Models for Integrating Peers into HIV Care and Treatment

Options and structures designed to keep HIV+ clients engaged in health care





Boston University School of Public Health



Objectives

- By the end of this seminar, participants will be able to:
- 1. Describe the Peer Education and Training Sites (PETS) Initiative
- 2. Describe 3 programs that have integrated peers into the HIV care team
 - Identify ways to structure a peer program within your organization
 - Describe roles and responsibilities for peers
 - Describe training and supervision for peers
 - Learn how peers can impact clients' lives

Agenda

- Introduction & Background:
 BUSPH/PEER Center: Serena Rajabiun
- 3 peer programs:
 - Harlem Hospital: Paul Colson
 - Kansas City Free Health Clinic: Sally Neville
 - WORLD: Shalini Eddens & Anna Jackson
- Questions & Discussion
- Evaluation

Speakers



PEER Center/BUSPH- Serena Rajabiun



Harlem Hospital- Paul Colson



Kansas City Free Health Clinic -Sally Neville



WORLD- Shalini Eddens & Anna Jackson

Who is a Peer ?

- Persons living with HIV from the community
- Not working as licensed clinical professionals
- Share key characteristics with target population
 - ✓ Community membership, gender, race/ethnicity
 - ✓ Disease status or risk factors
 - ✓ Salient experiences, e.g. former drug use, sex work, incarceration
- Use shared characteristics/experiences to act effectively as:
 - ✓ Trusted educator
 - ✓ Mentor for adopting health behavior
 - ✓ Role model
 - ✓ Empathic source of social and emotional support

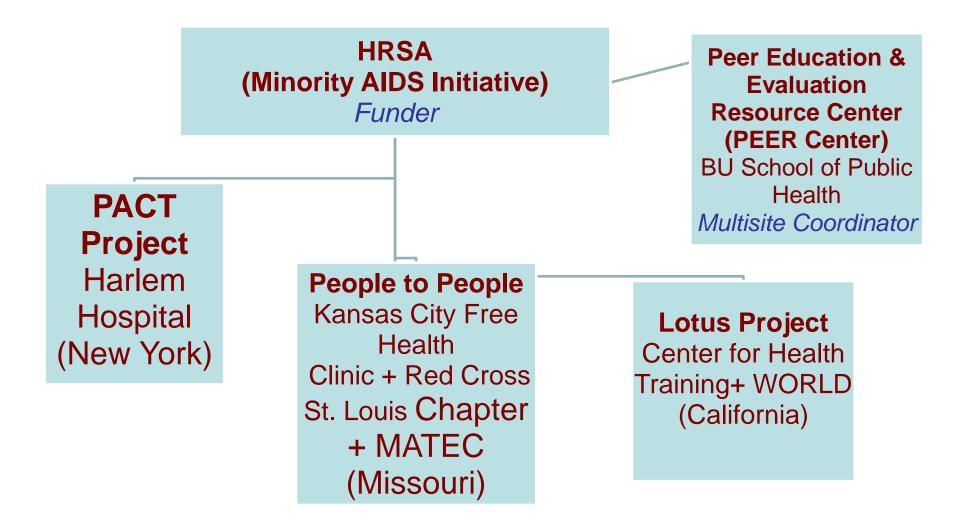
Contributions of HIV-positive peers

- Adherence to medical care (keeping appointments, responding to physician referrals, picking up medications)
- Linking to medical care and support services
- Self-management of disease
- Other
 - Emotional support
 - Reduced risk behaviors

Goals of HRSA's Peer Education & Training Sites Initiative 2005-2010

- To improve HIV-related health outcomes for communities of color and reduce health disparities through HIV peer education by:
 - Providing training and education to HIV peer educators
 - Replicating successful peer education programs through training-of-trainers
 - Building capacity in existing HIV/AIDS peer programs or in organizations developing a peer program

The Peer Education & Training Sites Initiative (2005-2010)



Harlem Hospital Program Model



Paul Colson

Harlem Hospital's HIV Peer Programs

- 1989: First peer program for HIV+ women
 - Volunteer only, no funding
 - Focus on helping newly diagnosed women
- 1996: Beginning of peer adherence programs
 - First peer program for Latent TB Infection, HIV in 1998
 - Funding from NIH research grants
- 2000s: Integration of peers in many Infectious Diseases programs
 - Peers used for navigation, outreach, and other functions
 - Funding from Ryan White, NYS AIDS Institute, and others

Qualifications for Being an HIV Peer Worker

- HIV-infected and adherent to antiretroviral therapy
- Harlem resident or familiar with the Harlem community
- Committed to helping others
- Good communication skills
- Not currently abusing drugs

Organizational Structure

- Initial training and orientation
- Clear job descriptions
- Volunteer or stipend for part-time work; may transition to full-time
- Continuing education/staff development
- Member of interdisciplinary team
- Close supervision

Peer Roles at Harlem Hospital

- Pre- and post-test counseling
- Patient navigation and retention in care
- Support group facilitation
- Referrals for in-house services, community resources
- Adherence:
 - Provide social support and promote adherence in weekly contacts
 - Help clients adapt regimen to their lifestyle
 - Facilitate communication with providers
 - Serve as role model

Recruitment

- Nominations by providers and current peers
- Telephone interview
- Required 3-week training course on HIV peer education:
 - HIV/AIDS knowledge
 - Peer roles
 - Communication skills
- Selection from those who complete the training course

Peer Training

- HIV 101 (HAART, OIs, etc.)
- Secondary Prevention
- Complementary Therapies
- Counseling Techniques
- Clinical Trials and Participant Rights
- Advocacy
- Mental Health Issues
- Role of the Peer Worker
- Adherence Strategies



Supervision and Support

- Weekly individual case review (peer and supervisor)
- Bi-weekly case management meetings (all staff)
- Mutual aid support group
- Quarterly peer forum
- On-going in-service trainings

Retention

- Valued as member of team
- Opportunities for growth
 - Training
 - Presentations at conferences and meetings
 - Promotions to full-time positions
- Support and supervision
- Clear expectations



Contributions to clients' lives

- Improved medication adherence
- Greater retention in care
- Greater clinic enrollment among people testing HIV+
- Increased use of support services (substance abuse treatment, social services, etc.)

I like seeing the clients come in and reach a different level when they leave. The clients looked at the peers and saw how they lived that they stopped using drugs, they were working, they were taking their medication. They saw how much better the peers were getting, and they would say 'I want to be like that.'



Jackie Howell, HATS peer, Harlem Hospital

Kansas City Free Health Clinic Program Model



Sally Neville

Peers in a Primary Care Setting

Kansas City Free Health Clinic





Peers are Part of the Team

Largest HIV care and prevention provider in Kansas City area

- Care Services
 - Primary Care
 - Over 500 patients
 - Full range of HIV Primary care
 - Case Management
 - Standard, Family Centered, Linkage to Care and Youth focused
 - Behavioral Health
 - Mental Health and Substance Abuse
 - Medication management

Peers are integrated into all these services

It began with little steps

History of the Peer Program: It's taken 10 years to get where we are now

- 1998—educational groups to HIV+ community members
 - Groups focused on training HIV+ individuals
 - No formal peer program
 - HIV prevention and treatment issues

2000—Ryan White Title I (Part A)

- Trained Peer Educators to work with HIV+ patients
- Utilized Pharma Navigator to Pilot training
 - Focus on linking to case management
 - Linking to prevention case management

.....and more steps

2001-2002—Continued Part A funding

- Hired Peer Coordinator
- Hired Peers (Stipend)
- Began developing actual program

2002-2005 (various funding sources)

- Program Development, Peer Training
- Integration into Multidisciplinary team
 - Primary Care, Case Management, Behavioral Health

.....and more

2005-2008

- Further development of peers and expansion of the role
 - Goal Planning with clients
 - Co-facilitate educational/support groups
 - Develop content
 - Group skills
 - Linkage to Care
 - Engage newly diagnosed in care
 - Mentor new peers

Organizational Structure & Process

- Recruitment/Hiring/Retention
 - Under the direction of Human Resources
 - Follows same process as all other hires
- Job Description
 - Essential Functions: Example, Enhance engagement in care and adherence by assembling next day appointment charts, complete patient reminder and DNKA calls per Protocol and Operational Activities Manual
- Orientation
 - Completes orientation with other new hires
 - Program specific orientation
- Compensation
 - Paid, regular part time employees
 - Earns benefits according to our personnel policies (based on hours worked)

Peers Training

- New Peers must have completed PETS training

- Knowledge of HIV viral life cycle, viral load, CD4 counts
- Communication skills
- Role/Boundaries
- On-going training
 - Individualized
 - Community Based Trainings
 - Collaborative Trainings with other local peer programs
 - National Trainings
 - HIV and Stigma
 - Voices

What peers do

- Provide short-term individual support-education, emotional support---goal directed
- 'Just In Time' Sessions
- Linkage to Care
- Medication Clinic-weekly with Pharmacist
- Reminder phone calls, f/u on DNKA, pull patient charts
- Groups
 - Adhering to Wellness
 - Monthly Support Group
 - Educational Lunch Presentations

Member of Multidisciplinary Team

- Work in clinic with providers
- Attend team meetings
- Access to medical records
 - Documentation
 - FACTORS Database (integrated case management dbase)
- Access to system wide case management database
 - Documentation
 - Only people they work with

Peer Supervision

- First line supervisor
 - Promoted from Peer Educator
 - Previous management experience
 - Excellent peer educator skills
 - Other Peer Educator/Advocacy experience
- Individual and group supervision
- Program is managed by a LMSW
 - Provides clinical/supportive supervision
 - Important when dealing with clients!

Monitoring and Reporting

- Evaluation/Quality Management
 - Monthly reports for internal use
 - Process oriented
 - Quarterly/6month reports for funders
 - Outcome oriented
 - Engaged in care
 - On ARV's
 - Viral Loads
 - Client satisfaction survey

WORLD Program Model



Anna Jackson & Shalini Eddens

Women Organized to Respond to Life Threatening Diseases (WORLD)

- Founded in 1991 by & for women living with HIV
- Provide support, information & advocacy for HIV+ women, families, friends, & loved ones.
- Local, national, international programs



Peer Advocacy—A philosophy

"When I was diagnosed I felt like nobody could possibly understand what I was going through. I would have given anything to have another HIV+ woman to talk to right away. When I finally did meet another HIV+ woman, she gave me hope. She had information. She gave me courage. Now we can give other women what we only dreamed of before."

Rebecca Denison, founder of WORLD on receiving funding to support ten peer advocates.



Anna Jackson and Sylvia Young, Peer Advocates at WORLD and Trainers for the Lotus Project

WORLD Peer Advocacy Program

- Peers are a member of the WORLD staff
 - Five peer advocates
 - Including Latina Peer Advocate
- Paraprofessionals with competitive hourly pay and benefits
- Work part time
 - 16-32 hours a week

What do our peers do?

- Practical & emotional support
- Assist with navigating healthcare system
- Facilitate weekly support groups
- Weekly clinic hours
- Work with social workers to identify clients
- Adherence support
- Member of multidisciplinary teams and case conferencing
- Assist with translation
- Participate in local HIV planning council & task force

Peer Advocate Orientation

- Peer Handbook
- Senior peers provide mentorship
- Mini trainings at weekly staff meetings
- On the job training
 - Shadowing peers at clinic
 - Observing peer/client one to one appointments (in person and phone)
- Attending HIV conferences and trainings (USCA, CSTEP, Lotus Peer Training)

Partnerships in the Community

- WORLD works with clinics & other social service agencies to provide peer support to HIV-infected women
 - Part of the Family Care Network (FCN) (www.fcneastbay.org)
 - Network of social service and clinics providing prevention care and support
 - Part D funding
 - WORLD peers are posted to other organizations every week

Recruitment

- Hired from within the community
- Often are clients or affiliated with WORLD
- Circulate job announcement to local orgs
- Group interview with all peers

Retention

- Provide holistic support and employment policies
- Opportunity for professional development
- Ongoing training
- Advocate and teach self-care methods
- Part-time flexible schedule

Supervision Structure

- Peer Program Manager
 - Leadership role
 - Provides administrative support
 - Provides mentorship on daily client care
 - Monitor referrals and follow-ups with clients
 - Mentored by clinical supervisor
 - "Open door" policy
- Clinical Consultation
 - Licensed marriage and family therapist
 - Leads weekly group and individual meetings
 - Provides clinical supervision to peer advocacy team and peer program manager

Clinical Consultation

- Weekly group meetings
 - Stress reduction
 - Personal check-in/Emotional support
 - Trouble shoot client issues
 - Mini-trainings
 - Success stories
 - Professional development
- Individual weekly meetings
 - Stress reduction
 - Personal check in/emotional support
 - Discuss clients/Troubleshoot

"One of my clients tested positive in 2007, two weeks later she was at WORLD's retreat. And now... she has passed the US citizens' exam to become a citizen and is actively looking for work. She is on a path to achieving her quest." WORLD Latina Peer Advocate

Impact on clients' lives

- "...She gives me tips on how to take [my meds]... I take it with food, [that it is] better to take it with something to drink...I take my medicine better than the way I was taking it..."
- "I found out all the details [of HIV]....I knew HIV was something people had but I didn't know how they cared for themselves or how they could get it, how it's transferred... I didn't know any of that until I sat down with [my peer]..."
- "...I know if I work long enough with [my peer] she can show me the tricks to reach out to other women like me...how to go out and get people to come and not be ashamed of their status, I would like to help somebody..."

Our Peers and their Clients









Summary

- Peer are full members of the HIV care team
- Peer Roles
 - Practical & Emotional support (1-1 or group)
 - Links to medical and social services
 - Educate and help clients build health promotion skills
 - Treatment adherence support
 - Reminder phone calls & reschedule missed appointments
 - Facilitate support groups
- Training & Supervision systems need to be in place prior to starting a program
- Documentation to demonstrate contributions to service utilization & client outcomes

Benefits of Working with Peers

- ✓Are familiar with context of clients' lives
- Provide on-going social/emotional support
- ✓ Facilitate support and educational groups
- Provide culturally/linguistically appropriate education
- ✓ Outreach to return patients to care
- ✓ Outreach to deliver risk reduction messages

Questions & discussion

Resources

Websites:

- PEER Center: www.hdwg.org/peer_center
- Kansas City Free Health Clinic: www.kcfree.org
- Lotus project: www.lotuspeereducation.org
- PACT project Harlem Hospital: www.peernyc.org
- WORLD: www.womenhiv.org
- Tools
 - Sample peer job descriptions
 - Assessment tools for planning/enhancing a peer program
 - Program planning tools

Thank you!

Serena Rajabiun PEER Center Paul Colson PACT Program

Sally Neville People to People Shalini Eddens Anna Jackson The Lotus Project

For more information please visit http://peer.hdwg.org





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