

Bridging the Gaps to Care: Medical Students as Patient Navigators

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Introduction

- Patients with limited access to care and experiencing socioeconomic disadvantage, underinsurance or lack of insurance, transportation instability, housing insecurity, language barriers, or low health literacy face substantial structural obstacles in navigating the healthcare system. These barriers often result in delayed care, missed appointments, fragmented care transitions, increased emergency department utilization, and poorer health outcomes (Lee et al., 2023).
- Patient navigation programs have demonstrated improvements in care engagement, preventive service uptake, and healthcare utilization across vulnerable populations (Teggart et al., 2023). Navigation interventions tailored to individuals experiencing homelessness have shown promise in improving screening uptake and continuity of care (Baggett et al., 2024).
- The Patient Navigation Collaborative (PNC) responds to this gap by creating a sustainable, community-based patient accompaniment model embedded within a student-run clinic infrastructure. PNC's purpose is to reduce structural barriers to healthcare access for medically and socially complex patients while training future physicians in equity-centered, systems-informed care. The program's primary goal is to improve care continuity, social aid, and patient confidence in navigating the healthcare system through longitudinal accompaniment delivered by trained medical student navigators under physician supervision.

Intervention

Mission: Patient Navigation Collective (PNC) is a community-based, student-run, patient-centered, low-barrier program which seeks to provide health system navigation through longitudinal patient accompaniment.

Approach:

- PNC serves patients who may be experiencing homelessness, unstable housing, lack of insurance, or chronic disease with fragmented care.
- PNC's novel contribution lies in embedding structured, longitudinal patient navigation into undergraduate medical education within a student-run clinic model. While many medical students volunteer episodically in community clinics, few programs provide formalized, competency-based training in systems navigation and social determinant intervention.
- When enrolling patients, we complete an intake questionnaire and consent form. Each enrolled patient is assigned to a "pod" consisting of 2-4 medical students supervised by a designated pod leader, a specially trained medical student. The pod leader maintains consistent contact with the patient and coordinates task delegation.
- Members will meet with physician advisors bimonthly for clinical direction and escalation of complex medical or psychosocial concerns.
- An executive board of six students (two co-directors, case coordinator, training coordinator, logistics lead, and secretary) meets 2-3 times per month to oversee operations, quality improvement, and work toward establishing a sustainable organization to pass onto the next incoming class of medical students.

REFERENCES:

Baggett, T. P., Sporn, N., Barbosa Teixeira, J., Rodriguez, E. C., Anandakagan, N., Critchley, N., & Rigotti, N. A. (2024). Patient navigation for lung cancer screening at a health care for the homeless program: a randomized clinical trial. *JAMA Internal medicine*, 184(8), 892-902.

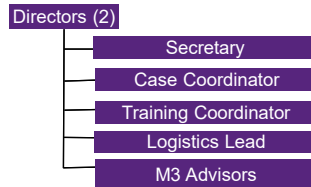
Lee, J. J., Jagasia, E., & Wilson, P. R. (2023). Addressing health disparities of individuals experiencing homelessness in the U.S. with community institutional partnerships: An integrative review. *Journal of advanced nursing*, 79(5), 1678-1690.

Teggart, K., Neill-Sztramko, S. E., Nadarajah, A., Wang, A., Moore, C., Carter, N., Adams, J., Jain, K., Petrie, P., Alshaiqahmed, A., Yugendranan, S., & Ganann, R. (2023). Effectiveness of system navigation programs linking primary care with community-based health and social services: a systematic review. *BMC health services research*, 23(1), 450.

Program Design

Phase 1: Board of Directors, Scope of Practice & Compliance Communication

Board of Directors

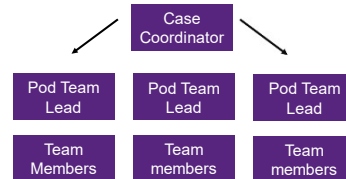


Scope of Practice

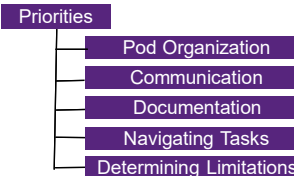
- Health System Navigation & Service Coordination**
 - Scheduling and insurance assistance
 - Program enrollment & continuity of
- Clinic Support**
 - Hospital/Clinic navigation
 - Emotional support and advocacy
- Community Resource Linkage**
 - Community food, housing, hygiene
 - ID/mail/phone, health information
 - Employment support

Phase 2: Pod Structure, Pilot Launch & Sustainability

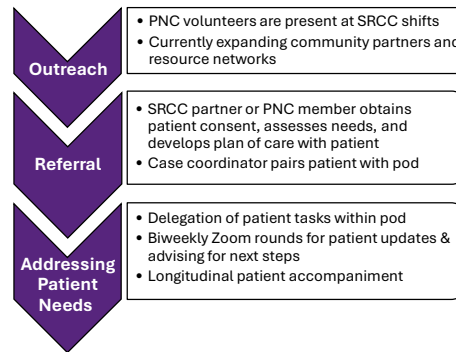
Pod Structure



2025-2026 Launch



Phase 3: Workflow & Communication



Next Steps
Creating Standard Operation Procedures for all volunteer tasks
Onboard the next executive board for the 2026-2027 academic year
Strengthen community partnerships
Expand funding and research
Consolidate resource and training information for easier access
Improve communication to pod leaders and among volunteers

Discussion

SUCCESSES

- Experiential learning** in patient navigation has improved patients' access to care and has allowed for the design of an innovative program that can be shaped to meet the unique needs of patients in various settings
- Pattern recognition** of patient needs through case discussion and for the continual development of a "guidebook" of **standardized protocols** for approaching common scenarios
- Student and faculty collaboration** during Zoom Rounds has allowed volunteers to provide insight about patient needs, create care plans, and explore available resources
- Working with LSU Compliance and IT** to implement a HIPAA-compliant phone system and secure means of data collection and storage

CHALLENGES

- Communication** both with patients and within our team as we coordinate care amidst the barriers patients face
- Refining our scope of practice** to accurately reflect students' abilities, capacities, and the practical and professional limitations
- Equipping students with appropriate training** as patient navigators that builds confidence facing complex cases and navigating local resources
- Developing a standardized workflow** that maintains flexibility while accommodating patients' needs

LESSONS LEARNED

- Based on challenges with follow-up encounters, we have learned the **importance of clear communication** with patients about next steps and creating a practical and achievable care plan
- Our **scope of practice requires refinement** so students have clear direction and training to effectively assist patients
- PNC is **mutually beneficial experience for students and patients alike** and has great potential for a larger-scale impact on the local unsheltered population's access to healthcare while improving both students' health system literacy and patient education

Statistics

- Current pods: **12**
 - Over **40 medical students** trained for patient navigation
- Current patients: **24**
 - 69 patients assisted** during 2025-2026 academic year
- 14 Executive **board meetings** & 10+ **Zoom rounds**
- Hours of service and development:
 - 488 hours** of service logged by executive board
 - 550+ hours** of service from all PNC volunteers
- Most encountered patient needs:
 - Insurance**: assistance applying for Medicaid
 - Reliable transportation**: scheduling rides for appointments, especially when not covered by insurance
 - Communication**: access to phone and internet/email
 - Vital document recovery**: obtaining state identification, birth certificate, social security card

