



Tips and Strategies for Pair Management

Peer Up! relies on a team approach to ensure program success. Program staff work closely with facility dietitians, social workers, nurses, and patient care technicians to ensure that all patients have continued support from start to finish. Checking in with mentors and mentees regularly will help to ensure that issues are identified and dealt with in a timely manner so participants get the most out of the program.

Peer Up! program staff make every effort to match patients effectively (see “Program Management” section for pairing procedures). However, situations might arise in which staff may need to intervene to support the pair. Try to keep it somewhat light and encourage participants to try meeting again or consider being paired with another person. Always reinforce that some people just do not hit it off, and no one is to blame. At times, it may be necessary to dissolve a pair and reassign if they are willing.

The tips in this guidance document will help program staff identify some of the common reasons that they might need to intervene. Addressing these matters in a timely and consistent manner will ensure that the *Peer Up!* program benefits all participants.

How to Support Effective Pairs

The “Program Management” section of the toolkit has details on pairing procedures and

management. Here are a few highlights of how staff might support pairs:

- Check in with pairs regularly—weekly or biweekly if possible. Ensure that mentees feel supported by checking in with them one-on-one.
- Review peer interaction logs (located in the “Assessment and Evaluation” section of the toolkit) to identify any issues or successes mentors report on.
- If a separate meeting area is identified within the facility, ensure that peers feel comfortable there and the area is as private as possible.
- Ensure that informational materials and supplies are available to mentors and mentees.
- Ensure that mentors have the information they need to feel confident in talking with mentees.
- Suggest alternative solutions if mentors have difficulty meeting or contacting mentees (e.g., hold meetings chairside to ease logistical problems).

Some mentees may sign up to participate, but not return calls or seem to avoid meeting with their assigned mentor. In these cases, it is very important to encourage the mentor to have a bit of a “thick skin” and not to take it personally. We had this experience in our program, specifically with newer patients who were feeling overwhelmed with starting dialysis. Some of the mentors took to meeting chairside, when the mentee was a captive audience. After mentors did this a few times, some of the mentees began to see the value of having a mentor and then meetings were held other

places. For some, though, meeting chairside was just more convenient and offered great teaching opportunities. For example, the mentor could explain why a machine might alarm.

When to Intervene

Staff involved in the *Peer Up!* program are well-positioned to recognize peer relationship challenges and provide guidance and support to pairs. A facilitator may need to work closely with a pair for any of the following reasons:

- The participants are incompatible (e.g., different goals, levels of companionship desired, lack of common interests).
- One or both participants need more direction in how to make the most of the program.
- One or both participants need help with communication.
- One or both participants misunderstand the purpose of the program.
- One or both participants share that they are not benefiting from the program.

Identifying problems early and working with the pair to find a solution is imperative. The earlier the situation is addressed, the better the chance that trust will be established between the mentor and mentee and that the pair will wish to continue in the program and benefit from peer mentoring.

When to Dissolve a Pair

Occasionally, despite the best efforts of program staff, a pair might not work out. Common reasons that might occur include:

- There is a complaint or concern from a mentee/mentor about their assigned peer.
- One or both participants seek resources beyond the scope of the program (e.g., request financial support, medications, etc. from peer).
- One or both participants are not able to commit to in-person meetings or stop showing up

for meetings (e.g., unreturned phone calls, conflicting schedules, logistical issues).

- One or both participants cross a relationship boundary or break confidentiality (e.g., make requests that are unrelated or beyond the goals of the program, disclose personal details without consent).
- One or both participants cannot continue the program for any reason (e.g., withdrawn, removed, lack of participation).
- A mentor or mentee becomes gravely ill, is hospitalized, or dies.

After a Pair Is Dissolved

If a pair is dissolved, consider the suggestions below, which are based on some of the most common problems identified in the *Peer Up!* program:

- Assess the mentor's and mentee's desire to stay in the program. If they'd like to continue, look at other pairing options.
- If transportation, common interests, or different goals are the problem, consider pairing the mentor and mentee with another person in the *Peer Up!* program.
- If a mentor or mentee becomes gravely ill, is hospitalized, or dies, offer grievance counseling through a social worker or other facility staff who regularly provides this service.
- If confidentiality or relationship boundaries are broken, discuss the issue with the program participant and facility administration staff. A decision will need to be made as to whether or not the mentor, mentee, or both needs additional information on privacy and boundaries to be able to continue in the program or if one or both should be removed from the program.

Although we expect that you will have minimal struggles, we encourage you to consider these tips and suggestions should you encounter any problems so that you may see the success that comes from strong mentor-mentee relationships built through the program.