

**Background:**

In Spring 2015, two first year students recognized a lack of formal mentorship at the Tulane University School of Medicine. After performing a needs assessment, researching other schools' mentorship programs and getting the support of the faculty and Deans, the students created the Tulane Learning Communities in August 2015.

**Program Description:**

The TLC program was developed by two first-year students and continues to be completely student-run. Currently the program is led by a leadership board of second-year students, comprised of two head leaders; a treasurer; a systems manager; and a research team. Incoming first-year students complete a survey based on their interests in medicine and hobbies and are matched with a faculty mentor based on these interests. Each group is comprised of one faculty mentor; six first-year students; six second-year students and three to four upperclassmen with one of the second-year students serving as the group leader. Students remain a part of the same group for the duration of their medical education. Six groups make up a community, each with a community director who is also available for guidance and resources, in addition to the faculty mentor.

**Program Evaluation:**

The TLC program is evaluated through surveys sent to the MS1s, student-leaders, and mentors at the beginning, middle, and end of each academic year. Surveys ask about attitudes towards mentorship and the TLC program using a 5-point Likert scale. Surveys also include an open-response section for comments or concerns.

**Results:**

The program was evaluated halfway through its inaugural year in January 2016 and again in August 2016.

*First-year Students:*

In the mid-year evaluation administered in January 2016, 124 of the 185 first-years (RR=67%) believed that mentorship was important in medical school (mean=4.45, SD=0.76). When re-surveyed in August 2016 (n=68, RR=37%), after the completion of their first year, students' feelings towards the importance of mentorship had increased in a statistically significant manner (mean=4.68, SD=0.50, p=0.00821).

In January 2016, the first-years were neutral about the benefits they had received from the program (mean=2.98, SD=1.28). When re-surveyed in August 2016, feelings about the benefits of the program remained largely unchanged (mean=3.18, SD=1.07, p=0.126). They did seem satisfied with the mentorship they had received from both their faculty mentors (mean=3.36, SD=1.21) and the upperclassmen (mean=3.56, SD=1.14) in their TLC group.

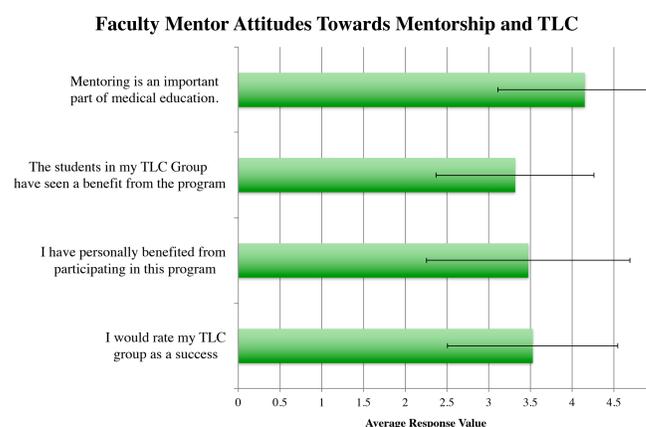


Figure 1. Faculty Mentor Attitudes Toward Mentorship and TLC Program.

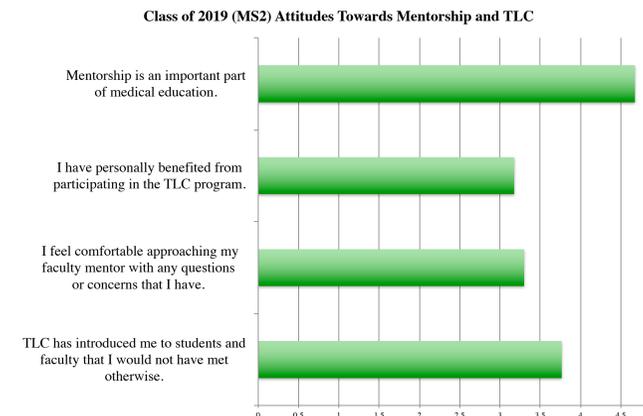


Figure 2. MS2 Students' Attitudes Toward Mentorship and the TLC Program.

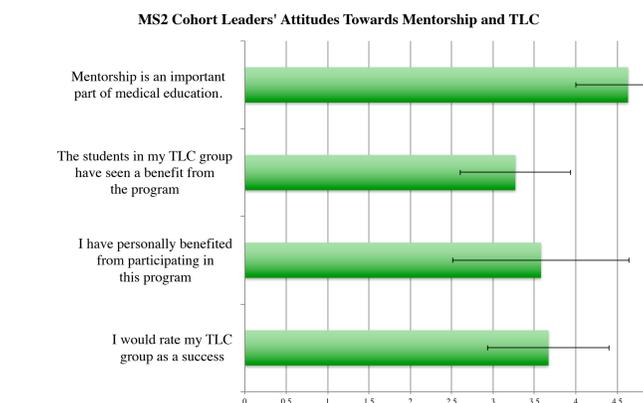


Figure 3. MS2 Cohort Leaders' Attitudes Toward Mentorship and the TLC Program.

*Faculty:*

Of the 36 faculty mentors, 19 (53%) completed the survey. Faculty mentors believed that mentorship in medical school is important (mean=4.15, SD=1.04). The faculty mentors felt they and their students had somewhat benefited from the program (mean=3.47, SD=1.22; mean=3.32, SD=0.95, respectively).

*Second-year Cohort Leaders:*

Of the 36 second-year leaders, 25 (69%) responded to the survey. The second-year leaders felt that mentorship is important in medical school (mean=4.62, SD=0.63). The second-year leaders felt that they and the first-year students benefited from the program somewhat (mean=3.58, SD=1.06; mean=3.27, SD=0.73, respectively).

**Discussion**

Evaluations after the first semester found that the mentors and student-leaders felt they had moderately benefited from the program. On average, MS1s were neutral about the personal benefits of the program, though experiences varied greatly based on mentor and student leader. It is particularly promising that first-year attitudes about mentorship improved between the mid-year and end-of-year surveys, which may be due to positive mentorship experiences through the TLC program. This year, mentors and student-leaders were provided with a more structured outline of their roles. The TLC program has also been integrated into the first-year orientation and curriculum to facilitate group dynamics and improve turnout at events. Future studies will look at the efficacy of and satisfaction with the TLC program, the effect on test scores, and the effects on career trajectories of medical students.

**Conclusion:**

Since its inception in August 2015, the TLC program appears to moderately benefit the students and faculty. Early survey results from the TLC program's first year suggest that a student-run and student-led learning community can be effective in providing mentorship and networking opportunities to medical students. Areas of improvement have been identified and addressed for the upcoming academic year by expanding student-leader and mentor support and integrating TLC into the curriculum.