

# UNDERSTANDING PEER WORKER AND NURSE COLLABORATION IN FRONTLINE HEALTH SERVICE DELIVERY: A SCOPING REVIEW

## Authors:

Hollingdrake O<sup>1</sup>, Warzywoda, S<sup>1</sup>, Paino E<sup>1</sup>, Phillip A A<sup>2</sup>, Dean J<sup>3</sup>, Wojciechowski L<sup>4</sup>, Doyle M<sup>4</sup>, Hassall M<sup>5</sup>, Currie J<sup>1</sup>, River J<sup>6</sup>.

<sup>1</sup>Queensland University of Technology, <sup>2</sup>Australian Red Cross Lifeblood, <sup>3</sup>The University of Queensland, <sup>4</sup>Queensland Positive People, <sup>5</sup>ASHM Health, <sup>6</sup>University of Technology Sydney,

## Background:

Up to 70% of older people living with HIV (PLHIV) experience multimorbidities. With the complexity of navigating Australia's health system, peer work and nursing roles can improve health outcomes for PLHIV. No existing studies have explored how these two disciplines might work together to optimise access to healthcare for older PLHIV. To address this gap, this multiphase research aims to use evidence and a co-design approach to develop a *Peer worker-Nurse Partnership Model of care* that is sustainable, scalable and adaptable to different service settings.

## Methods:

This paper reports on phase one, a scoping review and narrative synthesis, which was undertaken to examine the tensions and facilitators of peer worker and nurse collaborations in frontline health service delivery. Sixteen studies from different service contexts within six country settings were included. The findings will inform phase two, a qualitative study exploring Australian peer worker and nursing roles in service delivery, navigation, and support for older PLHIV; and phase three, co-design and co-evaluation of a *Peer worker-Nurse Partnership model*.

## Results:

Peer worker and nurse collaborations were supported when peer workers and nurses understood each other's roles and built working relationships. However, power struggles could hamper collaboration. Tensions arose when nurses viewed peer workers as helpers rather than team members, when the ethos of peer worker roles, including relational work, was misunderstood, or when confidentiality and professional boundaries were questioned. Underpinning successful collaborations were opportunities for regular and open communication, both formal and informal, and identification of flexible and strengths-based ways of working together.

## Conclusion:

This research identified that successful peer worker and nurse collaboration requires acknowledgement of power dynamics and dominant cultures. The *Peer worker-Nurse Partnership Model* must be co-designed and incorporate strategies that help create inclusive practice environments, allowing for flexible and complementary work, open communication, and supportive organisational governance.

## Disclosure of Interest Statement:

*This research received funding from the Carla Patterson Memorial Award (Queensland University of Technology). No pharmaceutical grants were received in the development of this study.*