How to Establish a Peer Support Program

IMPLEMENTATION GUIDE

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for Patient Safety

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Getting started

Peer support programs require careful planning. This guide will help you build a peer support program in your hospital. The accompanying work plan will help keep your efforts organized and on track.

Before you begin, be sure your hospital is ready to do this work. Peer support programs are much more likely to succeed if there is a commitment from the leaders of your organization. Find a member of the leadership team who will champion peer support from the outset.

The following foundational elements are key to successful implementation of a peer support program.

Establish a peer support advisory committee

An advisory committee will be your sounding board when making important decisions, and will provide guidance during the planning and implementation of your peer support program. Identify and enlist advisory members as a first step.

Be sure the committee is a multi-disciplinary group that will bring expertise and unique perspectives needed for success of a robust support program. Refer to this list for more information on the committee makeup and considerations.

Once you have a list of potential members, invite them to be a part of the advisory committee. In your invitation, highlight the purpose of the peer support program, their roles and responsibilities and the level of commitment.

Typically, the committee meets once a month during the planning phase (approximately first 6 months) of the program. You may find that there will be some months when your team will need to meet more frequently or hold smaller working group meetings.

At the end of your planning phase, continue to meet monthly until the program is fully launched and there is an internal structure in place. At this point, you might consider reducing the meeting frequency to once every two months.

Identify a project manager

A project manager or coordinator is instrumental to the success of any peer support program. This position is responsible for organizing all aspects of the program. The project manager ensures that deliverables are met according to your internal timeline.

It does not need to be a full-time job. But, based on experiences at other hospitals, a project manager should be able to dedicate at least 0.25 FTE to this program. Key qualifications for the role include project management skills, ability to work with leadership and experience convening work groups.

Conduct an environmental scan of internal and external supports

An initial task of the advisory group will be to oversee an environmental scan of the internal and external support services currently available to your staff.

Consider all internal resources that provide emotional or social support to staff, such as chaplaincy, social work, psychiatry and Employee Assistance Programs (EAP).

In addition, think about what supports are available outside your organization. For example, does your medical malpractice insurer have resources? Most states have physician health programs that serve as a confidential resource for physicians and certain other health professionals suffering from addictive, psychiatric, medical, behavioral or other potentially impairing conditions. Does your state nursing association have support services? If so, include them on your list of support services available to your staff.

It is possible that the scan could reveal a program that involves peer-to-peer support or counseling already in place in another part of your institution. If so, reach out to the coordinator of the program to coordinate efforts.

The environmental scan will also serve as the backbone of a resource referral list once your peer support program is in place.

Select department or unit to pilot the program

Start your peer support program as a pilot in one unit or department and scale it up over time. This will allow you to discover what structure and processes for offering peer support work best within your organization. You will find more information on how to expand your peer support program later in this guide.

To determine which unit will serve as a pilot for the program, consider the following:

- **High-incident unit:** What units in your institution experience a higher frequency of stressful incidents that might affect clinician and staff need for support? This might be your emergency department or intensive care unit.
- **High-risk scenarios:** The attached list gives examples of high-risk situations that may induce a stress response. Consider what units or departments encounter these situations most often.
- **Leadership:** What units have leadership that is likely to embrace peer support?
- **Champion:** In addition to leadership buy-in, what units have trusted team members who may want to serve as a champion of the work? Identify at least one, and preferably two, champions from the unit to offer on-the-ground assistance and help maintain the program's momentum.

Communications and marketing

Effectively communicating and marketing your peer support program will boost awareness of the program, its value, and benefits. Click here for a checklist.

Develop a communications plan for the peer support program

Once you have secured all the necessary components described in the getting started section, start working on an awareness plan for your program. If your institution has a marketing or communications team, reach out to them and enlist their help as you develop information and materials for letting people know about peer support services.

Below are some activities to consider in your marking plan.

Organization-wide communication

Work with your communications team to disseminate information about the new peer support program across your institution. You might do this via an email blast, newsletter, flyer or other mode of communication commonly used in your setting.

In your materials, give an overview of what the program is, the benefits, where it will launch and when. In addition to this, create a slide deck and encourage your advisory committee members to talk about the program at staff meetings, grand rounds, leadership meetings, etc.

Calendar of events

Create a detailed calendar of all peer support related events and meetings you anticipate having during the course of your pilot phase. This can include monthly meetings with advisory members, trainings, tracking, and support for supporters meetings. These meetings will be explained further along in this guide and will be a helpful way to track deadlines and stay organized while rolling out your peer support program.

Marketing materials

As you prepare for the rollout of your program, marketing materials can help you increase awareness and visibility. You might have built a great program, but if people are not aware of its benefits, it will not gain traction. Work with your marketing team to create a name, logo and/or slogan for your program. Brochures, handouts, and fliers can also be used to promote your program.

Anticipate opportunities for input to your communication plan. For example, in a few short months you will be training clinicians and staff to act as peer supporters in the pilot unit. Ask for their thoughts on disseminating information about the program. They may, for example, tell you that their colleagues seldom read emails from the hospital's management team and may suggest texts, interactive polls, or break room displays.

And, once you have identified and trained the clinicians and staff who will serve as the first peer supporters in the unit, your materials can highlight those individuals so that others in need of support know whom to approach.

Here are some examples of ways to increase visibility of your peer supporters:

- A badge worn by all peer supporters
- A bulletin board notice of all peer supporters with their names and pictures
- Names, pictures and contact information of peer supporters on your organization's intranet page
- Brochures for staff and members of their family

Communicating and marketing your program will be an ongoing process, so build that into your planning from the start. You will need to remind people about peer support services and who the trained peer supporters are with some frequency. The reminders are especially important in units where it is common to have staff that float and units with high staff turnover.

SAMPLE BADGE WITH LOGO FROM SOUTHCOAST HEALTH

BULLETIN BOARD NOTICE FROM METROWEST MEDICAL CENTER

Introducing Our Peer Support Program

MetroWest Medical Center is proud to offer a Peer Support Program that has launched in the Emergency Department of the Framingham Campus (FUH ED).

This program provides emotional support to caregivers and staff who might suffer emotional or physical distress following a traumatic or adverse event that can occur in the workplace. In these instances, ongoing research indicates that these healthcare team members would prefer to receive emotional support from a peer.

The following Peer Supporters have been nominated by their peers and trained to offer formal, confidential, one-on-one support to fellow FUH ED colleagues after such an event.

METROWEST MEDICAL CENTER
Framingham Union Hospital • Leonard Morse Hospital
A COMMUNITY BUILT ON CARE

JANICE WHITNEY, R.N.
Nursing Director

LISA SOTIR, M.D.
Chair, Emergency Medicine

PAUL KOTZAMPALTIRIS, D.O.

BRIDGET LEE, M.D.

BETHANY BRYANT, R.N.

REGINA DUNN, R.N.

SARAH JORDAN, R.N.

LISA LANDRY, R.N.

ERICA PARADIS, R.N.

If you are in need of assistance, we encourage you to reach out to a Peer Supporter, who will be

CALLING CARD FROM SOUTHCOAST HEALTH

STRONGER Together

"Alone we can do so little; together we can do so much."

Hello!

My name is:

_____

and I am proud to be a Peer Supporter.

Please call me at:

_____

when you need someone to talk to.

Plan for peer support training

A few months into your planning phase, it will be time to decide how you will train staff to be effective peer supporters. Focus first on the initial training for peer supporters in the pilot unit or department, but keep in mind that you will also want to identify peer supporters with the potential to train others as you scale the program throughout the hospital.

Trainers

For the initial training, unless your organization has experience with peer support models, it may be best to seek help from external trainers. Try to have at least one physician or one nurse in the initial group of trainees both to encourage use of the program by their colleagues and to have future trainers from those two professions. Effective trainers are people who are well-respected within the institution and have a great knack for educating and coaching. The ultimate goal is to build a diverse group of trainers who reflect the staff they are training.

Training dates and space

Select a training date 3-4 months in advance. This will give you time to plan and give attendees time to clear their schedules for training day.

Choose a space that is comfortable, well-lit and big enough to accommodate tables of between 4 and 8 people.

Selecting peer supporters

Recruiting people to serve as peer supporters is not as daunting as it may seem. It is likely that your institution has people that others already gravitate to when they need a little help or someone to talk to.

These trusted individuals have a good rapport with their colleagues and likely have the skillset to be a good peer supporter. Here is one recommended way to find out who these trusted individuals are:

- Tell the staff in your pilot department about the peer support program. Remember that all staff can be impacted by difficult events — members of the transport unit, pharmacy staff, lab techs, security and more — so be sure to include everyone.

- Ask everyone to answer a 1-question survey, preferably using a survey platform so that information can be collected anonymously. The question would look something like this:

  Following a stressful event or incident at work, who [in your unit or department] would you turn to for support or comfort? Please provide the person's first and last name.

- Allow 1-2 weeks to gather responses before closing the survey.

- Examine the list of names. Depending on the number of peer supporters you want to train, you may need to prioritize whom to select. Criteria might include the frequency with which someone was nominated; representation across different shifts; and representation of a wide range of roles within the unit or department.

- Once you have a selection of names, you may find it beneficial to check with your organization's human resources team or the supervisors to verify that all individuals nominated are in good standing.

- Send each person a letter via email, congratulating and welcoming them to be a part of the peer support program. Be sure to include in your letter, the commitment and responsibilities of a peer supporter as well as the date of the training. Click here for a sample of this letter.

The "right" number of peer supporters

There is no "right" number of peer supporters. Here are some things to consider:

- Think about how many supporters you can train at one time. We suggest that you target a training session for 15 - 40 supporters if you are able to do in-person training sessions. Anything less than 15 may hinder the quality of the group discussion during the training and anything more than 40 might be difficult to manage.

- If the training will be done virtually, consider keeping this to a smaller number, perhaps no more than 25.

Consider how many people work in your pilot unit. You will want enough trained peer supporters so that no one supporter is overwhelmed with requests for help.

Peer support agreement

A peer support agreement is a document that outlines the responsibilities and confidentiality expectation of a peer supporter. Upon agreeing to join this program, peer supporters would be asked to sign the document. Click here for a sample. Your advisory committee can decide if a peer support agreement is appropriate for your institution.

Tips and considerations for training day

The primary goal is to equip peer supporters with the knowledge and resources they will need to be valuable sources of information for their peers. To make the most of everyone's time during the training, consider the following:

- **Agenda:** Map out the time allotted for each activity on the agenda. Here are two samples that may be helpful: one for an in-person training and one for a virtual training session. Invite people who can speak to the internal and external support resources you identified earlier in your scan. Allow sufficient time on the agenda for them to present on their services so that peer supporters are aware of helpful resources. When possible, hand out a printed version of these resources to peer supporters.

- **Registration:** Ask trainees to fill out a registration form. This will allow you to collect key information, including how they would like to be contacted by their peers when seeking support (e.g., phone call, text, email).

- **Seating arrangement:** When possible during in-person training sessions, avoid seating supervisors at the same table as their staff. This will help encourage honest and open conversations.

- **Packet:** Create a packet that includes all the important items for peer supporters such as training slides, a reference guide, brochures, training evaluation survey or support services information.

RECOMMENDED SEATING ARRANGEMENT

PRESENTATION SCREEN
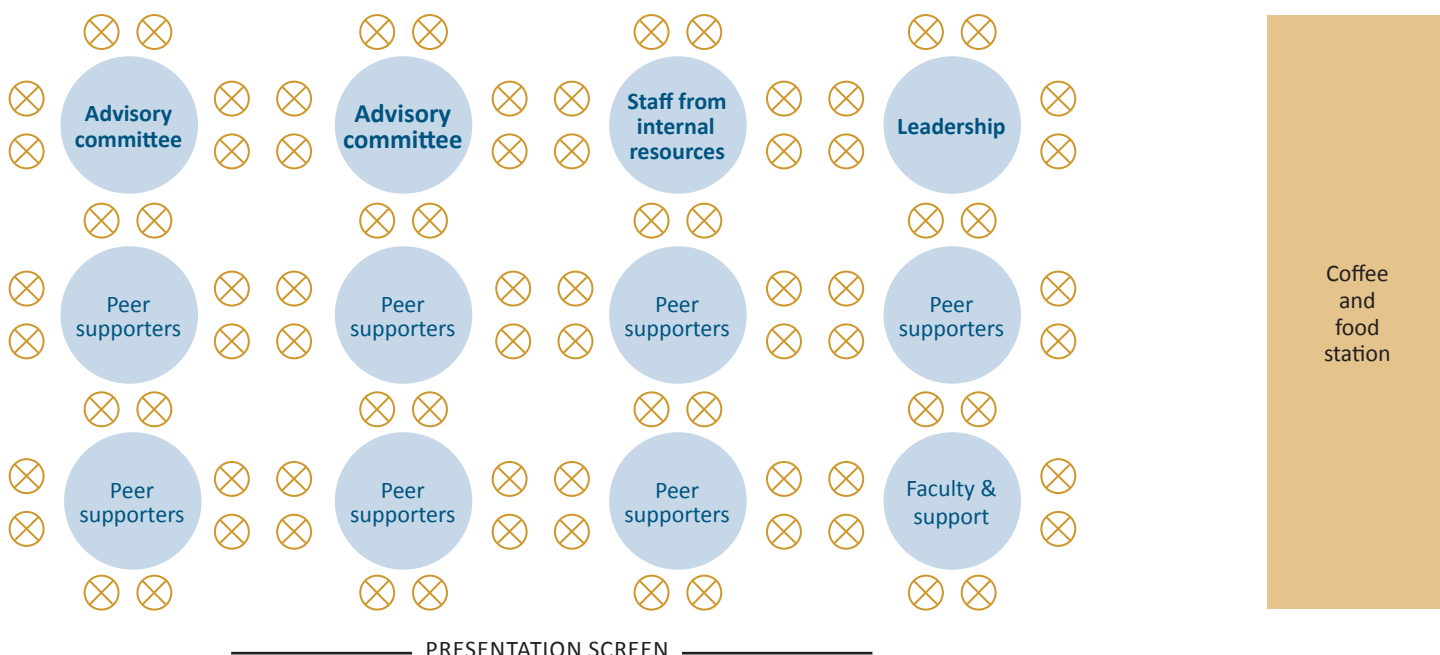
- **Incentives:** If possible, incentivize attendees to increase participation in the program and training.

  Below are some ideas to encourage participation:

  - Food: Provide breakfast, lunch or dinner as appropriate for in-person trainings, as well as snacks and coffee.
  - CEU/CMEs: Explore CEUs or CME credit for participants when applicable.
  - Certificate/badge: A certificate of completion or "Peer Supporter" badge acknowledges participants' efforts.

- **Training feedback:** Create a short survey to get feedback on your training, or to test participants' knowledge of the materials covered. [Click here for a sample](#).

Hardwiring your program

To be successful, peer support programs need to be fully integrated into the organization. Your advisory committee is well situated to discuss the best ways to do this. Which department of the hospital will take ownership of the program? How will peers connect with one another?

Decide where the peer support program will "live"

Start by placing ownership for the peer support program in the most appropriate department within your organization. Some hospitals situate peer support services within their Quality and Safety Departments to better integrate it with other quality improvement efforts and to afford confidential protections to participants. It is important for the advisory committee make this decision prior to the first training.

Develop a framework for connecting peers

Start by discussing the following questions:

- What cases or circumstances are likely to trigger the need for peer support?
- How will people access or request support?
- How will peer supporters know when there has been an incident where a peer(s) is in need of support?

Use your answers to these questions to develop a framework that will allow your trained peer supporters to know when they should initiate outreach to others in the unit. This is sometimes referred to as "activating" peer support.

Under these circumstances, leadership in a unit or at the hospital may want to alert peer supporters to an event. It is helpful to plan for those circumstances.

Consider creating an email or text chain with all peer supporters or developing another way for leadership or managers to notify peer supporters when there is an event.

In addition, there are times when an individual clinician or staff member may want to initiate a conversation with a peer supporter.

Make it as easy as possible for staff to know who the trained peer supporters are in their unit and how to reach them. Consider creating a page on your intranet about peer support with names and pictures of all peer supporters with their contact information. This way someone needed support can make the contact themselves.

Marketing and communicating effectively about your program will mean that everyone in the unit will have the information they need to make to use the peer support resource you are building.

Evaluation

Conducting an evaluation of your program's pilot has many benefits. An evaluation can help make a case for expanding peer support to other areas of the hospital by demonstrating its effectiveness. It can also help you see how well the program responded to any unforeseen circumstances and point to areas of potential improvement.

Program usage

Ideally, you would collect information that indicates if people are utilizing peer support and how they are accessing the supporters. It is also helpful to know the roles of people helped by peer supporters so that you will know more about who may be most in need of the services or if certain groups are reluctant to take advantage of the resource.

Peer support encounters can be tracked at regularly scheduled intervals (e.g. monthly) or after each encounter. For example, peer supporters can log the number of encounters they had, note whether they were for new events or a follow-up, specify the role of the staff member encountered and whether the peer supporter or the individual receiving support initiated the interaction. To preserve confidentiality and maintain trust in the program, no identifying information should be collected and only aggregated data shared. Click here for an example of the types of information you might collect.

The advisory committee can examine this data on a quarterly basis to identify trends. Is the program being utilized by some groups and not others (e.g. by nurses but not physicians)? Are there trends in program usage (e.g. are more individuals initiating encounters over time)? Do any of the trends identified call for changes in the program (e.g. training more peer supporters from off-hour shifts)? It will also let the committee know where they may need to target communication efforts. Finally, having metrics on the use of the program can help make the case for continued investment in the program.

Program effectiveness

Emotional trauma associated with difficult clinical outcomes can diminish job satisfaction, increase burnout and may undermine the quality of care provided to subsequent patients. Some data suggest that providing emotional support through trained peers is associated with better emotional recovery and a more robust patient safety culture in health care organizations.

You might find it helpful to evaluate whether the peer support program helps staff emotionally recover from clinically difficult events, affects their job satisfaction and influences their commitment to a positive patient safety culture.

An approach to evaluating your peer support program could include:

- Conducting a baseline survey of staff in the pilot unit that measures the emotional and work impacts of clinically difficult events. Here is a sample survey.
- After the program has been underway for a year, fielding a follow-up survey to examine changes. This survey can ask if staff used the peer support program, found it helpful, and probe perceptions of why staff would or would not use the peer support program.

It may also be useful to link the implementation of the peer support program to longer-term human resources outcomes (e.g. moderating turnover rates) or patient safety culture improvement efforts. A relationship between the peer support program and other desirable outcomes helps make the case for continued investment in the program.

Building and sustaining

It is a real accomplishment and very rewarding to complete the training for the first group of peer supporters. It will take time, however, for your organization to build a robust peer support program that everyone can count on.

Here are some suggestions to help you move your program from the training phase to longer-term sustainability.

Keep the advisory committee active

It might be tempting to disband the advisory committee once your peer support program is underway, but the group is well-positioned to continue guiding the program and oversee any improvements or changes that need to be made. You might reduce the frequency of committee meetings, but the group's members will continue to serve as a sounding board and champions of the program.

Support for the supporters

Peer supporters need support too. Plan on regular check-in meetings with all of your peer supporters. These meetings should provide a safe space for peer supporters to debrief about their experiences, talk about any challenging interactions and receive any help they may need. Remember that peer supporters can also experience some of the same traumas or challenges as their colleagues.

Consider hosting "support for the supporter" meetings between 4 and 6 times a year. In addition to making sure this group of volunteers is feeling equipped for their role, it can be a great way to elicit suggestions for program improvement. These meetings can be facilitated by an experienced member of your EAP, chaplaincy or social work offices, or by the program manager.

It is equally important to also ask them about topics they would like to learn more about and gauge interest in "refreshing" aspects of their initial training. Keeping them engaged and supported is one of the keys to a successful program.

Tracking peer support interactions

Tracking peer support interactions is a great way to evaluate your program, but it is also useful for overall program improvement. You should keep track of how well your program is utilized. One way to track utilization is described in the evaluation section.

QR CODE EXAMPLE FROM MASSGENERAL BRIGHAM SALEM HOSPITAL

Peer support tracking (sample)

This is an example based on the peer support tracking form from North Shore Medical Center. Use this a guide to create your own form to track confidential peer support encounters at your facility.

For more information on clinician and staff peer support programs in Massachusetts, visit www.BetsyLehmanCenterMA.gov/ClinicianSupport

Peer supporter (Enter YOUR name)

Your answer

Type of encounter

○ Initial

Expanding peer support throughout the hospital

Work with your advisory committee to develop a plan to offer peer support across your institution. You will repeat many of the same things you did in the pilot, but as you do so:

- Prioritize high incidence areas
- Work with leadership in each department/unit to ensure buy-in before implementing the peer support program and identify a champion in every area. Champions are people who believe in the program and are committed to helping it succeed.
- Make decisions about the pace at which you will add new departments or units to your hospital's peer support program
- Continue addressing the ongoing needs of the units where peer support is already established

Closing notes

This guidebook is supposed to be just that — a guide with a framework to implement a peer support program. Modifications may be needed to fit your culture or setting. The order of the work plan is meant to be fluid, and you may spend more time on one aspect of the program or need to go back and redo another area before moving forward. An iterative process should be expected. Finally, be sure to try to anticipate potential changes to your funding stream for this work and engage in contingency planning.

Acknowledgements

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For more information, contact the Peer Support Team at the Betsy Lehman Center for Patient Safety
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