

Peer Up! Program Background

In May 2014, the Centers for Medicare and Medicaid Services' (CMS) awarded a Special Innovation Project (SIP) to the Mid-Atlantic Renal Coalition (MARC) to determine the effectiveness of peer mentoring among patients with end-stage renal disease (ESRD). Specifically, a single-arm pilot intervention study, the SIP sought to determine if peer mentoring could reduce costly and unnecessary hospitalizations through improved self-management.

The project team began with a literature review and environmental scan to identify recent or current peer mentoring programs for chronic-disease management, including ESRD. While research has demonstrated the benefits of peer-to-peer (P2P) mentoring programs for patients with various chronic diseases such as diabetes, heart disease, and cancer, limited attention has been given to investigating the benefits for patients with ESRD. Additionally, no studies have examined the effectiveness of ESRD-patient mentoring/P2P programs in reducing costly hospitalizations; nor had anyone gathered lessons learned or taken steps to transfer the knowledge gained to ESRD Network organizations, dialysis facilities, patients, caregivers, and other stakeholders.

Guided by findings of the literature review and environmental scan, the project team developed and implemented a new peer mentoring program called *Peer Up!* The program goal was to help patients receiving incenter hemodialysis treatments better self-manage their disease and thereby decrease hospitalizations. *Peer Up!* was implemented and evaluated at University of Virginia (UVA) Lynchburg Dialysis, March though June 2015.

The *Peer Up!* program included mentor training, mentee and mentor pairing, kick-off mixers, ongoing meetings, mentor training boosters, and a final celebration mixer. It was preceded by a social marketing effort, which included a program naming contest and recruitment of patients as mentors and mentees.

The program naming contest helped to build excitement and interest about the program as all patients and staff were invited to participate and submit names. These proposed names were listed on a ballot on which patients and staff could vote for their favorite. Because there was a tie, two winners were selected. The first winner, a facility social worker, submitted the name "Peer Up!" The second winner, an in-center hemodialysis patient, submitted "Together Makes Us Better." The two submissions were combined to create the official program name: Peer Up! Together Makes Us Better.

Next, the project team recruited in-center patients to participate in the program by working with facility staff to obtain nominations for *Peer Up!* participants, either as mentors or mentees. Patients were also encouraged to volunteer for the program.

All peer mentors were trained using the developed program curriculum, included in this toolkit, before their first interaction with mentees. During the trainings, mentors participated in various activities designed to teach and have them practice skills such as active listening, using open-ended questions, avoiding giving medical advice, and respecting confidentiality. (See the toolkit's "Mentor Training" section for details.)

The *Peer Up!* program launched in March. Twenty-three peer pairs participated in the program, meeting over the course of four months. Pairs were encouraged to communicate with each other at least four times a month, with at least two of those interactions being in person. The remaining meetings could be by phone, email, or text. Mentors completed and submitted a contact log after each interaction, capturing information such as the length of the visit, location, topics discussed, use of any informational materials, and any referrals to staff.

MARC completed data analysis of the *Peer Up!* program evaluation, including both process and outcome measures, in September 2015. Data from this study, as well as highlights from the *Peer Up!* program implementation, can be found in the documents contained in this section of the toolkit. MARC plans to share these findings with key stakeholders and to further promote and facilitate the distribution of *Peer Up!* to dialysis facilities, ESRD Networks, and patients across the country.

Additional materials on the *Peer Up!* program can be found elsewhere in this easy-to-use, customizable online toolkit.