

Heartful Visits: a volunteering program to enhance student interpersonal skills and reduce patient isolation through non-clinical encounters

Cœurs en visite : un programme de bénévolat visant à renforcer les compétences interpersonnelles des étudiants et à réduire l'isolement des patients grâce à des rencontres non cliniques

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Implication Statement

To enhance students' interpersonal skills and reduce hospitalized patients' feeling of isolation, we developed Heartful Visits, an on-campus healthcare volunteer coordination hub that organizes non-clinical visits focused on conversations, companionship, and emotional support. In this paper, we will detail its design, implementation, and early outcomes to provide a replicable methodology and to inspire medical students at other universities to adapt and expand upon this model. Through this dual focus on student education and patient care, the program has the potential to improve student empathy and communication skills, along with reducing patient isolation and improving psychosocial wellbeing.

Énoncé des implications de la recherche

Pour améliorer les compétences interpersonnelles des étudiants et réduire le sentiment d'isolement des patients hospitalisés, nous avons développé *Cœurs en visite*, un programme de coordination du bénévolat en milieu de santé au sein du campus, qui organise des visites non cliniques centrées sur la conversation, la compagnie et le soutien émotionnel. Dans cet article, nous présentons la conception, la mise en œuvre et les premiers résultats du programme afin de proposer une méthodologie reproductible et d'inspirer des étudiants en médecine d'autres universités à adapter et développer ce modèle. Grâce à ce double objectif, formation des étudiants et soutien aux patients, le programme a le potentiel d'améliorer l'empathie et les compétences en communication des étudiants, tout en réduisant l'isolement des patients et en renforçant leur bien-être psychosocial.

Introduction

Cultivating interpersonal skills such as empathy, active listening, and relational sensitivity remains challenging in competency-based medical education.¹⁻³ Moreover, hospitalization and limited social interactions contribute to increased depression and anxiety, which impairs patients' coping abilities and reduces their quality of life (QoL).⁴ *Heartful Visits*, a student-led program launched at Université de Montréal, addresses these parallel needs. A

Heartful visit is a non-clinical encounter between volunteer students and hospitalized patients or long-term care residents that provides a warm presence and empathetic listening, adapted to patient preference and ranging from conversation to shared activities like board games or artwork. This concept mitigates patient isolation while offering students real-world experiences to develop interpersonal skills.

Innovation

Heartful Visits facilitates student healthcare volunteering through an on-campus student-led coordination hub. Seven medical students led awareness campaigns, managed registrations, and coordinated volunteer placements in collaboration with the volunteer department heads of four Quebec regional networks. Each hospital and long-term care group has a volunteer office representative who reports to the regional volunteer department head. These heads coordinated volunteering resources across networks (multiple hospitals and long-term care homes) and served as primary liaisons. Eligible participants included medical students in preclinical years and students from other faculties. Before their interactions, students completed mandatory training in caring communication, boundary setting, and patient safety. Volunteers dedicated three hours weekly for three months, meeting at least two patients per week. These encounters were longitudinal in long-term care homes or one-time visits based on patient preferences and ward constraints. Patient participation was voluntary, with verbal consent obtained by the facility's volunteer representatives. Patient feedback was solicited informally.

Evaluation

Heartful Visits expanded to 63 healthcare institutions through partnerships with four Quebec regional networks and inspired the creation of units at McGill University and Collège Jean-de-Brébeuf. Ninety-six students started volunteering, while 28 completed three months of weekly visits by April 2025. Of these, 13 (46%) completed an online survey evaluating the registration process and self-reported growth in various domains (i.e. empathy, communication, leadership and teamwork). For onboarding, 92% found registration "easy" or "very easy," and 84% found their integration into the chosen center simple. Regarding empathy, 77% reported the experience helped them "much" or "very much" in building trust with vulnerable patients and understanding their perspectives, while 69% felt it improved their ability to adapt to patients' emotional needs. For communication, 85% felt they improved active-listening skills and 77% felt more comfortable engaging with individuals from diverse backgrounds. The leadership and teamwork outcomes showed inconsistent results: 54% felt they had opportunities to take initiative, while only 38% considered that their collaborative skills improved (Table 1).

Next steps and conclusion

These preliminary findings show that following three months volunteering, students self-report improved empathy and communication skills, with moderate effects on leadership and teamwork, as expected in a one-to-one patient visit. A key limitation is that patient feedback was informal, and satisfaction was not surveyed. Replicating our model, through a student-led committee and health network partnerships, may improve patients' QoL and students' non-technical skills. Future studies should include larger samples and evaluate patient outcomes.

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Table 1. Heartful Visits' reach and preliminary impact assessment

| Heartful Visits' reach | | | | | |
|--|----------------|-----------|----------------------------|----------|-----------|
| Healthcare collaborators | | | | | |
| Hospitals | | | | | 10 |
| Residential and long-term care centers | | | | | 51 |
| Rehabilitation centers | | | | | 2 |
| Local units established | | | | | |
| University of Montreal | | | | | - |
| McGill University | | | | | - |
| Brebeuf College | | | | | - |
| Student-volunteers | | | | | |
| Total registered student-volunteers | | | | | 96 |
| Completed 3-months of volunteering | | | | | 28 |
| Survey responders | | | | | 13 |
| Preliminary impact assessment | | | | | |
| Ease of the registration process | | | | | |
| Survey prompts | Very difficult | Difficult | Neither difficult nor easy | Easy | Very easy |
| The registration process for Heartful Visits was... | | | 1 (8%) | 6 (46%) | 6 (46%) |
| The integration process in my volunteering setting was... | | 1 (8%) | 1 (8%) | 6 (46%) | 5 (38%) |
| Empathy | | | | | |
| | Not at all | A little | Moderately | Much | Very much |
| Do you think you have developed a better ability to build trust with vulnerable individuals? | | 1 (8%) | 2 (15%) | 7 (54%) | 3 (23%) |
| To what extent has your volunteering helped you put yourself in the patients' shoes and better understand their experiences? | | 1 (8%) | 2 (15%) | 8 (62%) | 2 (15%) |
| Has your volunteering experience helped you adapt your attitude and words based on patients' emotional needs? | 1 (8%) | 1 (8%) | 2 (15%) | 4 (31%) | 5 (38%) |
| Communication | | | | | |
| To what extent has your volunteering experience improved your ability to actively listen to others? | 1 (8%) | | 1 (8%) | 10 (77%) | 1 (8%) |
| Do you think you have become more comfortable interacting with people whose life paths are very different from your own? | | | 3 (23%) | 7 (54%) | 3 (23%) |
| Leadership and teamwork | | | | | |
| To what extent has your volunteering experience helped you improve your ability to work in a team with other volunteers and/or healthcare professionals? | 3 (23%) | 4 (31%) | 1 (8%) | 4 (31%) | 1 (8%) |
| Have you had the opportunity to take initiative in your role as a volunteer? | | 4 (31%) | 2 (15%) | 5 (38%) | 2 (15%) |