Key Points for Talking with Facility Leaders

Need for a Peer Mentoring Program

Use this tip sheet to introduce and build support for the Peer Mentorship program with your administrator, medical director, board of directors, or other leadership members.

Prepare to make the case for a peer mentoring program at your facility by looking at your patients’ and facility’s needs. Identify down two or three reasons. Be as specific as possible. These needs may include:

- We have a number of new patients with limited understanding of and information about end-stage renal disease (ESRD) and dialysis.
- Many of our patients are concerned about reducing and preventing infections.
- Patients and/or staff have requested more patient-education sessions and/or opportunities for patients to interact with each other.
- Some patients are missing treatments and/or not adhering to their treatment plans and could use guidance from someone else experiencing ESRD and dialysis.
- Implementing a peer mentoring program will help our facility meet certain patient engagement requirements of Centers for Medicare & Medicaid Services (CMS) Quality Incentive Programs (QIPs).

Benefits of Peer Programs

Point out that peer mentoring programs have been used for decades to help patients with a chronic disease connect with and learn from one another. Research shows that such programs can have multiple benefits including:

- Increased patient engagement and empowerment
- More skills (e.g., following a specified diet, exercise, medication adherence)
- Improved quality of life
- Improved mental health
- Improved clinical measures
- Increased socialization
Opportunity to Support the Facility’s Mission

Identify opportunities to discuss the program in the context of the facility’s own mission statement, strategies, and values (i.e., how it connects to the bigger picture).

Peer Mentorship Proven Benefits

Share results. If you do not yet have your own program findings, please reference to the Peer Mentorship Role and Benefits flyer provided by the IPRO ESRD Network.

Mentee increases in:
- Knowledge
- Self-efficacy
- Perceived social support
- Dialysis social support
- Treatment attendance

Mentor increases in:
- Knowledge
- Dialysis social support
- Dialysis self-management

Frequently Asked Questions

Q: What does this program entail?
A: The program is an extension of the patient-centered approach to care. Program participants (i.e., patients) are paired together so that they can share their experiences and knowledge, discuss topics related to self-management and support, and develop problem-solving skills, all of which could help improve their outcomes.

Q: How much will the program cost the facility?
A: The Peer Mentorship is free and provides ready-to-go materials in a comprehensive toolkit. The facility will need to devote some staff time and resources at the onset of the program; however, those staff commitments decrease over time as the core of the program is peer interaction and patient engagement. Financial costs include printing and copying. Optional financial costs include refreshments and program incentives (e.g., T-shirts, water bottles, pens). The most important thing to know is that the resulting benefits to patients far outweigh the costs. Research based on similar peer mentorship programs show that mentees missed fewer treatments, and mentors reported improved self-management. The program will also help the facility more closely comply with the CMS QIPs.

Q: Who will lead the program?
A: The program template strongly suggests identifying one staff member, or a small group of staff (i.e., planning committee), to serve as dedicated program leaders, as this role is critical to the program’s success. With the Peer Mentorship ready-to-go materials, preparation time for launching the program is minimal, and implementation can be spread across several staff or a small team to prevent overburdening one staff member. Eventually, as more patients participate...
in the program, they can begin to take on some of the program leadership responsibilities, making the program less time-intensive for staff and even more peer-focused.

Q: How will peer mentors be trained?
A: The ESRD Network will provide the facility with access to IPRO Network E-University which is an online learning management system. There are 6 training modules designed for patients. The first two modules, Talking Effectively with Another Patient and Mentoring to Support Choices, are required foundational modules; additional modules are optional. Examples of the designed support specific improvement objectives are listed below:

- Talking Effectively with Another Patient
- Mentoring to Support Choices
- Discussing Transplant as an Option
- Helping Peers Plan for a Vascular Access
- Home Dialysis Option
- Prevention Infections

Q: How much staff time will it take to run the program?
A: Once the initial mentor training is completed, the program lead can expect to commit approximately two hours per week to oversee the program. This includes monitoring mentors and mentees, addressing any issues that arise, keeping staff and management updated on Peer Mentorship program progress, and collecting assessment and evaluation instruments (if applicable). Keep in mind that this is an estimate — and this may vary depending on the number of participants in the program and the issues faced within the pairs.

Q. What research articles support the benefits of implementing a Peer Mentorship program in my facility?
A: Articles to include:
1. NKF Peer Mentoring Program: Overview and Lessons Learned
   <https://www.kidney.org/sites/default/files/v40b_a3.pdf>
2. Peer Mentoring Reduces Missed Dialysis Treatments
   <https://www.nephrologynews.com/peer-mentoring-reduces-missed-dialysis-treatments/>
4. A Practical Approach to the Treatment of Depression in Patients with Chronic Kidney Disease and End-Stage Renal Disease.  
