PEER VISITATION 101: TRAINING AND FACILITATING VISITS

October 2024

PRESENTED BY

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AGENDA

Peer Visitation Series Overview

Components to PV Training

Time for Questions

WHAT IS YOUR BIGGEST CONCERN OR BARRIER TO STARTING A PEER VISITATION PROGRAM?

GOALS FOR THIS WEBINAR

Provide an outline for Peer Visitation Training

Talk to fellow TSN Coordinators about your plan and get some feedback.

Leave with at least 2 steps you can take before our next session.

TSN PEER VISITATION AT-A-GLANCE

- 211 TSN Centers listed in TSN Coordinator Directory
  - 38 Trauma Centers offer Peer Visitation
  - 10-15 Trauma Centers in the planning process

PEER VISITATION 101 SERIES

Session I	Session II	Session III
• Establishing a group of Peer Visitors	• Training and facilitating visits	• Trouble Shooting, Q&A: TSN Coordinators with active Peer Visitation

THE TRAUMA EXPERIENCE

Trauma can be isolating.

In addition to being injured and in pain, patients surviving trauma are thrust unexpectantly into a new world.

Trauma alters routines, roles and relationships.

Few trauma survivors have friends or family members that have shared their experience.

TSN Peer Visitors are in a unique position to normalize the trauma patient's experience to offer hope and perfective.

BENEFITS OF PEER VISITATION

PEER VISITATION CAN BENEFIT PATIENTS, FAMILIES AND THE TRAUMA TEAM.

Patients and families can glean hope from interacting with someone who has injure and moved on to recover.

Patients have the opportunity to tell their story to someone that understands.

Hospital staff members care deeply about their patients but cannot always dedicate the time to this important task of supporting the patient, emotionally.

In the acute care environment, it is not often that the staff members can see a patient thriving in recovery. This can often be very heartwarming for the staff members.

PART I RECAP

- A Peer Visitor is someone who has experienced traumatic injury and is now living a productive life.
- Peer Visitors are sensitive listeners who use their training and communication skills to support other support another patient's recovery.
- A peer visitor is **not** a professional counselor, therapist or advisor (medical, legal or otherwise).
- Peer Visitation is widespread!
- Who is ready, who is not ready?
- Costs, resources, recruitment

ESTABLISHING A PEER VISITATION PROGRAM IN YOUR HOSPITAL

Session 2

Training and Facilitating Visits

TRAINING

Training as a Hospital Volunteer

- Important part of the training
- Working with your hospital volunteer office is an important step in establishing your program

Peer Visitor Training

- 2-day training
- 3-hour condensed training
- Tailored to your center

TRAINING AS A HOSPITAL VOLUNTEER

Develop a relationship with the hospital volunteer staff.

Meet with them to talk about this program.

Include an outline of these steps to potential TSN Peer Visitors, so they know what to expect.

PEER VISITOR TRAINING

PV TRAINING OVERVIEW

Topics

- Identify the role of the PV
- How to present oneself in a helpful manner
- Discuss emotional and physical recovery
- Listening skills
- Handling sensitive issues

TIPS FOR SUCCESSFUL TRAINING

- Post the agenda, even circulate it before the training
- Focus the training on the current patient.
- ”A peer visit is not about you, it’s about the person you are visiting.”
- Take breaks as needed.
- Paired work, role plays and discussions are very effective!

LOGISTICS

- Supplies
  - Breakfast and/or lunch
  - Water, soda, snakes for breaks
  - Pens, paper, workbook
  - Completion Certificate
  - Training Evaluation

PV TRAINING AGENDA

- Role of a Peer Visitor
- The Visit
  - Logistics
  - Meeting the patient
- Characteristics of a Peer Visitor
- Communication and Practice
- The Recovery Process: The Survivor's Journey
- The Recovery Process: Role of the Visitor
- Cultural Concerns
- Spirituality & Recovery
- Difficult Issues, Self Care, Tour
- Closing and Evaluations

ROLE OF THE PEER VISITOR

The role of the peer visitor is to listen and support the newly injured trauma survivor and their family.

“A peer visit is not about you, it is about the person you are visiting.”

80/20 Rule

THE VISIT

Logistics

- How will they know who to visit?
- How are patients or families screened and prepared for the visit.
- What information will be given and how to maintain confidentiality.

You will be given a sheet of information about your patients that will look like the form below.

Room Number	Name	History and Information
475-02	John Smith	47 y.o. male; MVC- leg injuries; LOS: 3 days Lots of family in the room, will probably be d/c to home next week
756-01	Amy Jones	21 y.o. female; fall from balcony- TBI; LOS 23 days; patient beginning to follow commands; mother looking at rehab facilities- interested in talking about Mount Vernon Rehab

Some abbreviations

MVC Motor Vehicle Crash
LOS Length of stay
TBI Traumatic Brain Injury
d/c Discharge

THE VISIT

Meeting the Patient

- Practice the beginning of a visit.
  - Confirm patient identity, introduce yourself. Ask if it is a good time to visit.
- When not to visit a patient.
- Understanding off-limit activities.
- Learn about resources available to patients in the hospital.

CHARACTERISTICS OF PEER VISITORS

SKILLED LISTENERS

COMFORTABLE DISCUSSING TRAUMA AND OFFERING SUPPORT

UNDERSTAND THE RECOVERY PROCESS

MAINTAIN CONFIDENTIALITY

NON-JUDGMENTAL

COMMUNICATION AND PRACTICE

How to practice active listening

- Make eye contact, listen, ask questions, reflect, normalize, etc.

Empathetic Statements

- "I hear you saying that it has been tough to be away from your children. I'm sure that is hard."

Role Play

- Advice-seeking patient
- Shy or slow talker
- Depressed patient
- Inappropriate patient

THE RECOVERY PROCESS

Survivors Journey

&

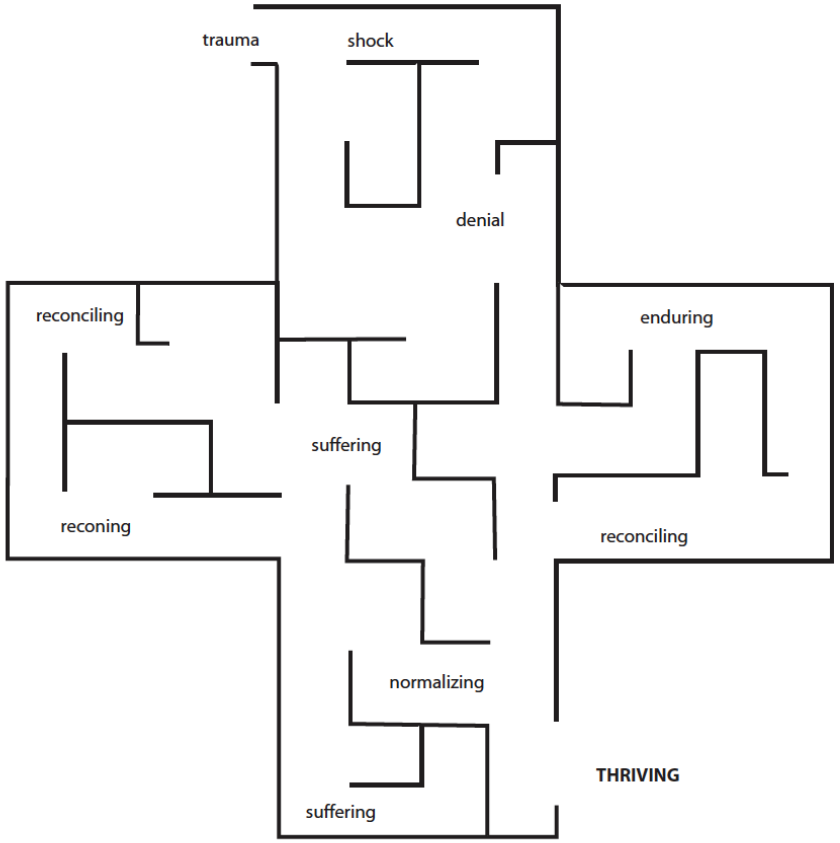
Role of the Visitor

Section 8: The Recovery Process: The Visitor's Journey

Purpose

- To learn about the varied responses to trauma
- To identify phases of recovery that participants have experienced
- To identify examples of resilience, coping and successful recovery

Worksheet 8a
The Recovery Maze



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Worksheet 8b
The Recovery Process

Phase	Characteristic	Description
Enduring	Surviving trauma and initial hospital treatments	Hanging on; focusing on present to get through the pain and confusion; blocking out distress about future; consciously not dealing with the full meaning of the loss; may refuse a visit
Grief and Suffering	Questioning: Why me? How will I…? Reacting to the losses associated with the trauma	Intense feelings about the losses; fear, denial, anger, frustration, guilt and loneliness; vulnerable and confused; emotional anguish about loss of self
Depression	Feeling hopeless and helpless about future, recovery, life changes	Low feeling that may last weeks, months or years. Affects body, mood and thoughts. People with depressive illness cannot merely "pull it together."
Reckoning	Becoming aware of new reality	Coming to terms with the extent of the trauma; accepting what is left after trauma; implications for the future, such as role changes, life changes; minimizing own losses in comparison to others'
Reconciling	Putting the trauma in perspective	Regaining control; increased awareness of one's strengths and uniqueness; more assertive; taking control of one's life; self-management of illness and recovery; changed body image; need for intimacy
Normalizing	Reordering priorities	Bringing balance to one's life; establishing and maintaining new routines; allowing priorities rather than the loss to dominate; advocating for self
Thriving	Living life to the fullest	Being more than before; trusting self and others; confidence; being a role model to others (this does not generally occur in the hospital and does not occur for everyone)

CULTURAL CONCERNS, SPIRITUALITY & RECOVERY

Cultural Norm	Culture 1	Culture 2	Culture 3
Personal space and touch			
Sense of privacy			
Independence vs. reliance on others			
Role of women			
View of destiny vs. personal control			

DIFFICULT ISSUES

Provide Peer Visitors with the tools to handle difficult issues.

Situations include

Silence	Intimacy	Insurance/financial difficulties	Well intentioned friends	Patients upset with their medical care.	Patients who have suffered a loss in the trauma

SELF CARE, TOUR AND EVALUATION

Give your peers the option to say no, to a peer visit. For example, if they are having a bad day or a setback, they may not be up for supporting someone in that moment.

Tour the Unit

Ask for feedback

LAST THOUGHTS

Once you get your first peer visitor, invite them to help you train new peers!

Training can be customized to the peer.

Training happens during the visit.

Facilitating Visits
During the day
During the evening
As needed
Scheduled weekly (every Tuesday at noon)

RESOURCES

TSN Website

Coordinator Resources

Peer Visitation

QUESTIONS?

WHAT TWO STEPS CAN YOU TAKE BEFORE SESSION 3?

QUESTIONS?