

# Strategies for Supervising HIV Peers

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**PEER Center**  
Peer Education & Evaluation Resource Center



Boston University School of Public Health



# Presenters

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# Objectives

- By the end of this presentation, participants will be able to:
  - Identify types of supervision
  - Understand the Supportive Supervision Model
  - Recognize and address supervisory peer issues
  - Increase knowledge of supervision strategies for a range of situations
  - Access resources: [www.hdwg.org/peercenter](http://www.hdwg.org/peercenter)

**People to People**  
**MO Alliance: American Red Cross- St. Louis Chapter**  
**Kansas City Free Health Clinic**



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**Boston University**  
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**PEER Center**  
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**PACT Project**  
**Harlem Hospital**  
*New York, NY*



**Lotus Project**  
**Center for Health Training**  
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*Oakland, CA*



# The Basics of Peer Supervision

- Regularly scheduled meetings or time
- Whoever is in charge of where peers are placed can offer administrative supervision
- Administrative and either supportive or clinical (ideally shouldn't be the same person)
- Supportive supervision can be provided by a non-licensed practitioner
- Clinical supervision is always provided by a licensed practitioner

# Types of Supervision

- Administrative
  - Clinical
- Supportive

# Administrative

Operational method by which supervisors work with peers to accomplish the intended goals of the program.

Includes:

- Caseload
- Hours
- Benefits
- Quality of work
- Interpersonal interactions
- Job satisfaction
- Resource allocation
- Peer development

# Clinical

Clinical supervision is provided by a license practitioner to:

- Recognize and manage transference
- Recognize and manage counter-transference
- Consider diagnostic issues without diagnosing the client
- Intervene therapeutically when necessary
- Provide appropriate referrals for outside support

# Clinical Supervision- Individual

- Creating a safe environment for the peer to share their feelings, reactions to this work
- Helping the peer understand peer-client interactions as they emerge in their relationship
- Helping the peer manage those interactions in a professional way
- Helping the peer secure additional support for themselves if needed

# Clinical Supervision - Group

- Support groups of peers in managing issues that commonly emerge in the peer-client relationship
- Create safe environment for peers to share information among their peers and learn from others' experiences

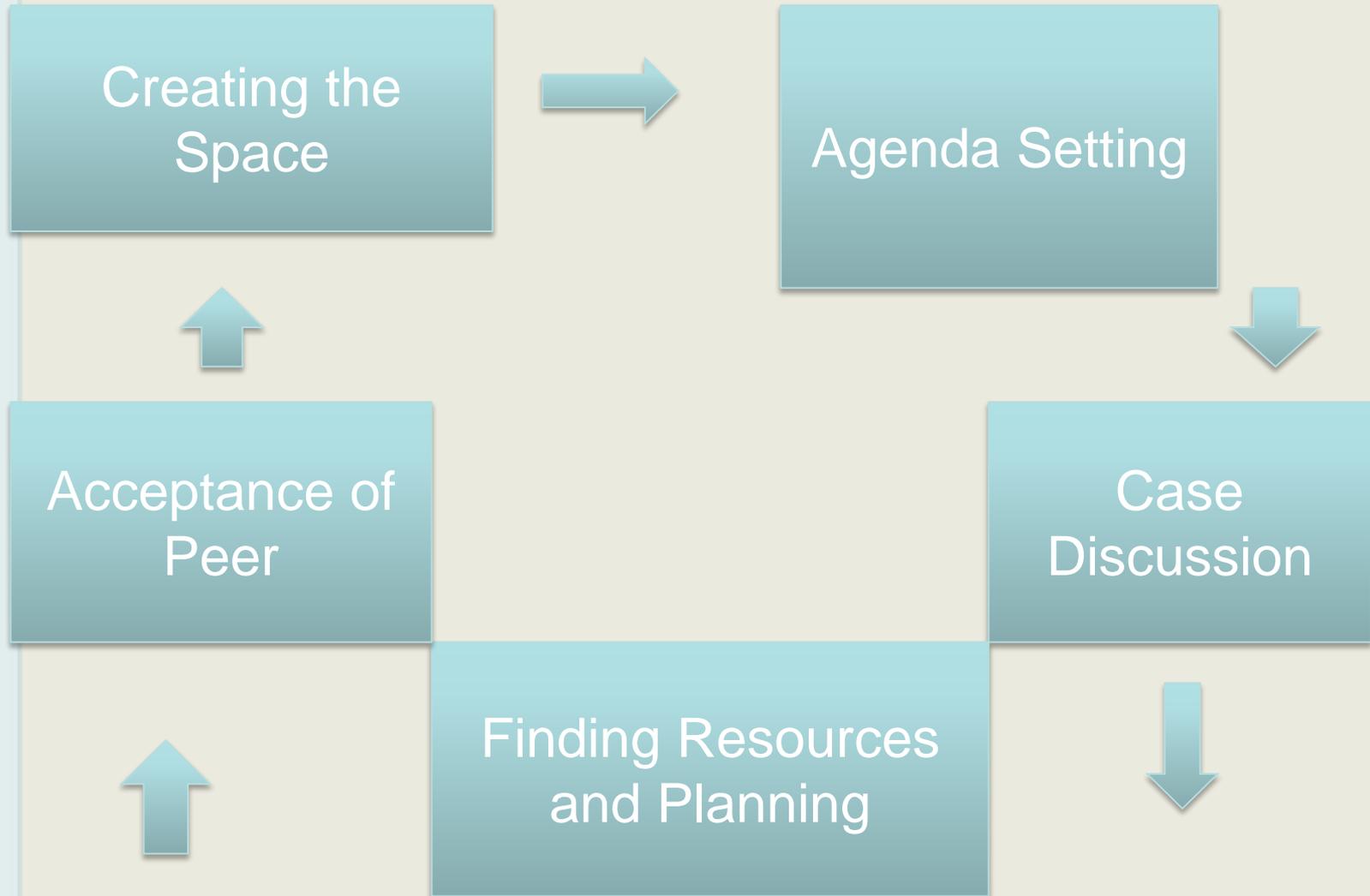
# Supportive

Supportive supervision lends tremendous assistance to peers in their efforts to manage the multi-layered dimension of their own lives with HIV while supporting clients in managing this disease.

Key aspects include:

- Building a trusting relationship between supervisor and peer
- Allowing the peer to explore feelings and reactions that emerge
- Creating a model of the peer/client relationship
- Helps transfer personal knowledge
- Assists in formulating client care plans
- Supports peers in maintaining boundaries
- Supports peers in balancing their work/life needs

# Supportive Supervision Model



Questions:

*the ones we hear; the ones you have*



# Interview Question #1

***What is it about the peer/client relationship that makes it so complex?***



# Feelings Between Peer and Client Are Normal, *but can be confusing*

- Hope for positive outcomes
  - Fear of negative outcomes
  - Concern and/or protection of one another
  - Appreciation and/or affection
  - Frustration and/or anger
  - Feelings of love
  - Dislike and/or hate
- Boundaries and confidentiality issues

# Boundaries and Confidentiality

- Peers may identify more with patient role than co-worker/colleague role
- Peers may defer decision-making to providers
- Lack of time boundaries (i.e., lateness) may indicate peers' misunderstanding of their importance
- Providers may balk at communicating boundary issues because they are afraid of offending peers
- Peers may elicit caretaking from providers, and/or providers may take the lead by offering it

# Supervisory Strategies to support Physical Boundaries

- Model statements peers can use to clients or co-workers to respect physical space
- Examine with peers how client data can support achievement of adherence goals
- Encourage peers to review agency employee handbook to support safety in the work place

# Supervisory Strategies to support Time Boundaries

- Expect peers to be on time
- Coach peers to begin and end client meetings on time and within reasonable timeframes
- Teach peers to communicate to clients how long meetings will last
- Consider protocols regarding when peers may meet with clients
- Remember time boundaries demonstrate respect for supervisors, peers AND Clients
- Model good time boundaries as a supervisor

# Supervisory Strategies to support Place Boundaries

- Decide where peers and clients can meet and clearly communicate to peer staff
- Consider allowing for flexibility based on client needs and peer's experience
- Review issues regarding “safety in the field” and encourage peers to express any feelings of lack of safety

# Supervisory Strategies to support Emotional Boundaries

- Process with peers responses to peer/client exchanges
- Coach peers to separate what they do and do not have control over
- Teach peers to let go of work-related issues after their assigned work hours
- Encourage peers to set boundaries with clients, health care staff and multidisciplinary teams
- Model self-care

## Interview Question #2

*How do you provide both administrative and supportive supervision as peers balance SSDI/Medicaid benefits with gainful employment?*



# Navigating the Peer through Benefits/Employment

- Peers are encouraged to assess with the Social Security Administration how gainful employment might impact their benefits
- Mistakes can occur that impact a peer's ability to continue receipt of a paycheck
- Finding a way to honor the peer's continued work may be necessary
- Options in changing paid employee status maybe
  - Reduction in work hours
  - Volunteering
  - Gift cards

# Interview Question #3

- A. How does an organization provide supportive supervision to peers and still keep the work focused on the client?*
- B. What can a supervisor do when peers focus more on their own needs during supervision time or even work time?*



# Supportive Supervisors

- Support the peer as his/her concerns relate to the work with the client
- Identify resources for additional self-care or for more in-depth support
- Ensure that the peer understands his/her role in best using supportive supervision

## Interview Question #4

*As peers become more integrated into systems of care, and funding calls for organizations to quantify and qualify the work of peers, how do supervisors help peers both become more "provider" like, and also maintain true peer-to-peer relationships with clients?*



# Building Peers as 'Providers'

- It is important for Peers to remain authentic with the client
- Organizations must value peer work for both the client and the interdisciplinary team
- Maintain a balance of expected client outcomes and the process of building a relationship with the client

# Questions & discussion

# FOR MORE INFORMATION

[http://peer.hdwg.org/program\\_dev](http://peer.hdwg.org/program_dev)

PEER Building Blocks to Peer Program Suc...

Home  
News  
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How Peers Help  
Models for Peer Programs  
Resources for Peer Programs  
Build a Peer Program  
Frequently Asked Questions  
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Upcoming Events  
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## Building Blocks to Peer Program Success

A toolkit for developing HIV peer programs



**Purpose of this toolkit:** to support organizations and communities who work with peers to effectively engage and retain PLWHA in care and treatment.

**Primary audiences:** directors/managers, supervisors of social services, clinic managers and medical directors, nurses and case managers, state and county health officials in charge of HIV program dollars, planning councils, consumer advisory committees and anyone interested in building, enhancing or incorporating peers into a program

**Additional uses:** Organizations can review and select relevant sections based on their program's needs and use the tools and resources available.

1. Introduction (PDF)
2. Organizational readiness for peer programs (PDF)
3. Designing a peer program
4. Peer roles and responsibilities
5. Recruiting, hiring and orienting peers
6. Supervising peers
7. Evaluating peer programs
8. Funding sources (PDF)

► Program resources



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# For More Information

## 6. Supervising peers

All links below are in PDF format and require Adobe Acrobat Reader.

- [6 Supervising peers - Introduction](#)
- [6.1 Administrative supervision](#)
  - [Read More A: The coaching model for administrative supervision](#)
  - [Read More B: Example 1: Goal-setting framework for peer programs that outreach to clients.](#)
  - [Read More C: Example 2: Goal-setting framework for peer program working with providers..](#)
  - [Read More D: Understanding boundaries in peer-client relationships](#)
- [6.2 Supportive supervision](#)
  - [Read More A: The coaching model for supportive supervision](#)
  - [Read More B: Troubleshooting difficult cases and supporting peer efforts](#)
  - [Read More C: Recognizing and addressing countertransference](#)
  - [Read More D: Tasks and tools for developing a supportive approach](#)
  - [Read More E: Peer support groups and structured group supervision](#)
- [6.3 Clinical supervision](#)
  - [Read More: The coaching model for clinical supervision](#)

# Resources

## Websites:

- PEER Center: [peer.hdwg.org](http://peer.hdwg.org)
- Kansas City Free Health Clinic: [www.kcfree.org](http://www.kcfree.org)
- Lotus project: [www.lotuspeereducation.org](http://www.lotuspeereducation.org)
- PACT project Harlem Hospital: [www.peernyc.org](http://www.peernyc.org)
- WORLD: [www.womenhiv.org](http://www.womenhiv.org)
- **TARGET Center:** <http://careacttarget.org/>

# Thank you!

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