students will understand and value the roles and contributions of various members of the interprofessional healthcare team.
- Students will understand the perspective of the patient and value patient-centered care.
- Students will appreciate how a person's health conditions and impairments interact with personal and environmental factors

Objectives:

Students will have the opportunity to reconnect with team members and to prepare for Module 3 (M3) by completing an interactive home safety assessment. Students will gain an understanding of overarching goals for Year Two of the Health Mentor Program.

Agenda – 50 minutes

1. Attendance and Seating
2. Announcement
3. Team and Health Mentor Contact Information – 5 minutes
4. Year 2 Overview Important Dates – 10 minutes
5. Home Safety Assessment/Riskdom – 20 minutes
6. Preparing for Module 3 – 10 minutes
7. Scheduling – 5 minutes

Materials

Students were asked to bring the following to this session:

- Student Small Group Instructions and Important Dates sheet
- Module 3 (M3: Assessing Patient Safety)
- Semester schedule
- Laptop - one per team if possible

Faculty Packets include:

- Faculty/Student room assignments
- Year 2 student team roster
- Attendance sheet – please collect at end of session
- Faculty Instructions/Riskdom Key– one per facilitator
- Team Contact Information sheets (blue sheets) – one per team
- Student Instructions and Important Dates – extra copies
- Module 3 (M3: Assessing Patient Safety) - extra copies

Attendance and Seating

1. Ask students to find and sit with their Health Mentor Team members for this session as they enter the room.
 - a. NOTE: A few teams may have new members. For teams with new members, please ask students to introduce themselves.
2. Circulate the **Attendance Sheet** and ask each student to sign in next to his/her name and to return the attendance sheet to you.

Announcement

1. PT students are AWAY on clinical rotations and are not able to attend today's sessions. They have already attended a separate orientation this Fall and are expected to participate in Module 3 with their teams when they return on [insert date].
2. Please contact your PT member by email immediately after this Orientation session and work with him/her on scheduling your team's home visit date with your Health Mentor.

Team Contact Information/Student Liaison – 5 minutes

1. Distribute one Team Contact Information sheet (blue sheets) to each team and ask students to pass and update their Team Contact Information Sheet. Also, ask each team to identify a new **Student Liaison** for their team on this sheet- the student liaison does not have to be the same student as last year.
2. After this sheet has been completed, teams should update this information on their Team Wiki Site 1.
 - a. Location: [insert location]
3. Please also inform students that *updated* Health Mentor contact information is also now available at the following location:
 - a. [insert location]
4. Finally, please collect the completed **Team Contact Information** blue sheets to return to the HMP staff at the end of the session.

Year 2 (Y2) Overview/Important Dates – 10 minutes

Please review the three main goals of the program and provide a personal description of why you think the HMP “matters” and what you hope students will gain from participation in this program, meeting with their health mentor, and working with team members from other disciplines.

Next, please review the “**Important Dates**” sheet (included in the Faculty and Student Instructions). Ask students to enter these dates into their calendars now since the visits are required parts of the program. Then, provide a brief overview of the two modules for this year (below):

Module 3 (M3) – Assessing Patient Safety

1. Team **schedules home visit** with health mentor, based on health mentor's availability and students' schedule (this meeting is not scheduled by HMP staff).
 - a. If a Health Mentor cannot meet in his or her home, meetings can be held on campus. However, we strongly encourage students to take advantage of this opportunity to make a team home visit, if their mentor agrees. It is the highest rated experience in the Health Mentor Program!!
 - b. If the meeting will take place on Jefferson campus, please see the Room Reservations Protocol on Pulse. **Email request must be sent to Linda Milburn 2-3 weeks in advance to reserve a room.**
 - i. Location: [insert location]
2. Students complete pre-reading:
 - a. A Housing Safety Checklist for Older People
 - b. How to Take a Complete Medication History
3. Teams prepares for and completes a housing safety evaluation and medication assessment with Health Mentor
 - a. Team Assignment: Team Safety Plan on Wiki
 - b. Individual Assignment: Peer/Self Evaluations
 - c. **All assignments are due by [insert date]**

Module 4 (M4) – Self-Management Support and Health Behavior Change

1. Team **schedules visit with health mentor**, based on health mentor's availability and students' schedule (can be in home, on campus, etc)
 - a. NOTE: OT students are off campus for this meeting but are expected to participate in team assignment completion
2. Students complete pre-reading
3. Teams prepares for and completes team interview regarding self-management and health behavior change
 - a. Team Assignment: Self-Management Support Plan on Wiki
 - b. Individual Assignments: reflection paper and completion of TPS
 - c. **All assignments are due by [insert date]**

Home Safety Assessment and Discussion – 20 minutes

Riskdom – 10 minutes

Please demonstrate on your computer how the students can access the Riskdom site.

Next, introduce the purpose of the riskdom\ module:

This cartoon module is a fun and practical way for you to get a preview of a real home safety assessment by clicking on hazards in the cartoon house. It does not matter what your score is – this is meant to serve as a general introduction to what to look for in the home.

Next, ask each student team to work together on their laptops to complete the Riskdom module on Home Safety Assessment. Divide the room into two sections and ask half of the teams to work on the Dining Room and Kitchen and ask the other half to work on the Living Room, Bathroom and Bedroom.

Discussion – 10 minutes

After teams have completed their rooms, bring all of the teams together for a group discussion about home safety assessment. Review some of the safety hazards that they found in each room and feel free to go through each room on the large screen with the group. What did they miss? What were they surprised by? Faculty, please see the Riskdom Answer Key for your reference.

Feel free to also raise personal experiences from your own home visits to share with students about things to look for, unexpected findings, etc. Acknowledge the fact that entering a person's home is extremely personal and students may feel uncomfortable at first. Encourage teams to spend the remaining time of the session to help prepare for this visit and to ask you specific questions about home visits/medication assessments, etc.

Preparing for the Home Visit/Module 3 – 10 minutes

1. Ask teams to now review Module 3. For this Module, teams will conduct a home safety and medication assessment with their Health Mentors and then develop an evidence-based, interprofessional Safety Plan.
2. To prepare for this module, teams may want to:
 - a. Consider potential roles each team member will fill on home visit
 - b. Discuss interview and listening skills that might be helpful on home visit; share any personal experiences with previous home visits
 - c. Outline the team interview/agenda for the home visit
 - d. Develop a plan for completing team assignment
 - e. Discuss strategies to ensure that all members contribute equally to both preparing for the team visit and completing the team assignment
 - f. Bring a copy of the Home and Safety Resources for your Health Mentor just in case he or she needs assistance

Scheduling Module 3 – 5 minutes

Finally, please ask students to also review their course calendars to identify several possible dates to schedule the Module 3 home visit with their Health Mentor, as well as a student team meeting to prepare for and/or to complete team assignment.

1. Unlike last year's meetings, the home visit is *scheduled by the team and the Health Mentor* according to their availability, not by HMP staff. Teams should work together to identify potential dates and times for this home visit.
 - a. NOTE: Teams with PT students should be aware that PT students are not back on campus until [insert date] and visits should be scheduled between [insert date] and [insert date] to include your PT students. Please plan in advance to get a date on the calendar with your health mentor for this visit given the tight time frame.
2. Please ask each team to identify one person who will contact the PT student as well as the Health Mentor to schedule this home visit according to the available team dates. **These visits must be scheduled by [insert date] and assignments are due by [insert date].**
3. If student teams have any trouble scheduling this home visit, [insert contact information] and include Year 2 and team number in the subject box.

Faculty Reminder: Please remember to collect and return the Attendance sheet and the Team Contact Information to [insert name] in [insert room] after the end of Session B.

Thank you for facilitating this session!

The Health Mentor Program: Year Two (Y2)

Orientation and IPE Small Group Session

Date: [insert date]

Session A: [insert date]

Session B: [insert date]

Student Instructions

Course Goals:

- Students will understand and value the roles and contributions of various members of the interprofessional healthcare team.
- Students will understand the perspective of the patient and value patient-centered care.
- Students will appreciate how a person's health conditions and impairments interact with personal and environmental factors.

Preparation: Prior to Orientation, please bring the following materials:

1. Student Instructions and Important Dates sheet
2. Module 3: Assessing Patient Safety
3. Semester Schedule
4. Laptop - one per team if possible

Objectives:

Students will gain an understanding of goals and changes for Year Two of the Health Mentor Program (HMP). Students will have the opportunity to reconnect with team members and prepare for the upcoming Module 3 (M3).

Agenda – 50 minutes

1. Attendance
2. Announcement
3. Team/Health Mentor Contact Information – 5 minutes
4. Year 2 Overview/Important Dates – 10 minutes
5. Home Safety Assessment/Riskdom – 20 minutes
6. Preparing for Module 3 – 10minutes
7. Scheduling Module 5 minutes

Attendance and Seating

1. Find and sit with your Health Mentor Team members
 - a. NOTE: A few teams may have new members. For teams with new members, please introduce yourselves to one another.
2. Sign in on the **Attendance Sheet**

Announcement

1. PT students are AWAY on clinical rotations and are not able to attend today's sessions. They have attended an Orientation in August and are expected to participate in the Module 3 meeting when they return on [insert date].

2. Most OT students will be off campus for the Spring semester, but they are required to help with the team assignments and complete all individual assignments.

Team Contact Information/Student Liaison – 5 minutes

1. Pass and update the **Team Contact Information** Sheets (**blue sheets**). Identify a **Student Liaison** for this year- the student liaison does not have to be the same student as last year. Then return this sheet to your facilitator.
2. Identify one student who will update the Team Contact Information sheet on their team Wiki Site by [insert date].
 - a. Location: [insert location]
3. *Updated* Health Mentor contact information is also now available at the following location:
 - a. [insert location]

Year 2 (Y2) Overview/Important Dates – 10 minutes

Module 3 (M3) – Assessing Patient Safety

1. Team **schedules home visit** with health mentor, based on health mentor's availability and students' schedule (this meeting is not scheduled by HMP staff).
 - a. If a Health Mentor cannot meet in his or her home, meetings can be held on campus. However, we strongly encourage students to take advantage of this opportunity to make a team home visit, if their mentor agrees. It is the highest rated experience in the Health Mentor Program!!
 - b. If the meeting will take place on Jefferson campus, please see the Room Reservations Protocol on Pulse. **Email request must be sent to Linda Milburn 2-3 weeks in advance to reserve a room.**
 - i. Location: [insert location]
2. Complete pre-reading:
 - a. A Housing Safety Checklist for Older People
 - b. How to Take a Complete Medication History
3. Teams will prepare for and complete a housing safety evaluation and medication assessment with Health Mentor
 - a. Team Assignment: Team Safety Plan on Wiki
 - b. Individual Assignment: Peer/Self Evaluations
 - c. **All assignments are due by [insert date]**

Module 4 (M4) – Self-Management Support and Health Behavior Change

1. Team **schedules visit with health mentor**, based on health mentor's availability and students' schedule (can be in home, on campus, etc.)
 - a. NOTE: Some OT students are off campus for this meeting but are expected to participate in team assignment completion
2. Complete pre-reading
3. Teams prepares for and completes team interview regarding self-management and health behavior change
 - a. Team Assignment: Self-Management Support Plan on Wiki
 - b. Individual Assignments: reflection paper and completion of TPS
 - c. **All assignments are due by [insert date]**

Home Safety Assessment and Discussion – 20 minutes

Riskdom – 10 minutes

Your team will be asked to complete evaluation of several rooms on this site.

Discussion – 10 minutes

All of the teams will have a group discussion about home safety assessment. Review some of the safety hazards that you found in each room and your facilitator may go through each room on the large screen with the group.

- What did your team miss?
- What was your team surprised by?

Preparing for the Home Visit/Module 3 – 10 minutes

1. Review Module 3 - For this Module, your team will conduct a home safety and medication assessment with your Health Mentors and develop an evidence-based, interprofessional Safety Plan.
2. To prepare for this module, your team may want to:
 - a. Consider potential roles each team member will fill on home visit
 - b. Discuss interview and listening skills that might be helpful on home visit, share any personal experiences with previous home visits
 - c. Outline the team interview/agenda for the home visit
 - d. Develop a plan for completing team assignment
 - e. Discuss strategies to ensure that all members contribute equally to both preparing for the team visit and completing the team assignment
 - f. Bring a copy of the Home and Safety Resources for your Health Mentor just in case he or she needs assistance

Scheduling Module 3 – 5 minutes

Finally, please review your course calendars to identify several possible dates to schedule the Module 3 home visit with their Health Mentor, as well as dates for a student team meeting to prepare for and/or to complete team assignment.

1. Unlike last year's meetings, the home visit is *scheduled by the team and the Health Mentor* according to their availability, **not by HMP staff**. Your team should work together to identify potential dates and times for this home visit.
 - a. NOTE: Teams with PT students should be aware that PT students are not back on campus until **[insert date]** and visits should be scheduled between **[insert date]** and **[insert date]** to include your PT students. Please plan in advance to get a date on the calendar with your health mentor for this visit given the tight time frame.
2. As a team, identify one person who will contact the PT student (if you have one) as well as your Health Mentor to schedule this home visit according to your available team dates. **These visits must be scheduled by [insert date] and assignments are due by [insert date].**
3. If you have any trouble scheduling this home visit, [insert contact] and include Year 2 and team number in the subject box.

Student Reminder: Please remember to return the Attendance sheet and the completed Team Contact Information to your faculty facilitator.

Year 2 (Y2) Health Mentors Program Important Dates

For Year 2 of the HMP, student teams and Health Mentors will schedule their own visits at a mutually agreeable time, rather than having pre-scheduled meetings. The first visit this fall, Module 3, entails a home visit and should take place in the Mentor's home. The second visit, Module 4, may take place on campus, reserving a room through Jefferson, in a coffee shop or other community location of your choice. Student teams must schedule and conduct these visits within the time frames listed below.

Module 3 (M3): Assessing Patient Safety [insert semester and year]

a. Module 3 Health Mentor Meetings

- i. Schedule and conduct your home visit with your Health Mentor anytime between [insert date]
- ii. Teams with PT students should be aware that PT students are not back on campus until [insert date]. Please plan in advance to schedule your team visit with your health mentor between [insert date] and [insert date] so your PT team member can attend.

b. Module 3 Assignments: All assignments are due by [insert date]

- i. Wiki Team Assignment: Team Safety Plan
- ii. Pulse Individual Assignment: Self/Peer Evaluations

c. Module 3 IPE Small Groups Session: [insert date]

Session details and room assignments will be posted in late October.

- i. Session A: [insert time]
- ii. Session B: [insert time]
- iii. *Online Teams: Teams who are a part of the Online Small Group Discussion format will receive separate instructions via e-mail.

Module 4 (M4): Self Management Support and Health Behavior Change [insert semester and year]

a. Health Mentor Team Visit

- i. Schedule and conduct your Health Mentor visit anytime between [insert date] and [insert date].
- ii. Please consider Spring Breaks when you schedule this visit. Since Spring Breaks are near the Assignment due date and IPE session, we recommend scheduling this visit and completing your assignment as early in your semester as possible:
 1. JSP, JSN, JHP: off [insert date]
 2. JMC: off [insert date]
- iii. EMOT students will be off campus for the entire semester, but they are required to help with the team assignments and complete all individual assignments.

b. Module 4 Assignments: All assignments are due by [insert date]

- i. Wiki Team Assignment: Self-Management Support Plan
- ii. Pulse Individual Assignment: Reflection Paper
- iii. Pulse Individual Assignment: Team Performance Scale

c. Module 4 IPE Small Groups Session: [insert date]

Session details and room assignments will be posted in early March.

- i. Session A: [insert time]
- ii. Session B: [insert time]

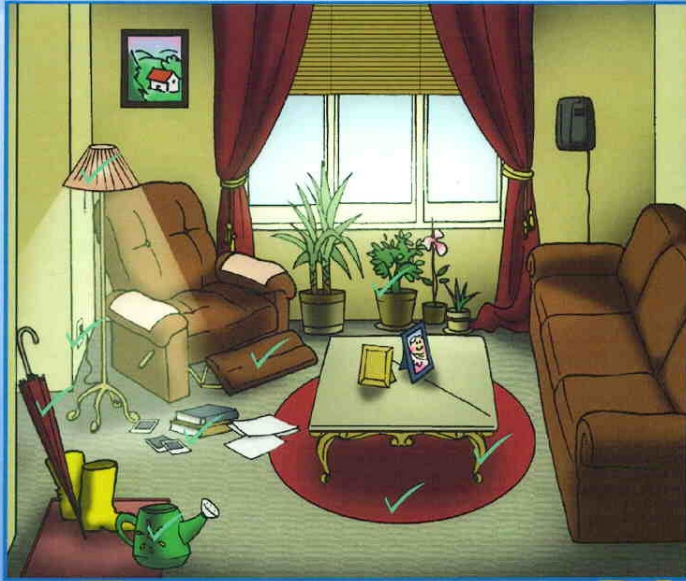
- iii. *Online Teams: Teams who are a part of the Online Small Group Discussion format will receive separate instructions via e-mail

Riskdom Geriatrics Key

Living Room:

1. Rugs should be removed or double-sided taped. Non-slip backing should be recommended.
2. Papers, books, magazines, shoes on the floor: These objects should be always kept off the floor.
3. Lamp intensity: Poor lighting is an important risk factor for falls. Have an electrician put a better lighting system. The patient should get light switches that glow.
4. Inappropriate objects (Pot to water plants): These are indicator of cognitive impairment. To be assessed at the geriatric clinic.
5. Plants near window: Objects in the walking area could be a risk factor for falls. Plants could be in bad shape indicating neglect, lack of interest (depression) or cognitive impairment.
6. Umbrella: Objects in the walking area could cause falls.
7. Inappropriate furniture (table): Furniture could be too low or inappropriate. They could also be in the way (in case the legs are in the way). Advice to replace the furniture with furniture with hand holders that make them easy to stand up.
8. Lamp wire: Coil or tape cords and wires next to the wall so you can't trip over them. If needed, have an electrician put another outlet.
9. Couch with the extension: Furniture could be too low or inappropriate. They could also be in the way (in case legs are in the way). Advice to replace the furniture with furniture with hand holders that make them easy to stand up.

ANSWER



Plants near the window: Objects in the walking area could be a risk factor for falls. Plants could be in bad shape indicating neglect, lack of interest (depression) or cognitive impairment.

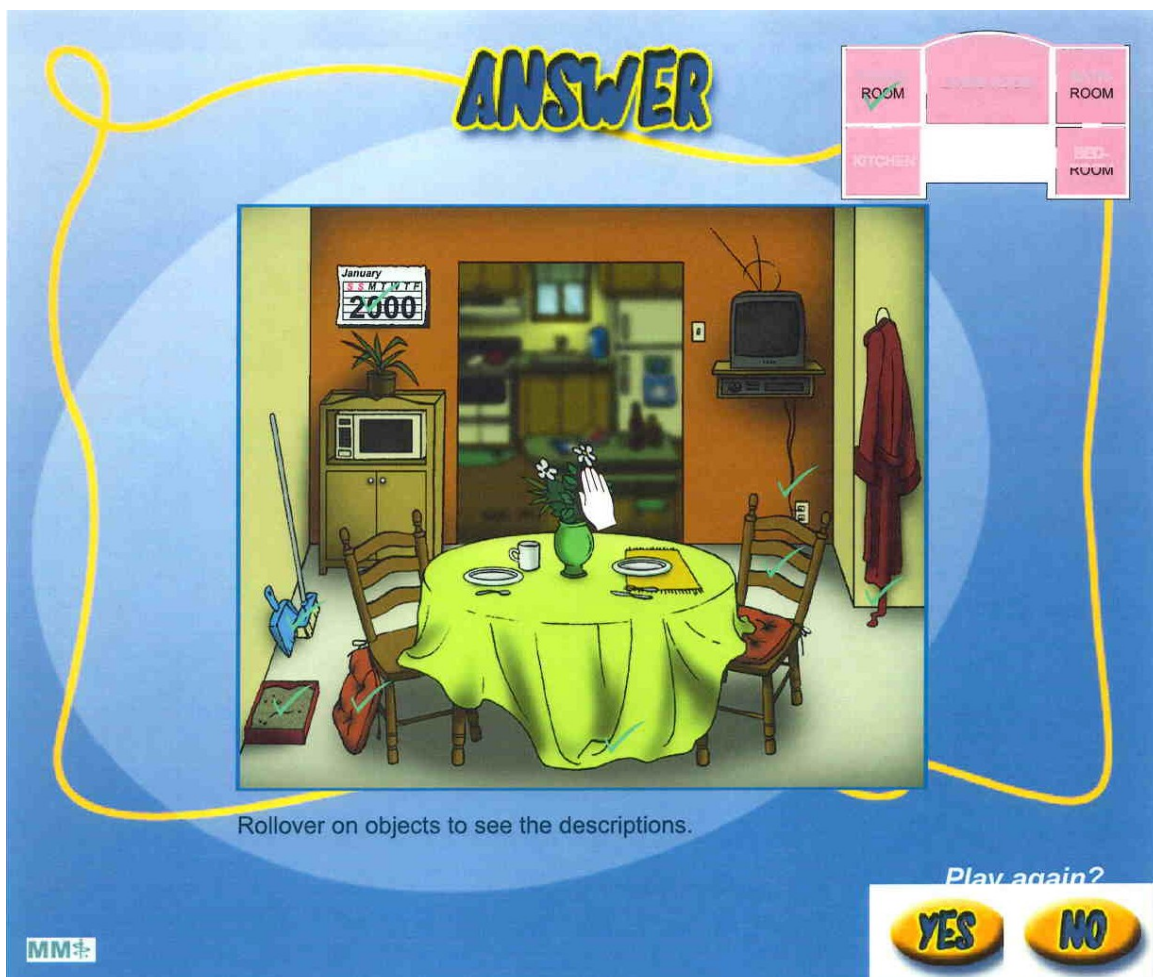
Play again?

YES **NO**

MM

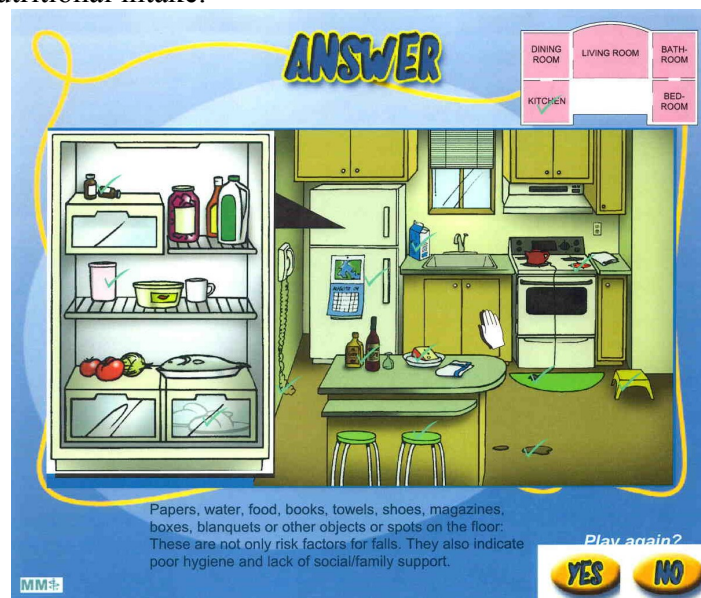
Dining Room:

1. Cleaning objects in the way (broom/dust pan): These are not only risk factors for falls. They also indicate poor hygiene and lack of social/family support.
2. Cat box: Look if the box is clean. Dirty boxes suggest poor functional status, cognitive impairments or neglect.
3. Chair: furniture could be too low or inappropriate. They could also be in the way. Advice to replace the furniture with hand holder that makes them easy to stand up.
4. Objects falling from chair: These are not only risk factors for falls. They also indicate poor hygiene and lack of social/family support.
5. Calendars are essential for patients orientation in time. An old calendar could confuse the patient and is also an indicator of either neglect or cognitive impairment.
6. TV wires: Coil or tape cords and wires next to the wall so you can't trip over them. If needed, have an electrician put in another outlet.
7. Cloth on the wall: It is not only in an unusual place but its cord is a risk factor for falls.
8. Table cloth: Furniture could be too low or inappropriate. They could also be in the way. Advice to replace the furniture with hand holders that make them easy to stand up.



Kitchen:

1. Old cheese: Take rotting food with you and trash them once the home visit is finished.
2. Wine: Alcohol abuse is a frequent finding in old people and a risk factor for falls and injuries. Advise the patient to stop drinking or inform him/her about special counseling at the CLSC.
3. Milk (expired): Always look at the food labels. Confirm if they are not expired. If so, take them with you and trash them once your home visit is finished.
4. The stove is on: Leaving the stove on is a common indicator of cognitive impairment probably due to dementia. Further cognitive assessment should be performed at the geriatric clinic.
5. Coffee maker cord: Coil or tape cords and wires next to the wall so you can't trip over them. If needed, have an electrician put in another outlet.
6. Papers, water, food, books, towels, shoes, magazines, boxes, blankets or other objects or spots on the floor: These are not only risk factors for falls. They also indicate poor hygiene and lack of social/family support.
7. Phone cord: Coil or tape cords and wires next to the wall so you can't trip over them. If needed, have an electrician put in another outlet.
8. Small step: Furniture could be too low or inappropriate. They could also be in the way. Advice to replace the furniture with hand holders that make them easy to stand up.
9. Inappropriate furniture (Stools): Furniture could be too low or inappropriate. They could also be in the way. Advice to replace the furniture with furniture with hand holders that make them easy to stand up.
10. Fridge: Always look at the fridge. You could find expired food or medications.
Inappropriate objects. Signs of poor nutrition intake.
 - a. Insulin: expired medication, especially insulin, is an important risk factor for medical complications of diabetes.
 - b. Unlabeled food: food kept without the label should not be in the fridge. It could have expired a long time ago.
 - c. Inappropriate objects (sleepers): Always look at the fridge. You could find expired food or medications. Inappropriate objects. Signs of poor nutritional intake.



Bathroom:

1. Chemicals on floor: Look at the chemicals. They could be harmful or extremely toxic.
2. Cloth on floor: These are not only risk factors for falls. They also indicate poor hygiene and lack of social/family support.
3. Throw rug on the floor: Rugs should be moved or doubled sided taped. Non-slip backing should be recommended.
4. Soap in the bath: These are not only risk factors for falls. They also indicate poor hygiene and lack of social/family support.
5. Cabinet: The medication cabinet should be an essential part of the home visit.
Always ask for the patient's permission to take a look.
 - a. Expired medication: Look always at the label for the date of expiration, patient's name and potential side effects.
 - b. Medications: Take them with you and bring it to the pharmacy for safe disposal.
 - c. Acetaminophen
6. Papers, water, food, books, towels, shoes, magazines, boxes, blankets or other objects or spots on the floor: These are not only risk factors for falls. They also indicate poor hygiene and lack of social/family support.
7. Water on the floor: These are not only risk factors for falls. They also indicate poor hygiene and lack of social /family support.
8. Toilette too low : It should be higher to prevent falls

ANSWER

DINING ROOM	LIVING ROOM	BATH-ROOM <input checked="" type="checkbox"/>
KITCHEN		BED-ROOM

Rollover on objects to see the descriptions.

Play again?

YES **NO**

MM

Bedroom:

1. Night table: Furniture could be too low or inappropriate. They could also be in the way. Advice to replace the furniture with hand holders that make them easy to stand up.
2. Newspapers: These objects should be always kept off the floor.
3. Paper, water, food, books, towels, shoes, magazines, boxes, blankets or other objects or spots on the floor: these are not only risk factor for falls. They also indicate poor hygiene and lack of social and family support.
4. Object coming falling from the closet: These are not only risk factors for falls. They also indicate poor hygiene and lack of social/family support.
5. Wires: Coil or tape cords and wires next to the wall so you can't trip over them. If needed, have an electrician put in another outlet.
6. Closet door: Furniture could be too low or inappropriate. They could also be in the way. Advice to replace the furniture with hand holders that make them easy to stand up.
7. Bed: Furniture could be too low or inappropriate. They could also be in the way (in case the legs are in the way). Advice to replace the furniture with hand holders that make them easy to stand up.
8. Lamp: Poor lighting is an important risk factor for falls. Have an electrician put a better lighting system. The patient should get light switches that glow.

