



SETTING UP YOUR FIRST MEETING*

▶ ABOUT THIS ACTIVITY

 **Time:** 60 minutes

 **Objectives:** By the end of this session, participants will be able to:

- Understand the process involved with setting up initial contact with a client;
- Feel more comfortable setting up first meeting with client.

 **Training Methods:** Dyad Activity, Skills Practice

 **In This Activity You Will...**

- Provide and go over some tools (handouts) as resources (10 minutes)
- Facilitate role play activity in pairs (30 minutes)
- Set up a role play demo and debrief (20 minutes)

 **Materials:**

- Flipchart and Markers
- Handout - Meeting With A Client
- Handout - Sample Peer Contact Form
- Handout - Sample Confidentiality Agreement
- Handout - Peer/Client Role Play (optional)

 **Preparation:**

Print handouts

Instructions

1. Introduce the activity by describing the objectives.
2. Break the group up into pairs. Ask each pair to pull out the following handouts and use them as they do the role play. Take a few minutes to walk through each form, briefly explaining what each one is:
 - a. Meeting With A Client
 - b. Sample Confidentiality Agreement
 - c. Sample Peer Contact Form
3. Ask one person in pair to be client and the other person to be the peer. We are going to practice meeting with your client for the first time. Use the various concepts – especially the communication skills we learned such as open-ended questions, affirming, and paraphrasing- we have learned earlier in the week to gather information.
4. Emphasize:
 - When playing the role of a peer they should explain confidentiality to their client and get them to sign the confidentiality form. Steps on what can be done are listed on the Meeting with a Client handout.
 - At the end of the role play, the peer should remember to also set up a follow-up meeting.
5. Read out loud to the group:
 - a. **Peer role:** You are a peer advocate. A woman/man who has been diagnosed with HIV for several years is referred to you by a social worker. The social worker told you that the client is doing okay, but she/he is new to the area and feeling isolated.
 - b. **Client role:** You are a woman/man who has been living with HIV for many years. Your health is okay and you are stable on medication. You just moved to the area and you told your new social worker that you are lonely. She referred you to what she called a “peer advocate.” You are unsure what a peer advocate is, but you are open to anything.

* This module comes from the Lotus Women's Peer Education Training Manual, Center for Health Training and Women Organized to Respond to Life Threatening Diseases (WORLD), 2008.

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“...The most important thing you do as a peer is to connect with the client, and build trust. Because unless you build trust, the client is not going to speak to you or believe any of what you say.”

Jackie Howell
Peer Educator
New York

6. Remind them to use the forms provided in their packets, but to focus on the client, not the paper.
7. Tell the groups they'll have about 15 minutes and then you'll ask them to switch roles.
8. Ask them to switch roles in about 15 minutes. Tell them that it is okay if they do not finish; they should start from the beginning.
9. Process the activity by asking participants:
 - a. How did that activity go for you?
 - b. How did it feel to play the peer advocate?
 - c. Who did most of the talking?
 - d. Did the peers ask open-ended questions?
 - e. Were you comfortable in explaining confidentiality to the client?

Point out that we want the client to do most of the talking, so she/he begins to feel empowered and develops her/his own “voice” with you. If you did most of the talking this time, that’s natural, but something to pay attention to and work on. Use more open-ended questions!

10. Ask for a volunteer pair to role play in front of larger group. Give them about 5 minutes, then stop them, thank them, and ask the others:
 - a. What new ideas did you get from watching this?
 - b. What did the advocate do that you liked?
 - c. What did you learn about the client?
 - d. What were some open-ended questions you heard? Any missed opportunities?

Summary

Congratulate everyone for jumping in and trying on their new role. Remind them that the most important part is to establish a connection so the client feels comfortable and confident with them and will return.

* This module is part of the online toolkit *Building Blocks to Peer Success*. For more information, visit http://www.hdwg.org/peer_center/training_toolkit. This module comes from the Lotus Women’s Peer Education Training Manual, Center for Health Training and Women Organized to Respond to Life Threatening Diseases (WORLD), 2008.

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SESSION HANDOUT #1 of 4

MEETING WITH A CLIENT

First Visit with a New Client

1. Introduce yourself and the agency you work with.
2. Explain peer education and who you are.
3. Explain confidentiality.
4. Get verbal/written consent from client to begin helping her as a peer.
5. Ask open-ended questions about the client's needs and listen.
 - Seek information from client regarding her situation.
 - Seek information on client's health behaviors (ex. Is she taking medications, has a doctor, safer sex, drug use, etc)
 - What are barriers present in client's life?
 - What are resources available in client's life?
 - What are client's immediate needs? What can peer do for the client?
6. Provide emotional support and find a way to connect.
7. Fill out necessary paperwork.
8. Set priorities or goals for next meeting.
9. Set up next meeting time (crucial!).

Tasks for Peer Before Next Visit with Your Client:

1. Search for appropriate referrals for client's needs.
2. Communicate with referral source and coordinate services if necessary.
3. Follow-up with the client regarding referral.

At the Next Meeting with Your Client:

1. Check-in with client regarding referrals and last meeting.
2. Follow through with support and addressing needs.

REMEMBER

- Recognize your own need for support from supervisors, co-workers and others.
- Recognize your need for self-care and personal reflection.
- You may not follow these steps in this order but make sure to cover ALL the steps.

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SESSION HANDOUT #2 of 4

SAMPLE PEER CONTACT FORM

Client Code: _____

Peer Code: _____

Date of Contact: __/__/__

Description of the contact <i>Please check the appropriate</i>		
<p>Who initiated contact?</p> <input type="checkbox"/> Client <input type="checkbox"/> Peer <input type="checkbox"/> Other individual	<p>Life Stressors Addressed:</p> <input type="checkbox"/> None <input type="checkbox"/> Health <input type="checkbox"/> Anxious/depressed/ lonely <input type="checkbox"/> Benefits/Insurance <input type="checkbox"/> Problems with partners/ kids <input type="checkbox"/> Money <input type="checkbox"/> Housing <input type="checkbox"/> Family's Health <input type="checkbox"/> Death of family/friend <input type="checkbox"/> Legal problems <input type="checkbox"/> Any accident <input type="checkbox"/> Isolation <input type="checkbox"/> Immigration issues <input type="checkbox"/> Other (Explain) _____ _____ _____	<p>Incentives Provided:</p> <input type="checkbox"/> Yes <input type="checkbox"/> No
<p>Where?</p> <input type="checkbox"/> Unsuccessful contact <input type="checkbox"/> Phone contact <input type="checkbox"/> ID clinic <input type="checkbox"/> Street <input type="checkbox"/> Hospital wards <input type="checkbox"/> Drug program <input type="checkbox"/> Client's home <input type="checkbox"/> Other location	<p>Type of Contact:</p> <input type="checkbox"/> Face to face <input type="checkbox"/> Phone <input type="checkbox"/> Mail <input type="checkbox"/> Left message only <input type="checkbox"/> Phone, but no answer <input type="checkbox"/> Other	<p>Do you talk about adherence?</p> <input type="checkbox"/> Yes <input type="checkbox"/> No
<p>Who was contacted?</p> <input type="checkbox"/> Client <input type="checkbox"/> Family/friends <input type="checkbox"/> Case Workers <input type="checkbox"/> Medical <input type="checkbox"/> Other <input type="checkbox"/> Not applicable	<p>Referrals made:</p> <input type="checkbox"/> None <input type="checkbox"/> Case Manager <input type="checkbox"/> Health Educator <input type="checkbox"/> Medical Provider <input type="checkbox"/> Support Group <input type="checkbox"/> Mental Health <input type="checkbox"/> Supplies (food, baby, etc.) <input type="checkbox"/> Other _____	<p>Did the client say she/he is adherent?</p> <input type="checkbox"/> Yes <input type="checkbox"/> No
		<p>Did you discuss T-cells or viral load?</p> <input type="checkbox"/> Yes <input type="checkbox"/> No
		<p>Did the client mention missed days or med holiday?</p> <input type="checkbox"/> Yes <input type="checkbox"/> No
		<p>If the client has missed meds, about how many days? _____ days</p> <p>Notes and Next steps:</p>

Next Visit: ____/____/____

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SAMPLE CONFIDENTIALITY AGREEMENT

As a client of _____ and a participant in the _____ Peer Advocate Program, you can expect to receive peer support that is professional, respectful, and trustworthy.

Professional peer support means that you can expect your Peer Advocate to maintain a confidential relationship with you. She will not share information about you with anyone outside of XXX without your consent. There is, however, an exception to this rule. Confidentiality may be waived if your safety or the safety of someone close to you is in question. If questions of safety arise, she will contact either your case manager or another professional for assistance. In most cases, the peer advocate will let you know if she plans to speak with your case manager.

Respectful peer support means that you can expect your Peer Advocate to honor your privacy. You may choose to share many personal topics with your Peer Advocate; however, you need only to share personal information if and when you feel comfortable. At times, she may offer advice or suggestions, but she will keep in mind that you know what is best for you.

Trustworthy peer support means that you can expect your Peer Advocate to follow through with the support that she offers to you. She will be on time and listen to you during your time together. Time spent together may include peer counseling, accompaniment to doctor visits, visits to your home, phone check-ins, and other activities as decided upon by you and your Peer Advocate.

As a client of our organization, you are encouraged to speak with your Peer Advocate if you have questions, concerns or complaints about the program.

By signing below, you and your Peer Advocate are agreeing to the above guidelines. You also are indicating your understanding of the standards inherent in the peer advocate/client relationship:

Client:

Print Name _____

Signature _____ Date _____

Peer Advocate:

Print Name _____

Signature _____ Date _____

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SESSION HANDOUT #4 of 4

PEER ROLE

You are a peer advocate. A woman who has been diagnosed with HIV for several years is referred to you by a social worker. The social worker told you that the client is doing okay, but she is new to the area and feeling isolated.

CLIENT ROLE

You are stable on medication. You just moved to the area and you told your new social worker that you are lonely. She referred you to what she called a “peer advocate.” You are unsure what a peer advocate is, but you are open to anything.