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SHARON HOWELL, EMBRACE PEER PARTICIPANT

or individuals with breast cancer, the journey from diagnosis through treatment and into survivorship is often frightening and lonely. A cancer diagnosis affects patients mentally, physically, and emotionally, which is why the Center for Breast Health at Carroll Hospital in Westminster, Md., focuses on caring for the whole person—mind, body, and spirit. Research has shown that patients benefit from emotional support services throughout their journey with cancer.1 With the understanding that one-toone mentoring services have proven effective in improving both quality of life and survival rates, the Center for Breast Health developed a volunteer-run peer mentor program, Embrace Peer, in April 2014.

## **Identifying the Need**

In July 2013 Carroll Hospital held two sessions of breast patient focus groups. The purpose of these focus groups was for breast patients to share how staff could improve the patient experience and services. As part of this process, patients were invited to attend a one-time workgroup session (the focus group) to ensure that the patient's point of view and experiences were not only heard—but also integrated—into the service and improvement initiatives designed to ensure high-quality, patient-centered care.

Nine patients total attended the session along with physicians, the hospital's health navigators, and patient advocates. Questions covered topics ranging from communication gaps and support services to post-treatment plan of care and the role of the healthcare provider. For example, participants were asked: "What service or resource would help them the most during treatment and in survivorship?" Although there many complex answers,

one idea that participants kept returning to was how helpful it is to have someone to talk to throughout the process; specifically, someone who understands because of her own experience with breast cancer. The Embrace Peer program was created to satisfy this need. Key stakeholders included cancer patients, a registered nurse health navigator, the medical director of the Center for Breast Health, and affiliated physicians and providers.

## **Developing the Program**

As part of the planning process and prior to launching the breast cancer patient peer support program, these key stakeholders considered several factors, including budget, staffing, compliance, recruitment, training, patient referral, data collection, and evaluation.

- **Budget.** As the program was not accounted for in the hospital's budget, the decision was made to develop and implement Embrace Peer as a volunteer-based program.
- **Staffing.** The Center for Breast Health coordinator, a registered nurse health navigator, was assigned to lead the program. Responsibilities include managing all aspects of the program and conducting volunteer training. To help with the workload, stakeholders determined that volunteer mentors would track and report on their encounters with mentees.
- **Compliance.** The director of Volunteer Services at Carroll Hospital assessed regulations surrounding HIPAA compliance as it relates to volunteers in a clinical setting. This staff member developed a one-page HIPAA compliance and information sheet that all mentors must sign before participating in the program.



Sharon Howell (L), pictured with her mentor Dawn Weeks (R), is grateful for the friendships and support she has received through the breast cancer peer mentor program.

The goal of the *Embrace Peer* program is to relieve the stress, sense of isolation, and fear often experienced by newly-diagnosed breast cancer patients by connecting them to a companion who can speak to their thoughts, feelings, and concerns from their own experiences with the disease.

• Recruitment. Staff worked together to create a list of prior patients who might be interested in and a good fit for the *Embrace Peer* program, looping the hospital's patient relations representative into the selection process for potential mentors. Stakeholders decided that referrals for mentors could come from several sources, including health navigators at The William E. Kahlert Regional Cancer Center (located on the hospital's campus), Center for Breast Health navigators, and affiliated physicians and providers.

- Training. Stakeholders knew that it was critical for volunteer mentors to receive appropriate training and resources, especially around the topics of active listening and dealing with difficult conversations. This type of training already existed for volunteers at Carroll Hospice, a non-profit affiliate of Carroll Hospital, so breast center staff used the hospice training as a model for the Embrace Peer volunteer training.
- Patient Referral. During patients' initial visit, the breast health
  navigator explains the peer mentor program; patients can elect
  to participate at that time or at any point during their care—
  even after treatment and into survivorship.
- **Data Collection.** Stakeholders realized that documentation of encounters would be instrumental in providing data to further advance the *Embrace Peer* program, as well as to measure patient outcomes. Initially, the group was challenged as to how to best accomplish this in a way that was both efficient and HIPAA-compliant. Fortunately, a prior cancer patient—an instructional designer and *Embrace Peer* program participant—proposed the idea of using Google Docs to document peer encounters. The charting information would then be housed in Google Cloud and the breast health navigator would be the only person who had viewing rights. This process made it very easy for mentors to chart encounters, knowing that the information would only be viewed by the coordinator. It also decreased potential back and forth communication between

- the mentor and the health navigator. Once the process was vetted and approved by the hospital's Information Systems department for HIPAA and other compliance, the free program was put to use and has resulted in detailed reports.
- Evaluation. The data collected on patient encounters with mentors would provide not only the number of encounters, but also the type of encounter, i.e., phone, text, email, or face-to-face. Additionally, the health navigator distributes satisfaction surveys to most patients at the Center for Breast Health—regardless of their participation in the Embrace Peer program. Embrace Peer mentees are surveyed at the end of their active treatment; mentors are surveyed at twice-yearly training, including an opportunity to share reflections about their experiences with the group.

## **Launching** *Embrace Peer*

The first peer mentor training took place for five prospective mentors in April 2014. Out of respect for the volunteers' busy schedules, the format was a two-hour meeting with dinner. Although there was no budget to fund this dinner, the hospital covered both the cost of the dinner and honoraria for the speakers, who were hospital employees. An additional five mentors par-

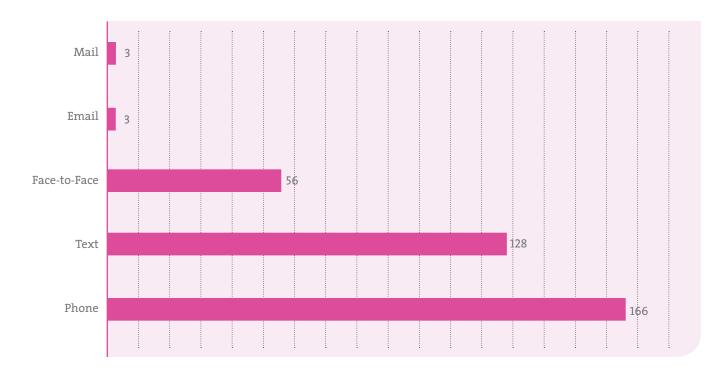
ticipated in a second training offered in October 2014. The training session:

- Introduces the format of the peer mentor program.
- Covers issues related to HIPAA compliance.
- Discusses components of active listening.
- Offers strategies on how to deal with difficult encounters during training and through communication with mentors as needed.
- Provides information on the importance of documenting encounters and training on how they should be documented.
- Discusses the matching of mentor to mentee, such as similar personality and diagnosis, in hopes to better provide a meaningful partnership for all involved.

## **Tracking Progress**

The results of the *Embrace Peer* program have been overwhelmingly positive. Feedback from both mentors and mentees is reviewed monthly by the health navigator. Mentors share reflections and thoughts about their experience at the biannual training meetings; the number of encounters, as well as the types of encounters, are documented by mentors (Figure 1, below). Mentees are surveyed on several areas, including overall rating of mentor,





stress reduction during care, timeliness of contact, likelihood of recommending the *Embrace Peer* program to others, and interest in becoming a mentor. Space is provided on the electronic survey to submit any additional comments about the individual's experience with the program.

While it is understood that some encounters may not be documented, participants are reminded regularly to document and about the importance of having good data. Any feedback or concerns that arise are addressed immediately by the breast health navigator.

### **Patient Benefits**

The goal of the *Embrace Peer* program is to relieve the stress, sense of isolation, and fear often experienced by newly-diagnosed breast cancer patients by connecting them to a companion who can speak to their thoughts, feelings, and concerns from their own experiences with the disease. All patients who have participated in *Embrace Peer* (100 percent) have reported that their mentor has decreased stress, as well indicating their satisfaction with their mentor. More than one-third (35 percent) of participants report developing a long-term relationship with their mentor, signifying that the *Embrace Peer* program has long-term benefits.

In addition to these documented data from our newly-diagnosed mentees showing how they are benefiting from the program, our volunteers are likely benefiting too. Research has shown that health benefits of volunteering include improved mental health and functioning, increased physical activity, reduced stress, and improved emotional and physical health.<sup>2,3</sup>

A core group of mentors have been engaged in other survivorship programs and services at the hospital. These mentors have been volunteering their time and talents to help create and raise funds for a patient assistance program. To facilitate continued healing and thriving through survivorship, a new assistance program, called the *Embrace Fund*, helps to defray the cost of various services provided to patients following cancer treatment.

Made possible by donations from patients and the community, the fund's goal is to positively impact all cancer survivors' overall health and well-being and to give them needed tools after treatment.

## **Embrace Peer Today**

As of October 2016, there are 16 active mentors—14 work full time, one works part time, and one is retired. Five of the 16 mentors have been with the *Embrace Peer* program from its inception. Since April 2014, 21 mentors have been trained, and 53 mentees have received support through September 2016. Mentors can have up to five mentees at a time.

More than 350 encounters have happened between new breast cancer patients and their peer mentors. Mentors are encouraged to attend training biannually for ongoing support and education. This training has evolved to include various topics. For example, a breast surgeon presents on any new therapies and services, and is available to answer clinical questions. The format still includes dinner, which creates a more relaxed atmosphere and a way for the new mentors to socialize with those already active in the program. The trainings are now scheduled for 2.5 hours, which includes mentor-to-mentor support time.

# Table 1. Interview Questions at the Initial Mentor Interview for the Embrace Peer Program

- How did you hear about the peer mentor program?
- If you could describe yourself in three words what would they be?
- Why do you want to be a peer mentor?
- Are you comfortable with religious beliefs different from your own?
- Are you comfortable meeting people where they are at? Explain how you do that in a relationship.
- Are you prepared for the time commitment mentoring will involve?
- Are you comfortable with a charting system on the computer?



Embrace Peer participants Janet Sanders (L) and Alyssa Harrington (R) have become great friends through the one-to-one support program.

As an added benefit, *Embrace Peer* has become its own support network for mentors and mentees alike.

After trial and error, the breast health navigator spearheaded and implemented an interview process for prospective mentors, which was adapted from interviews for our hospice affiliate's volunteer program (see Table 1, left).

But perhaps the best way to share the powerful impact that the *Embrace Peer* program can have on participants is to hear it from a patient. Participant Sharon Howell shares her story:

"I walked into Panera Bread, longing for a place to quiet my mind and relax emotions that seemed to hold me in their grip. As I sat down, the young woman who was my mentor from the Center for Breast Health greeted me with a smile and a gentle hug, which somehow made me want to collapse into her arms. As she introduced herself, a tear streamed down my face. She took my hand, and I knew I was with someone who understood without me saying a word. She displayed strength and empathy with a sincerity that helped me relax.

You see, my sister Joyce died from breast cancer on October 1, 2015, and I completed my last round of radiation on October 2, 2015. I struggled to celebrate my victory of being cancer free while mourning the loss of Joyce. As we began to talk she listened intently to the babble that seemed to flow like a small stream—a steady flow. Over the next few weeks my mentor and I met regularly...and eventually became very good friends.

The impact of having someone to share and walk this journey

with me as a sister has been life altering. I volunteer to be a part of the mentor program because I wanted to have an opportunity to hold another sister's hand and walk with her with understanding and compassion. The *Embrace Peer* program at the Center for Breast Health has been a saving grace for me through a very difficult time. I've met some of the most caring and loving women who are always there when needed...and I wanted to be a part of that."

Dona Hobart, MD, is the medical director of the Center for Breast Health at Carroll Hospital, Westminster, Md. Marcia McMullin, RN, BSN, MA, is the coordinator at the Center for Breast Health, where she also serves as a breast health navigator. She is also a retreat facilitator at Bon Secours Retreat and Conference Center in Marriottsville, Md.

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