



CASE STUDY: STARTING A PEER PROGRAM IN A CLINIC SETTING

WATERBURY HOSPITAL INFECTIOUS DISEASE CLINIC WATERBURY, CT

Main goal(s) addressed by peer program:

- Inreach, keeping patients in primary care
- Increase the number of patients who engage in case management or support groups
- Improve the ability of patients to manage their own care

Capacity-building activities:

- Phone and onsite consultations to create a plan to develop a peer program
- Supervisor training
- Level 2 peer training
- Participation in training-of-trainer workshop
- Ongoing support through periodic check-ins and consultations

Peer program funding source(s):

One-year capacity grant through August 2010, Part C expansion funds

Results:

- Launched peer program in July 2009 with three peers
- Former volunteer peer now peer supervisor
- Peer involved with formation and facilitation of new support groups for health, substance abuse, and survivors of abuse
- Greater participation in and recognition for photography group for HIV-positive patients
- Greater participation in other support programs the clinic offers
- Peers presented at a poster session at the Ryan White All-Grantee meeting in August 2010

Benefits to patients:

- More patients coming to their medical appointments
- More patients adherent to highly active anti-retroviral therapy (HAART)
- Increase in comfort level of new patients coming to clinic
- Social support network through photography, movie groups and other support groups
- Recognition of accomplishments gives patients motivation to remain adherent

Next steps:

- Hire one additional peer
- Host a peer training workshop
- Find sustainability in funding

Advice for organizations developing peer programs:

- Hire a peer group that reflects the demographics of the population it will serve
- Work through issues around compensation and disability benefits prior to hiring
- Understand the organization's human resources policies regarding employee background prior to hiring

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The doctors working with new patients have expressed a need for somebody who can say to those patients ‘I know what you are going through,’ and really mean it.

Bonnie Gemino
Ryan White HIV/AIDS Program
Part C Coordinator and
Office manager
Waterbury Hospital Infectious
Disease Clinic
Waterbury, CT



As part of its technical assistance around administrative and supportive supervision, PACT provided training for peer program supervisors from Waterbury and other local agencies.

Located in northwest Connecticut, Waterbury is one of many small cities struggling in a post-industrial economy. Waterbury Hospital is a private, nonprofit, acute-care teaching hospital serving Waterbury and 11 surrounding communities. It is licensed for 367 beds, and is affiliated with the Yale School of Medicine, the University of Connecticut School of Medicine, and Connecticut Children’s Medical Center.

As the largest provider of HIV/AIDS services in Waterbury, the Infectious Disease (ID) Clinic serves a growing number of HIV patients. Approximately 28% of these patients are African-American, 37% are Latino(a), and 34% are white. The clinic has three board-certified infectious disease physicians specializing in HIV care and a multidisciplinary team consisting of case managers, health department staff, consumer advisory board members, a nutritionist, social workers, a medication adherence specialist, an onsite psychiatrist, mental health, and suboxone program staff. (Suboxone treatment is used in the management of opioid dependence.) The infectious disease clinic receives Ryan White HIV/AIDS Program Parts A and C funds.

In 2005, a clinic patient, Beverly Leach, began offering support and navigation to patients. In 2007, Waterbury Hospital received a M*A*C AIDS Fund grant to start a peer program to increase the number of HIV-positive individuals presenting for care and the number of patients who engage in case management or support groups.

Waterbury Hospital represented great potential: it had seed money, it had a champion in Dr. Mercedes Villanueva, the lead physician in the ID Clinic, and it had a committed group of staff and patients. The Peer Advanced Competency Training (PACT) Project, one of three centers providing capacity building for the Peer Education and Training Sites/Resource and Evaluation Center (PETS/REC) Initiative, focused technical assistance efforts on expanding Waterbury Hospital’s capacity from using the services of a single volunteer to integrating several peers into the HIV care and treatment team. Clinic staff wanted peers to provide orientation and navigation to new patients, make reminder phone calls, encourage adherence, conduct outreach, help with support groups, and provide emotional support to patients.

Activities

Strategy development and ongoing support

Dr. Villanueva contacted the PACT program for technical assistance in developing a peer program. The staff at the ID Clinic viewed such a program as a necessary adjunct to their HIV self-management program and support groups. Over the course of a

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year and a half, the collaboration between PACT and the Waterbury Hospital Infectious Disease Clinic staff led to the launch of a program that incorporated HIV-positive peers into the care and treatment team. During this time, Bill Bower, PACT Advisor for Training and Technical Assistance, provided support and resources as the team implemented that strategy.

Supervisor training

As part of its technical assistance around administrative and supportive supervision, in May 2008, PACT provided training for peer program supervisors from Waterbury and other local agencies. This course helped to clarify peer roles and address staff questions about such issues as recruitment, hiring, peer activities, and supervision. PACT staff shared job descriptions, recruitment materials, and other resources found in the *Building Blocks to Peer Program Success* peer program development toolkit (available at http://peer.hdwg.org/program_dev). Marcie Brainerd, peer program coordinator, and Beverly Leach, who would assume a supervisory role in the new program, found this training helpful in devising a plan for their new program.

Peer Training

In 2009, PACT offered a comprehensive peer training course at the clinic to 13 trainees, four of whom were hired for Waterbury's peer program. Building on that training, Bower continued to offer technical assistance through phone calls and visits.

"That support was good," said Leach. "It wasn't like all of a sudden we've had the training and then we're on our own. Bill called regularly to find out how things were going. He was always there to help us if we needed help."

Participation in training-of-trainer workshop

Leach served as a reviewer for *Building Blocks to Peer Success*, the PETS/REC Initiative's newly developed peer training toolkit, and attended the first training-of-trainer (TOT) workshop in California in February 2009. The purpose of this workshop was to equip individuals to train HIV-positive peers to work or volunteer with organizations that serve people living with HIV. Feedback from participants in this "test drive" workshop led to improvements in both the toolkit (now available at http://peer.hdwg.org/training_toolkit) and subsequent workshops. Waterbury Hospital staff benefited from these improvements when they attended the TOT workshop conducted by PACT in New Haven in November 2009.

Addressing ongoing challenges: hiring peers

Hospital staff called on PACT's expertise to resolve two issues concerning the hiring of peers. The first issue centered on



The TOT training was very useful. We learned how to pull out what we need to suit our specific clinic. We'll be using it when we do our own training here within the clinic specifically for our clientele.

Beverly Leach
Peer Supervisor
Waterbury Hospital Infectious
Disease Clinic
Waterbury, CT

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compensation: how to compensate peers without affecting their benefits or entitlements? After exploring the issue, the hospital hired the peers as hospital volunteers and limited their work hours to eight per week. The peers receive gift cards as compensation.

A second issue came up when a background check revealed recent substance use in one instance. This was resolved by having the peer serve as a volunteer in the clinic on a reduced schedule until the required amount of time had passed and he could be hired as a peer.

Launch of the new program

The new hospital-based peer program was launched in mid 2009. It now serves over 400 patients and employs three peers who provide outreach to new patients, system navigation, patient education, adherence support and advocacy within the multidisciplinary clinic team. The peers each have a specialized role. One peer provides new patient orientation and makes reminder phone calls, resulting in fewer missed appointments. Leach recalls one patient's reaction on meeting him:

He told her he was a patient here and that he was also HIV-positive. He talked to her a little about himself and made the patient feel comfortable. The patient was crying at first. When she left, she was smiling. She said she couldn't remember the last time she walked into a doctor's office and left feeling good.

A second peer facilitates the photography group, part of the mental health program that uses photography to encourage self-esteem and

competence in HIV-positive patients. The group's work has been on display in the hospital and at conferences. Four of their photos were among the top 40 out of 1500 in a recent national HIV photo contest.

"When people come into the photography group, their attitude changes," explains Leach. "Their self-esteem gets lifted up, they become more adherent with their medication, they keep their appointments."

The third peer assists Richard Smith, a social worker in the substance abuse program at the clinic. This peer's main role is as peer facilitator of the substance abuse support group. He has made joint presentations with Smith to medical residents from Yale and University of Connecticut. He recently started a weekly movie club where patients watch a movie together and then discuss it.

"If you have a movie situation that parallels something in someone's life that they won't talk about, they can see how somebody else handled it and get something out of it," said Smith. "[The peer] selects a movie that has to do with some kind of social issue, sets everything up, and leads the discussion. This was his idea."

Results and Next Steps

Waterbury Hospital staff members plan to use what they learned in the TOT workshop to conduct a peer training on site. They are also exploring new funding sources to expand and sustain the program and to hire an additional peer.

*The Birmingham Group Health Services provides mental health, substance abuse, domestic violence, and HIV/AIDS services for Connecticut's Lower Naugatuck Valley and surrounding communities.

Peers can have a whole different dimension that we can't have.

Richard Smith
Social Worker
Waterbury Hospital
Infectious
Disease Clinic
Waterbury, CT

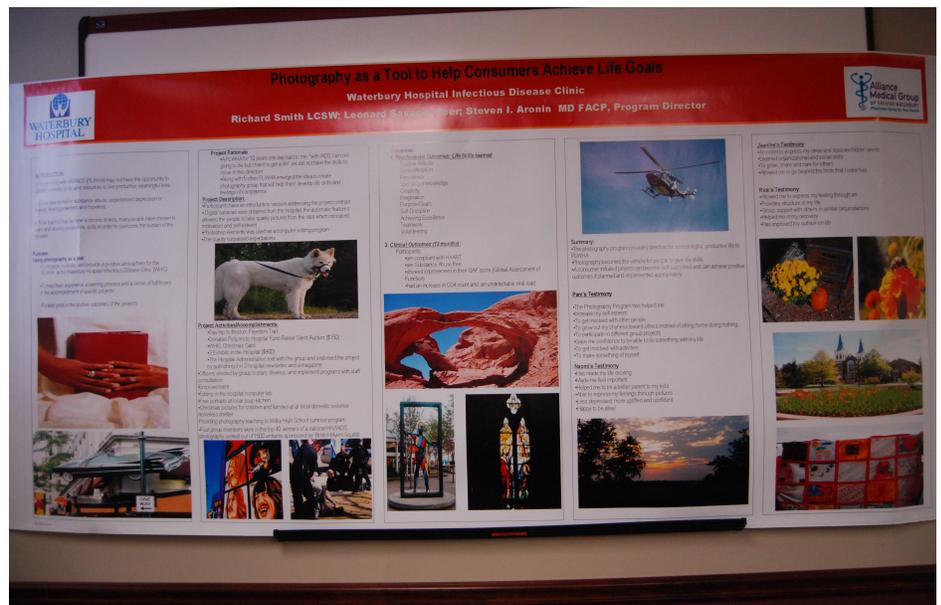
The Waterbury peer program has resulted in greater patient adherence to HAART, fewer missed appointments, an increase in the comfort level of new patients coming into the clinic, and increased participation in the clinic's support groups and programs. Dr. Villanueva left to take a position at Yale University, and a new doctor was hired to replace her in the Waterbury clinic, one who is a strong proponent of integrating peers into HIV services. Since moving to Yale, Dr. Villanueva has contacted PACT about starting a peer program there.

Waterbury Hospital has been instrumental in networking with other area organizations and has emerged as a leader in integrating peers into HIV care and treatment in Connecticut. ID Clinic staff invited participants from the Birmingham Group Health Services* and Waterbury Health Department to join them at a PACT-sponsored Supervisors Training in May 2008. They invited participants from Waterbury Health Department, Manchester Area Network on AIDS

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(MANA) and Hartford Ryan White HIV/AIDS Program Part A consumers to attend a PACT-sponsored peer worker training in September 2008. Peers from Waterbury presented very effectively at the Medical Adherence Program Nurses meeting in May 21, 2009. Beverly Leach was a featured speaker at a one-day course PACT held for people from the Ryan White HIV/AIDS Program Part B in June 2009. She was also invited to speak with seven new peers trained by the Connecticut Central Area Health Education Center (AHEC) and Connecticut AIDS Resource Coalition (CARC) in July 2010. Waterbury Hospital has also become the lead fiduciary agency for the New Haven Ryan White HIV/AIDS Program Part A.

In August 2010, the peers made a poster presentation showcasing the peer program and their photography group activities at the 2010 Ryan White HIV/AIDS Program All Grantee Meeting in Washington D.C. Their poster, entitled



Peers from the Waterbury Hospital Infectious Disease Clinic received a “Best in Show” award at the 2010 Ryan White All Grantee meeting in Washington D.C. for their poster, “Photography as a Tool for Developing Positive Life Skills.”

“Photography as a Tool for Developing Positive Life Skills,” received a “Best in Show” award in the access and retention category.

Cover photo, from left: Bill Bower and Harry Dohnert, PACT, with Dr. Mercedes Villanueva, lead physician at Waterbury Hospital Infectious Disease Clinic in 2008.

About the Peer Education and Training Sites/Resource and Evaluation Center Initiative

This case study accompanies the report *Integrating Peers into HIV Care and Treatment Teams: Lessons Learned from the Peer Education and Training Sites/Resource and Evaluation Center (PETS/REC) Initiative 2005-2010*, available on the PEER Center website at <http://peer.hdwg.org/lessons>. The PEER Center, the initiative’s resource and evaluation center, is a collaboration between the Boston University School of Public Health’s Health & Disability Working Group and the Justice Resource Institute (JRI). The PEER Center works in partnership with the PETS/REC initiative’s three national peer education and capacity-building centers:

- Lotus Project in Oakland, CA—a collaboration between the Center for Health Training (CHT) and Women Organized to Respond to Life-Threatening Diseases (WORLD)
- Peer Advanced Competency Training program (PACT) at Columbia University and Harlem Hospital in New York, NY
- People to People in St. Louis and Kansas City, MO—a collaboration between the American Red Cross St. Louis Area Chapter and Kansas City Free Health Clinic

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