

3. DESIGNING A PEER PROGRAM

READ MORE: PROGRAM SCENARIO 2

Community-based organization wants to engage HIV-positive individuals in care

About this scenario

Below is a program scenario and sample work plan that describes how a peer program may fit into an organizational setting that provides HIV services. This scenario comes from a community-based organization wanting to support clients' engagement in services.

The Smith County Service Program (SCSP) is a community-based organization (CBO) whose mission is to provide outreach and support services for people at risk or living with HIV/AIDS. The staff members provide outreach and prevention education to people at risk for HIV and refer them to counseling and testing services at a nearby clinic. If these adults test positive, the clinic refers them back to SCSP for case management services and education/support groups. At their recent consumer advisory board meeting, the group identified two areas for improving their services.

1. SCSP has been concerned with both the lack of referrals to the education/support groups as well as the inconsistent attendance at these groups. The support groups have been historically facilitated by a staff person who may or may not be living with HIV.

2. The case management program has seen an increase in their caseload, and has been struggling with meeting all the needs of their clients, specifically accompanying them to medical/health care visits. Case managers have HIV-positive clients who are in need of housing assistance, food vouchers, childcare assistance, and other support services. Case managers often are unable to follow up with their clients on clients' HIV medical visits.

The education/support group facilitators and the case managers have joint meetings at the agency. At a recent meeting, these areas for improvement were raised. The program manager asked the team to brainstorm some possible ways to address these areas. One idea was proposed: peers would join this team regularly to address any program challenges.

Support group facilitators, together with peers, felt that if peers were integrated into a co-facilitator role, there might be a greater likelihood for clients to stay engaged. The group also thought that if peers could take on the role of supporting clients in terms of accompanying them to their medical/health care visits, this would reduce the work burden of the support group facilitators.

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PEER PROGRAM PLAN

Goal: Increase HIV-positive clients' access to and engagement in support and medical services			
Objectives	Activities/Action Steps	Person(s) Needed	Evaluation Measures
1.1 Provide at least 2000 outreach encounters to at-risk HIV individuals, targeting substance users, homeless persons, MSM, women, and communities of color	<ul style="list-style-type: none"> • Conduct at least 8 education and outreach activities at the agency and in the community per week. • Identify and build relationships with at least 8 other social service agencies (food agencies, housing organizations, substance treatment providers, etc) to outreach to at-risk populations • Refer at-risk individuals to HIV counseling and testing at the clinic 	Prevention education coordinator and peer outreach workers	<ol style="list-style-type: none"> 1. Number of prevention education activities 2. Number and demographics of outreach encounters 3. Number of partner agencies conducting monthly prevention/education sessions 4. Number of referrals to counseling and testing at the clinic
1.2 Provide at least monthly case management services to 100% of HIV-positive newly diagnosed or lost-to-follow-up individuals referred from the clinic	Hold monthly meetings with clinic staff to identify newly diagnosed or lost-to-follow-up HIV-positive clients.	<ul style="list-style-type: none"> • HIV case management supervisor • Peer • Case manager • Clinic staff 	<ol style="list-style-type: none"> 1. Number/demographics of HIV-positive clients referred to HIV case management services 2. Number/demographics of HIV-positive clients enrolled in HIV case management services 3. Number of HIV-positive clients with case management plans and service goals 4. Number/types of services provided

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Objectives	Activites/Action Steps	Person(s) Needed	Evaluation Measures
1.3 Get 80% of HIV-positive clients to attend weekly support groups	<ul style="list-style-type: none"> • Conduct at least 2 groups/week around HIV care and treatment adherence, positive living, resources, and other consumer-identified topics • Recruit HIV-positive clients into support groups 	<ul style="list-style-type: none"> • Peer leader • Staff support group leader • Program manager 	<ol style="list-style-type: none"> 1. Number and topics of support groups 2. Number of HIV-positive clients who attend support groups
1.4 Link 80% of HIV-positive clients into medical and social support services	<ul style="list-style-type: none"> • Conduct reminder and follow-up phone calls regarding medical and social service appointments • Accompany HIV-positive clients to medical and social service appointments 	<ul style="list-style-type: none"> • Peers • Case managers • Clinic staff 	<ol style="list-style-type: none"> 1. Number of HIV-positive case-managed clients with at least 2 medical visits in measurement year

This “Read More” section accompanies [Section 3 Designing a Peer Program](#), part of the online toolkit *Building Blocks to Peer Program Success*. For more information, visit http://www.hdwg.org/peer_center/program_dev.