VETERANS HEALTH ADMINISTRATION

Whole Health in Your Life: New Perspectives

Prepared Under Contract to the VHA by Pacific Institute for Research & Evaluation with the University of Wisconsin-Madison.

April 1, 2018

PARTICIPANT MANUAL
Whole Health in Your Life: New Perspectives

### AGENDA

#### DAY 1 - MORNING

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<tr>
<th>Time</th>
<th>Topic/Title</th>
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<tbody>
<tr>
<td>7:30am – 8:00am</td>
<td><strong>Registration</strong></td>
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<tr>
<td>8:00am – 9:15am</td>
<td><strong>1. Introductions</strong></td>
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<td></td>
<td>• Leadership Welcome</td>
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<td></td>
<td>• Introduction to the Course Materials</td>
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<td>• Community Agreements</td>
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<td>• Large Group Introductions</td>
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<td>• Whole Health Bingo</td>
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<td>• Setting Your Intentions</td>
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<tr>
<td>9:15am – 9:20am</td>
<td><strong>Short Break</strong></td>
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<td>9:20am – 10:15am</td>
<td><strong>2. Mindful Awareness</strong></td>
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<tr>
<td></td>
<td>• Introduction to Mindful Awareness</td>
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<td>• Mindful Awareness Research</td>
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<td>• Mindful Awareness Experience: Breathing</td>
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<td>• Large Group Debrief</td>
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<tr>
<td></td>
<td>• Video: <em>Snack Attack</em></td>
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<tr>
<td>10:15am – 10:30am</td>
<td><strong>Break</strong></td>
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<tr>
<td>10:30am – 11:30am</td>
<td><strong>3. Whole Health Communication Skills</strong></td>
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<tr>
<td></td>
<td>• Elements of Communication: Presence, Listening, Reflection</td>
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<td></td>
<td>• Video: <em>Empathy: The Human Connection to Patient Care</em></td>
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<td>• Small Group Exercise: Listening</td>
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<td>• Large Group Debrief</td>
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<tr>
<td></td>
<td>• Video: <em>It's Not About the Nail</em></td>
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<tr>
<td>11:30am – 11:45am</td>
<td><strong>Lunchtime Activity: Introduction and Extra Time</strong></td>
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<tr>
<td>11:45am – 12:45pm</td>
<td><strong>Lunch</strong></td>
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**DAY 1 - AFTERNOON**

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<tr>
<td>12:45pm – 1:30pm</td>
<td><strong>4. Burnout and Resilience</strong></td>
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<td>- Superhero Origin Stories</td>
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<td>- Assessing Burnout and Health at Work</td>
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<td>- Resilience Tools and Skills</td>
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<td>- Small Group Discussion: Resilience</td>
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<td>- Large Group Debrief</td>
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<tr>
<td>1:30pm – 2:00pm</td>
<td><strong>5. Stage I: Exploring My Mission, Aspiration, Purpose (MAP) &amp; Values Clarification</strong></td>
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<tr>
<td></td>
<td>- The Four Stages of the Whole Health Process</td>
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<td>- Small Group Listening Activity: Exploring Aspirations</td>
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<td>- Video: <em>What Do You Live For?</em></td>
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<td></td>
<td>- Complete the First Part of the PHI</td>
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<td>2:00pm – 2:10pm</td>
<td><strong>Short Break &amp; Movement Activity</strong></td>
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<tr>
<td>2:10pm – 3:00pm</td>
<td><strong>5. Stage I (Cont’d): Exploring My MAP &amp; Values</strong></td>
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<td>- Values and Values Conflicts</td>
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<td>- Faculty Demonstration</td>
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<td>- Triad Exercise: Exploring Mission, Aspiration, Purpose</td>
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<td></td>
<td>- Large Group Debrief</td>
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<tr>
<td>3:00pm – 3:10pm</td>
<td><strong>Break</strong></td>
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<tr>
<td>3:10pm – 4:20pm</td>
<td><strong>6. Stage II: Assessing Components of Health and Choosing a Focus</strong></td>
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<td></td>
<td>- The Areas of Self-Care</td>
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<td>- Complete the Second Part of the PHI</td>
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<td>- Enhancing Your Skills</td>
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<td>- Faculty Demonstration</td>
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<td>- Importance and Confidence Rulers</td>
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<td>- Triad Exercise: Assessing Components of Health and Choosing a Focus</td>
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<td>- Large Group Debrief</td>
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<tr>
<td>4:20pm – 4:30pm</td>
<td><strong>Wrap Up, Overnight Assignment and Pulse Checks</strong></td>
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<tr>
<td>4:30pm</td>
<td><strong>End of Day 1</strong></td>
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<th>Time</th>
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<tr>
<td>7:30am – 8:00am</td>
<td>Registration</td>
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<td>8:00am – 9:15am</td>
<td><strong>7. The Vision</strong></td>
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<tr>
<td></td>
<td>- Video: <em>Introduction to Whole Health</em></td>
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<td></td>
<td>- Personalized, Proactive, Patient-Driven</td>
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<td></td>
<td>- Reflections on Patient-Centered Care</td>
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<td>- Defining Whole Health</td>
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<td>- Elevator Speeches</td>
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<td>- The Whole Health System</td>
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<td>- Large Group Debrief</td>
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<tr>
<td>9:15am – 9:30am</td>
<td><strong>Short Break &amp; Movement Activity</strong></td>
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<td>9:30am – 10:45am</td>
<td><strong>8. Stage III: Planning for Action</strong></td>
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<td></td>
<td>- Goal Setting/Action</td>
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<td>- Exploring Barriers and Challenges</td>
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<td>- Accountability</td>
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<td>- Video: <em>Arthur’s Amazing Transformation</em></td>
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<td>- Faculty Demonstration</td>
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<td>- Triad Exercise: Planning for Action</td>
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<td>- Large Group Debrief</td>
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<tr>
<td>10:45am – 11:00am</td>
<td><strong>Mindful Awareness Activity: Mindful Eating</strong></td>
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<td>11:00am – 11:15am</td>
<td><strong>Break</strong></td>
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<tr>
<td>11:15am – 12:30pm</td>
<td><strong>9. Resources and Referrals</strong></td>
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<td></td>
<td>- Resources for Health Planning</td>
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<td>- Complementary and Integrative Health (CIH)</td>
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<td>- Small Group Discussion: CIH</td>
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<td>- Large Group Debrief</td>
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<tr>
<td>12:30pm – 1:30pm</td>
<td><strong>Lunch</strong></td>
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<td>Time</td>
<td>Topic/Title</td>
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<td>1:30pm – 2:15pm</td>
<td><strong>10. Stage IV: Executing the Action</strong>&lt;br&gt;  - Lessons Learned&lt;br&gt;  - Reassessing My Action Plan&lt;br&gt;  - Follow-Up Plans&lt;br&gt;  - Faculty Demonstration&lt;br&gt;  - Triad Exercise: Executing the Action&lt;br&gt;  - Large Group Debrief</td>
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<tr>
<td>2:15pm – 2:30pm</td>
<td><strong>Break</strong></td>
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<tr>
<td>2:30pm – 3:45pm</td>
<td><strong>11. Next Steps: Personal and Professional Development</strong>&lt;br&gt;  - Clinical Demonstration&lt;br&gt;  - Small Group Discussion: Relating This to Our Work&lt;br&gt;  - Large Group Discussion: Implementation&lt;br&gt;  - Success Stories&lt;br&gt;  - Large Group Q&amp;A</td>
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<tr>
<td>3:45pm – 4:00pm</td>
<td><strong>Mindful Awareness Activity: A Compassion Practice</strong></td>
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<td>4:00pm – 4:30pm</td>
<td><strong>Closing Circle and Evaluations</strong></td>
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<tr>
<td>4:30pm</td>
<td><strong>End of Course—Thank You!</strong></td>
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Coming out of 15 years of martial arts training and teaching, Vinny began developing his interest in integrative health and healing as an undergraduate at Boston University, studying biology as well as East Asian Studies, with a focus on Chinese language and culture. Studying abroad in China he had the opportunity to explore and practice Chinese medicine. He then spent a year studying traditional Chinese medicine at the New England School of Acupuncture prior to attending the University of Massachusetts Medical School in Worcester, MA. During medical school he partnered with local practitioners of integrative therapies to host an annual Complementary and Integrative Therapies Health Expo. He also collaborated with the UMass Cancer Center to integrate mind-body therapies into a weekly student-led meeting for breast cancer survivors and their support persons. With a desire to care for people in their entirety—body, mind, spirit, families, and communities—he eagerly pursued training at the University of Wisconsin Department of Family Medicine and Community Health (DFMCH), completing both his family medicine residency training and then the Academic Integrative Health Fellowship, offered within the same department. He has completed medical acupuncture training through the Helms Medical Institute, a Mindfulness Teaching Internship through the University of Wisconsin Mindfulness Program, and the University of California-San Diego Mindfulness Teacher Training Intensive. He currently practices as a family physician and integrative health consultant through the University of Wisconsin’s DFMCH in Madison, WI. Vinny’s research has focused on developing and teaching mindfulness training programs for resident physicians.

Vinny is blessed to have been married to his wife, Annmae, since May 2013, and their first child, Skylar Mae (“Sky”) Minichiello, was born on August 8, 2017. He is grateful to his father, mother, and sister for their inspiration and encouragement to trust his heart along the way.
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MARK DREUSICKE, MD

Dr. Mark Dreusicke graduated from Duke University School of Medicine with a focus on integrative medicine and primary care. As a researcher, medical writer, and analytics consultant, he is particularly interested in the effects of mindfulness and stress reduction on behavior change. With an undergraduate degree in neuroscience, his interest in human behavior developed while conducting studies in clinical psychology and neuroimaging at the University of Virginia, Virginia Commonwealth University, and Harvard Medical School. Dr. Dreusicke is trained as an Integrative Health Coach from Duke Integrative Medicine, where he also completed Mindfulness Based Stress Reduction (MBSR) training. He is currently enrolled in Vanderbilt University’s Health & Wellness Coaching Certification Program. Dr. Dreusicke is actively involved in the national credentialing for coaches with the International Consortium of Health & Wellness Coaching (ICHWC) and National Board of Medical Examiners (NBME). He currently lives in San Diego, CA and consults in the fields of primary care & integrative medicine, mindfulness, and health & wellness coaching.

JASON DUDLEY, M.DIV.

Jason Dudley is a Certified Integrative Health Coach with an independent coaching and consulting practice in Durham, NC. He provides behavioral health consulting for Duke Executive Health, working with executives and other professionals to reduce and manage stress more effectively. He has served as a group facilitator and health coach for a National Institutes of Health funded research study at Duke University evaluating the efficacy of health coaching, personalized health planning, and mindfulness meditation in reducing risk factors shown to predict incidence of heart disease. Mr. Dudley has a Masters of Divinity from Duke University and additional training in Clinical Pastoral Education (CPE) from Duke and Dartmouth Medical Centers. He completed Duke Integrative Medicine’s Mindfulness Based Stress Reduction Program (MBSR) and Mindfulness for Professionals Training and is particularly interested in Mindfulness Meditation and other contemplative practices known to be beneficial for greater awareness, health, and well-being.
Candace Gregory has over 37 years experience in healthcare and has been a registered nurse for 32 years. Ms. Gregory’s career began in emergency and critical care both as an EMT/Paramedic and an RN. She is currently focused in healthcare IT and holds an ANCC Certification in Nursing Informatics. Ms. Gregory works as an independent consultant managing multi-million dollar electronic health record implementations and she has an independent coaching practice and focuses on coaching for healthcare providers, particularly nurses. She is owner and co-creator of an innovative coaching program called Nurture the Nurse which incorporates integrative health coaching with mindfulness and self compassion to improve the overall health and well-being of nurses both professional and personally. Candace holds a Bachelor of Science degree in Nursing from Bellarmine University, a Duke University certification as an Integrative Health coach, and is an American Holistic Association board certified nurse coach. She is currently pursuing a Master of Science degree in Health Promotion at the Maryland University of Integrative Health.

Ms. Bobbie Bruner-Muirhead is a U.S. Navy Veteran and has 15 years’ experience as a group facilitator and trainer. She is a 2009 graduate of Duke University’s Integrative Health Coach Foundations program and 2015 graduate of Wellcoaches School of Coaching Core Coach Training program. Ms. Bruner-Muirhead is currently pursuing certification as a Health Coach through Wellcoaches and the NCCHWC. During her enlistment with the Navy, Ms. Bruner-Muirhead served as a Cryptologic Technician Interpreter, serving as a Russian Linguist in Turkey and Japan. She worked on the U.S. Navy PREVENT contract (a behavior modification education program for Navy personnel) with Pacific Institute for Research and Evaluation as a facilitator, trainer, and curriculum contributor and also with KeyBridge Technologies as a PREVENT trainer and facilitator. During her time with the PREVENT program, Ms. Bruner-Muirhead facilitated over 225 groups travelling throughout the U.S. and overseas as well as provided shipboard classes aboard aircraft carriers. Ms. Bruner-Muirhead contributed to the PREVENT curriculum as a writer, often piloting new material and contributed to the writing and editing of the Whole Health Coaching Participant.
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Ms. Bruner has a Bachelor of Arts in History with a dual minor in Professional Education and Russian Linguistics from the University of North Florida.

MARITÉ HAGMAN, MPH, AEH

Marité Hagman received her Master of Public Health with a health policy and medical ethics focus from the UCLA School of Public Health. She worked with Kaiser Permanente establishing hospital ethics committees and developing a regional medical ethics program, and at the State Medical Society of Wisconsin, where she directed a team in developing state and national policies. A personal experience of treatment-resistant illness led Marité to explore alternative modalities and mind, body and spirit healing, and to pursue a four-year energy healing program, during the years when she was raising three children. Through her private healing practice, she supported individuals with personal transformation. She also co-authored a year-long Coming of Age program designed to help youth explore their values and spiritual beliefs. More recently, Marité returned to systems work at the University of Wisconsin Department of Family Medicine and Community Health as the program manager under contract with the Veterans Health Administration to support system transformation to a Whole Health model of care, and also received certification as an organizational trainer for the HeartMath Institute.

ANN MASON, B.S.

Ms. Ann Mason is a Program Director with Pacific Institute for Research and Evaluation (PIRE) and has over 35 years of experience as a group facilitator and trainer. She has worked primarily in the prevention field while affiliated with PIRE and the University of Arizona on the U.S. Navy’s PREVENT program, a behavior modification education program for Navy personnel. Throughout her time on this program, Ms. Mason served as a facilitator and trainer, providing skill training to prospective employees, current employees, and Sailors in effective communication, decision making, goal setting, and motivational interviewing skills. She also served as Program Coordinator, Regional Manager, and Program Director during the course of her 30 years on the project. While at PIRE, Ms. Mason has contributed to the curriculum development for the State of Florida DUI Level I Program and the PREVENT program, and also served as a trainer for the annual National Leadership Conference for the Office of Juvenile Justice’s Enforcing Underage Drinking
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Laws program. Prior to her work with the U.S. Navy program, Ms. Mason completed two internships in group counseling at the Navy Drug & Alcohol Rehabilitation Center, NAS Jacksonville and Gateway Community Services, Jacksonville, FL, and she worked briefly at a private psychiatric hospital in Asheville, NC. Ms. Mason has a Bachelor of Science in Allied Health Sciences, Alcohol and Drug Studies from the University of North Florida.

JANE TURCOTTE, PH.D.

Dr. Jane Turcotte is a consultant with the University of Arizona’s Southwest Institute for Research on Women and has been involved in a number of projects, including a National Science Foundation grant that uses mentors and a values-driven context to foster STEM (Science, Technology, Engineering, Mathematics) interest in youth from underrepresented populations. She is also a consultant for Pacific Institute for Research and Evaluation (PIRE), serving most recently as a health coach mentor and previously as a trainer and evaluator. Dr. Turcotte received her graduate education in clinical psychology at Memphis State University (now the University of Memphis) and completed an internship at the Southern Arizona Veterans Administration Health Care System in Tucson, Arizona. Following her internship, she assumed a position with the University of Arizona, Department of Family and Community Medicine to assist with the U.S. Navy’s PREVENT program, a course designed to reduce health risk behaviors that detract from mission readiness. During her tenure with PREVENT, Dr. Turcotte served as a facilitator, trainer, curriculum writer, and site manager, overseeing program delivery at 12 Navy installations. Dr. Turcotte received her B.A. in Psychology from Western Michigan University and worked as a psychometrist at a private psychiatric hospital in Grand Rapids, Michigan, prior to pursuing her post-graduate education.

KERRI WEISHOFF, MS, CCC, SLP

Kerri is an Integrative Health Coach, University Lector/Instructor on Mind Body and Awareness Practices. She also is a practicing Speech Pathologist in Critical Care and incorporates mindfulness into her clinical practice.

Kerri has more than 25 years of rehabilitation experience, including 15 years as a director of Rehab and Integrative Healing Practices. She is a graduate of the University of WI – Milwaukee from the College of Health Sciences and the University of Minnesota Center for Spirituality & Healing Program. Her recent
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study has been with the Center For Mind Body Medicine.

As an Integrative Health Coach, Kerri provides compassionate, non-judgmental support while helping clients identify obstacles that block their pathway to better health and overall wellbeing. She incorporates self-care, breath work and stress awareness management tools to help clients create opportunities to increase focus, improve energy and connect to purpose in their life.

Her joy is her evolving life with her 3 boys, mindful exercise, the change of the season and possibilities.

VHA OPCC&CT EDUCATION CHAMPIONS

STEPHANIE BROWN-JOHNSON, MD

Stephanie Brown-Johnson is an Assistant Professor of Medicine at Emory University. Her work involves providing primary care for Veterans at the Atlanta VA Medical Center. She enjoys teaching medical residents and students in both the inpatient and outpatient setting and using Narrative Medicine to help medical teams reflect on their experiences. She is the Co-Director of the Integrative Health and Wellness program at the Atlanta VA and a Whole Health Education Champion for the OPCC&CT. Dr. Brown-Johnson graduated from Washington University Medical School in St. Louis and completed her residency in Internal Medicine at Emory University. She is active in her community and loves working with youth at her local church.

MICHAEL HOLLIFIELD, MD

Dr. Hollifield is a whole health physician. After receiving his medical degree with thesis honors from the University of Washington, he crafted a dual training program in Family Medicine and Psychiatry to develop a comprehensive mind-body perspective. This included learning classic family and behavioral medicine, as well as imagery, hypnosis, various relaxation and meditative techniques, specializing in mind-body practice. With later training in acupuncture, Michael now provides “acupuncture and sacred imagery” in his practice with war survivors. As Section Chief for the Program for Traumatic Stress at the Tibor Rubin VA
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Medical Center in Long Beach, he and the team use combination evidence-based and integrative methods and a strength-based approach to help war survivors heal.

Dr. Hollifield’s research has focused on measurement of trauma and health in war survivors and on developing novel interventions such as acupuncture, imagery rehearsal therapy, and cognitive behavioral therapy for chronic stress and posttraumatic stress disorder. He is a member of the Alpha Omega Alpha Medical Honor Society.

Michael balances work-life with yoga, daily walking, gardening, cooking and eating healthfully, and practicing imagery. He is a private pilot, though not so active now. He is imagining building a retreat to help war survivors heal using whole health and integrative techniques. Biking across country for a cause is one remaining life goal.

AYSHA SAEED, MD

Aysha Saeed, MD is an internist and integrative medicine physician at the VA Connecticut (VACT). She is the director of VACT’s Integrative Health Center. In the integrative setting, her clinical work includes offering auricular acupuncture for mental health and chronic pain. Aysha is a member of the VISN 1 Pain Council and is also the designated CIH coordinator for VISN 1. She is the founding member of the VACT Whole Health Working Group.

Aysha has been in clinical practice for almost 20 years. She completed her Internal Medicine residency training at the University of Connecticut (UCONN) and, after over a decade in private practice, joined the VA as a primary care physician and firm chief. She is an Assistant Clinical Professor at the UCONN School of Medicine and precepts medical students on their integrative medicine rotations. She previously served as faculty for UCONN’s Student Continuity Practice program for 12 years. Prior to joining the VA, she served on the Midstate Medical Center’s hospital planning committee as well as its medical board.

Aysha is board certified in Integrative Holistic Medicine (ABIHM) and American Board of Internal Medicine (ABIM). She is also a Somatic Experiencing Practitioner (SEP) and certified in Auricular Microsystem Acupuncture. She is a member of the American College of Physicians. Her other interests include trauma healing, homeopathy, and mysticism.
Tulika Singh is an Emergency Medicine physician at the Jesse Brown VA Medical Center in Chicago, IL and Assistant Professor at the University of Illinois at Chicago’s Department of Emergency Medicine. She serves as an Education Champion for the Office of Patient Centered Care and Cultural Transformation and is a Women’s Health Champion for Jesse Brown VAMC. She completed her medical training at Christian Medical College in Vellore, India, Pediatric and Emergency Medicine residencies at the University of Illinois at Chicago, and an Integrative Medicine Fellowship at the University of Arizona’s Center for Integrative Medicine under Dr. Andrew Weil. Tulika served as the Pediatric Education Director for the University of Illinois at Chicago Emergency Medicine Residency for several years.

In addition, Tulika is certified in Functional Medicine through the Institute for Functional Medicine and is a registered yoga teacher. Tulika has been involved in women’s health education serving as returning faculty for Women’s Health Mini-Residency for Emergency Providers and Nurses since 2014. She has helped to develop several Whole Health educational classes offered to both Veterans and employees at Jesse Brown VAMC. Tulika is passionate about the mind-body-spirit connection, work-life balance and the human body’s innate healing abilities. Her other interests include physician wellness, mindfulness and food as medicine. She is happily married to Tim, a flight nurse and they have a darling 4-year old son.
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ABOUT THE COURSE

The VHA Office of Patient Centered Care and Cultural Transformation (OPCC&CT) is offering *Whole Health in Your Life: New Perspectives* as a two-day stand-alone clinical education course (14 CEUs) designed to introduce VA clinicians and clinical staff to the Whole Health Approach through one of the most powerful methods possible—directly applying it to their own lives. This experiential course acknowledges that Patient Centered Care (PCC) starts with each individual and what matters most to them. Just as that is true for Veterans, it is also true for the people responsible for their health care. This course provides a context where participants can have transformative experiences that significantly impact their personal and professional lives. These experiences can influence not only their self-care, but also the guidance they offer to Veterans around self-care and behavior change.

During this two-day course, participants will be given an opportunity to focus on their health and self-care priorities using the Circle of Health. They will be introduced to a series of Whole Health Coaching techniques as well as other tools, including mindful awareness practices and various Complementary and Integrative Health (CIH) approaches, to support them in their exploration. They will take time to assess their overall state of health and current self-care practices, and they will explore how to address burnout and promote resilience. Participants will work in small groups to create their own Personal Health Plans (PHPs) and help their colleagues do so as well. This is not merely an “academic” exercise; the expectation will be that they institute their plans and follow up with their partners after the course.

This course can be offered to up to 50 participants. The target audience is clinicians, clinical staff and leadership who have not yet been introduced to the Whole Health Approach through other courses. They would come from a number of different teams or departments either within one given facility or multiple facilities. The understanding would be that they can take what they learn back to their respective teams and share it.

**During this program, participants will be invited to:**

- Learn more about the Whole Health Approach, including how it is linked to self-care, as well as how it might be used more broadly in one’s clinical practice to help foster patients’ self-care
- Reflect on what they value, on “What really matters?” and how that might influence their behavior and choices
- Assess their current state of Whole Health, noting both strengths/assets and areas where they would like grow
- Reflect in depth on what they need to optimize their own health and well-being
Establish goals, action steps and support needed to succeed
Explore how to foster their own resilience and prevent/address burnout
Sample an array of practices designed to enhance mindful awareness or demonstrate various movement-based therapies
Explore local and national resources related to Whole Health
Reconnect with why they chose to enter health care in the first place

Learning Objectives. After the course, participants will be able to:

- Understand key concepts of the Whole Health Approach
- Describe how Whole Health is relevant in their personal lives
- Apply foundational elements of Whole Health planning in their self-care practices
- Discuss how they can also apply principles of Whole Health to support patients’ self-care practices
- Delineate their values and describe how to bring values (meaning, aspiration, purpose) into their self-care and care of others
- Describe key ways to prevent/reduce burnout and foster resilience
- Implement basic Whole Health communication techniques
- Discuss the role of CIH approaches in care

ACCME, ACCME-NP, ACPE, APA, ANCC, ASWB, CDR, and NYSED SW accreditation (14 hours) is available. Attendance at the two days of training is a requirement of the course and for obtaining Continuing Educations (CEU) credits available through EES.
## MODULE 1: INTRODUCTIONS

### WHOLE HEALTH BINGO—COMPONENTS OF SELF-CARE

Find people in your small group who match the descriptions on the bingo sheet. Write their name in the corresponding box. The **winning “Bingo” table** will have 5 consecutive squares (or 4 corners) with a *different name for each box.*

<table>
<thead>
<tr>
<th>Did something just for yourself this week (Self-Care)</th>
<th>Ate both fruits and veggies several days in the past week (Food &amp; Drink)</th>
<th>Has a spiritual community (Spirit &amp; Soul)</th>
<th>Has good communication with someone every day (Family, Friends &amp; Co-workers)</th>
<th>Spent time on a farm in the past year (Surroundings)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sleeps 7-8 hours a night (Recharge)</td>
<td>Plays a sport (Working Your Body)</td>
<td>Listened to favorite music in the past week (Surroundings)</td>
<td>Goes to fitness class at least once a week (Working Your Body)</td>
<td>Did an art or craft project in past year (Personal Development)</td>
</tr>
<tr>
<td>Did an activity outside this past week (Surroundings)</td>
<td>Is currently taking a class outside of work (Personal Development)</td>
<td>WHOLE HEALTH FREE SPACE</td>
<td>Regularly plays/practices a musical instrument (Personal Development)</td>
<td>Takes at least one 15 minute break while at work (Recharge)</td>
</tr>
<tr>
<td>Went on a personal or outdoor adventure in the past year (Surroundings / Personal Development)</td>
<td>Read an inspirational poem in the past month (Spirit &amp; Soul)</td>
<td>Has a vegetable garden (Food &amp; Drink, Surroundings)</td>
<td>Has a pet (Surroundings / Family, Friends &amp; Co-workers)</td>
<td>Practices Mindful Awareness at least 3 times a week (Power of the Mind)</td>
</tr>
<tr>
<td>Has a live plant at work (Surroundings)</td>
<td>Ate lunch with someone last week (Food &amp; Drink / Family, Friends &amp; Co-workers)</td>
<td>Ate handful of raw nuts in the last week (Food &amp; Drink)</td>
<td>Exercised for 30 minutes yesterday (Working Your Body)</td>
<td>Has volunteered in the community in the past year (Personal Development)</td>
</tr>
</tbody>
</table>
MODULE 2: MINDFUL AWARENESS

AWARENESS OF BREATH EXERCISE

- Find a comfortable position. Relax and feel the support of the chair or floor.
- If you like, allow your eyes to close, or set a soft gaze somewhere around the room.
- Remember to maintain attitudes of non-striving, non-judging, and paying attention.
- This is a chance to let go of life’s concerns.
- Now pay attention to your breath wherever you experience it. Don’t try to change it, just pay attention to it. Feel the breath as fully as possible, the inhaling, pausing and exhaling of the breath. It may be easier to focus on where you feel the breath in your body, such as your nose, chest or belly.
- When you notice your attention is somewhere else, congratulate yourself for noticing and gently return to the breath. You will probably need to do this many times.
- Notice the sound of your breath, the coolness of your in-breath and the warmth of your out-breath.
- If you hear outside sounds or thoughts enter your mind, simply notice them and then gently return your focus back to your breathing.
- Notice the length and depth of each breath.
- Practice this way as long as you wish.
- Let yourself rest and look more deeply as you settle into this.
- (After time is up.) When ready, you may end your mindful awareness session by simply opening your eyes.
The bubble plot broadly summarizes mindfulness intervention systematic reviews published to February 2014 and shows the clinical conditions addressed in reviews (bubbles), the estimated size of the literature (y-axis), the effectiveness trend according to reviews (x-axis), and the number of reviews (bubble size) per clinical condition. Colors: green (various mindfulness interventions), pink (MBSR), purple (MBCT), blue (MBSR+MBCT), and yellow (unique mindfulness-based intervention).


MBSR=Mindfulness-Based Stress Reduction; MBCT=Mindfulness-Based Cognitive Therapy
MODULE 4: BURNOUT AND RESILIENCE

ORIGIN STORY WORKSHEET

*You are the hero of your own story.*

—*Joseph Campbell*

For this exercise, you and your partner will each have a few minutes to share your “origin stories” with each other. In preparation for doing this, take a minute or two to answer the following questions. You can share any or all of your answers with your partner, as you are comfortable.

1. Why did you choose to work in health care?

2. Why did you choose to work for the VA?

3. What is the most rewarding moment you have ever had when working with a Veteran?

4. Looking back, would you choose the same career path again? Why or why not?
RESILIENCE—DISCUSSION QUESTIONS

In your small group, choose 2 or 3 of the questions below. Each person should share for 1-2 minutes.

Think of someone who you admire for their resilience. What made you think of this person?

________________________________________________________________________________________________________________________________________________________________________________________________________________________________________

________________________________________________________________________________________________________________________________________________________________________________________________________________________________________

Describe a situation in your life where you were at your most resilient. How were you resilient? What helped you feel and be this way?

________________________________________________________________________________________________________________________________________________________________________________________________________________________________________

________________________________________________________________________________________________________________________________________________________________________________________________________________________________________

What steps would you like to take to cultivate more resilience in your life?

________________________________________________________________________________________________________________________________________________________________________________________________________________________________________

________________________________________________________________________________________________________________________________________________________________________________________________________________________________________

Share an example of when a Veteran demonstrated strength and resilience. How did this impact their plan of care?

________________________________________________________________________________________________________________________________________________________________________________________________________________________________________

________________________________________________________________________________________________________________________________________________________________________________________________________________________________________

How can you contribute to an environment that fosters resilience for yourself and others in your workplace? At home?

________________________________________________________________________________________________________________________________________________________________________________________________________________________________________

________________________________________________________________________________________________________________________________________________________________________________________________________________________________________
MODULE 5: STAGE I—EXPLORING MY MISSION, ASPIRATION, PURPOSE & VALUES CLARIFICATION

WHOLE HEALTH PROCESS MODEL

WHOLE HEALTH PROCESS MODEL

Stage IV
Execute the Action

Stage III
Plan for Action

Stage I
Explore Mission
Aspiration Purpose

Stage II
Reflect, Assess & Focus


Create vision. Explore values and value conflicts.


Conduct PHI assessment. Define focus. Assess readiness.
TRIAD EXERCISE: STAGE I—EXPLORING MISSION, ASPIRATION, PURPOSE

Brief Description

This Stage I activity allows the Partner to reflect on his or her Mission, Aspiration, Purpose (MAP) with the support of a Listener being present, listening, reflecting, and asking questions. The third triad member is the Observer.

These roles and skills will be utilized and practiced in the 4 triad exercises that will be done throughout the course, one for each of the Whole Health Process Stages I – IV.

Time

Each person will have _ minutes to be speaking as Partner. (Time will be set for each stage.) After 2 minutes of feedback from the Observer and brief discussion, each person will assume a new role and repeat the activity. Each person in the triad will have an opportunity to be the Partner, Listener, and Observer.

Roles

Listener:
- You will explore with the Partner using the skills of listening, reflecting (if you are familiar with this skill), and asking questions.
- While exploring, you will assist the Partner by utilizing the questions provided for the stage being practiced. You will select the questions you wish to ask and provide space and time for the Partner to respond. (You may not have time to get to all the questions.) The intent is not to ‘solve a problem’ nor give advice, but to allow the opportunity for the Partner to reflect and discover their inner thoughts and feelings.

Partner:
- Authentically share in response to the Listener’s questions (not role playing). You may want to have your completed Personal Health Inventory (PHI) or worksheet with you to reflect on the responses you have written. Share no more than you feel comfortable sharing in your triad setting.

Observer: You will pay close attention to:
- The skills utilized by the Listener that allowed the Partner to reflect. (You may want to take a few notes.)
- Whether the Listener was able to effectively ask on-task questions and provide a forum for reflection by listening. You may want to comment on the following:
  - What was one specific skill the Listener did well?
  - What was one thing they might have done differently, or even better?
o Did the Listener stay away from giving advice or problem solving?

• Keeping track of time.

**Possible Questions**

Have *Partner* articulate what is most important to them in life (their MAP) and how it relates to their health.

1) How was it to reflect on these first 3 questions of the PHI?

2) What really matters to you? Or, what is your MAP?
   (as you think about your responses to Questions 1-3 of the PHI)

3) Reflect and have person elaborate by asking “What else?” or “Tell me more.”

4) What do you need or want your health for?

5) What stands out for you when you think of the 3 scaling questions?

Have *Partner* identify core values that their vision represents, as well as any value conflicts.

6) What are your values reflected in your response?

7) What other values do you have that may conflict with what ‘really’ matters?

Have *Partner* envision what their life would look like if they were living/not living according to their mission and what really matters to them.

8) If you continue living your life as you are today, how aligned will your life be with what really matters to you, say 3 years from now?

9) If you made changes to fully align your life with your MAP, what would your life look like 3 years from now? How would your life be different?
## Observation Form for Triad Exercise: Stage I

<table>
<thead>
<tr>
<th>Skills</th>
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<tr>
<td></td>
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<td>Avoided</td>
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<tr>
<td>Giving Advice</td>
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<tr>
<td>Percent of Time ‘Speaker’ Spoke</td>
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<tr>
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</table>
MODULE 6: STAGE II—ASSESSING COMPONENTS OF HEALTH AND CHOOSING A FOCUS

SAMPLE QUESTIONS TO EXPLORE COMPONENTS OF SELF-CARE

Surroundings: “Physical and Emotional”

- Tell me about your living situation?
  - What do you love about it? What would you change about it?
  - Who do you live with? Do you have any pets?
- Does your work environment support your health and well-being?
- How often do you spend time outdoors or in nature?

Personal Development: “Personal Life and Work Life”

- What are your greatest strengths?
- What has helped you to get to this point in your life? (highlighting resilience)
- How do you invest your time each day? Would you like to change anything?
- Do you have any hobbies, or do any volunteer work in the community?

Working Your Body: “Energy and Flexibility”

- What kind of activities do you enjoy?
- How active have you been in the last week?
- Do you have a favorite way to exercise or bring movement into your life?

Food and Drink: “Nourishing and Fueling”

- What are your favorite foods? Do you crave any specific food?
- Does anyone else participate in food choices and preparation at your home?
- Have you noticed a reaction after eating certain foods? What happens?
- Have you ever changed the way you eat, and what was the result?
- Are there any changes that you would like to make to your diet?

Recharge: “Sleep and Refresh”

- Are you satisfied with your energy level on a daily basis?
- What time of the day are you most energized, and least energized?
- Do you wake up feeling rested? How much sleep do you get per night?
- Have you ever used guided imagery or breathing practices before sleeping?
Family, Friends and Coworkers: “Relationships”

- Do you get the support you need from family and friends?
- Do you have someone you trust and can talk to about your health?
- Is there someone in your life with whom you share your thoughts and feelings?
- Do you feel supported by your co-workers?

Spirit and Soul: “Growing and Connecting”

- Do you have a sense of meaning and purpose in your life?
- What does spirituality mean to you?
- Are you part of a spiritual or faith community?
- What gives you strength during difficult times?

Power of the Mind: “Relaxing and Healing”

- When do you feel most at ease and relaxed?
- How do you manage stress in your life?
- Where do you carry your stress in your body?
- Do you have a meditation or mindfulness awareness practice?
IMPORTANCE AND CONFIDENCE RULERS

Importance RULER

“On a scale of 0–10, how important do you think it is to . . . ?”

<table>
<thead>
<tr>
<th>0</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
<th>8</th>
<th>9</th>
<th>10</th>
</tr>
</thead>
<tbody>
<tr>
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<td>A Little</td>
<td>Somewhat</td>
<td>Very</td>
<td>Extremely Important</td>
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</table>

Confidence RULER

“On a scale of 0–10, how confident are you that you will be able to . . . ?”

<table>
<thead>
<tr>
<th>0</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
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<th>7</th>
<th>8</th>
<th>9</th>
<th>10</th>
</tr>
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<tbody>
<tr>
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<td>A Little</td>
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TRIAD EXERCISE: STAGE II—ASSESSING THE COMPONENTS OF HEALTH AND CHOOSING A FOCUS

Possible Questions

Have the Partner articulate their responses to filling out the section of the PHI entitled, “Where You Are And Where You’d Like To Be.” Consider asking the following:

1) What stands out for you in completing this part of the PHI?
2) What’s an area you think you’re doing well in? How did you rate yourself?
3) What’s an area you’re not doing as well in that you’d like to talk about?
   - What does your number mean?
   - Where would you like to be?
   - What ideas do you have for how you might start getting closer to where you want to be?

(Note: Use these questions to address as many areas as time allows.)

Have the Partner assess and articulate an area of focus. Where would they like to begin? Assist them in exploring any ambivalence. Consider asking the following:

4) Of all the areas you’ve considered, which one would you like to begin making some changes in?

Use scaling questions of 1-10 to assess the level of importance and confidence for focus and change.

5) On a scale of 1 to 10, how important is it to make a change in this area?
6) On a scale of 1 to 10, how confident are you that you can make some changes in this area?
   - Why not a (lower number)?
   - What would it take to raise it to (a higher number)?
## Observation Form for Triad Exercise: Stage II

<table>
<thead>
<tr>
<th>Skills</th>
<th>Comments</th>
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<tbody>
<tr>
<td></td>
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MODULE 7: THE VISION

WHOLE HEALTH AND SUICIDE PREVENTION

Information from the VHA Office of Patient Centered Care and Cultural Transformation on Suicide Prevention, July 2017

- **Whole Health is an approach to health care that empowers and equips** people to take charge of their health and well-being and to live their life to the fullest. This approach partners with Veterans to explore their mission, aspiration, purpose (MAP). A Whole Health Approach is an integral and proactive element of suicide prevention.

- **A focus on health and wellness** can enhance Veterans’ reasons for living in a way that could buffer against the impact of stresses, problems, or conditions that may lead them to consider reasons for dying.

- **Enhancing communication and trust** will increase the likelihood that patients will disclose stressors and symptoms to their providers, and the likelihood that they will accept recommendations for care.

- **Providing care to those who report significant stressors** and those with symptoms that are below the threshold for making a mental health diagnosis will extend the reach of effective interventions to large numbers of additional patients.

- **Increasing the availability of problem solving training and other strategies** such as mindfulness can increase the Veteran’s skills in responding to stressors and therefore decrease the risk of stress negatively impacting mental health or exacerbating existing mental health disorders.

- **The increased availability of resources supporting self-help** makes interventions available to those who would otherwise resist care.

- Increasing the availability of care for patients with chronic pain and insomnia addresses risk factors for suicide that go beyond mental health conditions.

- **Defining stepped care strategies**, ranging from self-care through guided self-care and brief treatment to specialty care for PTSD, depression, and substance-related conditions, enables Veterans to begin care earlier, with milder symptoms, and with less risk of stigmatization than current approaches, while, at the same time, ensuring that there are mechanisms for modifying the level of care when necessary.

- National Suicide Prevention Lifeline and Veterans Crisis Line:
  1-800-273-8255 Press 1
- [www.veteranscrisisline.net](http://www.veteranscrisisline.net)
- [www.suicidepreventionlifeline.org](http://www.suicidepreventionlifeline.org)
- Veterans Chat - Veterans Crisis Line
- Spread the Word: [http://spreadtheword.veteranscrisisline.net/](http://spreadtheword.veteranscrisisline.net/)
- VA Office of Suicide Prevention:
  [https://www.mentalhealth.va.gov/suicide_prevention/](https://www.mentalhealth.va.gov/suicide_prevention/)
GUIDELINES FOR WRITING AN ELEVATOR SPEECH

Everyone on the team needs to feel comfortable with describing the Whole Health Approach, and what it means to do personal health planning.

Your task is to create an oral presentation—an elevator speech—that is about 30 seconds long. The idea is that you will be able to share this with patients or colleagues quickly to let them know about what Whole Health and personal health planning are all about.

Here are some snippets you can consider putting in (change into your own words):

Whole Health care...

- Is a different way to approach health care
- Looks at the whole person
- Respects the individual uniqueness of each person
- Is about personalized, proactive, patient-driven care
- Gets people asking, “Why do I want my health? What really matters to me?”
- Aligns with VA strategic plan and patient centered care
- Brings in complementary approaches, when appropriate
- Is being adopted by many sites throughout the VA
- Focuses on improving clinician well-being too
- Involves creating a personal health plan (PHP) for each patient
- Respects the importance of prevention and the work of HPDP
- Incorporates mindful awareness
- Really emphasizes self-care and what people can do to take care of themselves
- Is a team-based approach, and the patient is the captain of the team
- Does not get rid of conventional care, especially for acute problems
Key Elements of the Whole Health System
WHOLE HEALTH IN YOUR LIFE—PARTICIPANT MANUAL
MODULE 8: STAGE III—PLANNING FOR ACTION

SMART GOAL AND ACTION STEPS WORKSHEET

Area of Focus________________________

Timeframe (circle one): 3 months 6 months Other___________

SMART Goal and Action Steps Criteria

- Specific—clear and concise
- Measurable—clear way for knowing if the goal is met
- Action-Oriented—action that is in direct control of the person
- Realistic—based on what is possible or the person thinks they can do
- Timed—contains a time line for steps along the way to the final goal

Goal

Action Steps

Action steps are steps that help you work toward your goal that (1) can be done in the following week or two and (2) meet the same SMART criteria. Action steps can be planned out over time or made after the first week’s action steps are attempted.

Action Step 1

Action Step 2 (Optional)

Action Step 3 (Optional)

Who is going to help make sure I do my action steps? (Resources/Accountability)
TRIAD EXERCISE: STAGE III—PLANNING FOR ACTION

Possible Questions

Have the Partner establish a SMART goal.

1) Where would you like to be 3-6 months from now in your area of focus? (setting a goal)
   (Assist the person in SMARTING their goal by noticing and asking about the criteria.)

Have the Partner establish SMART action steps (actions they can take in the near future to begin meeting their goal).

2) What action steps could you take in the next week to get you started on reaching your goal?
   (Assist the person in SMARTING their action steps by noticing and asking about the criteria.)

Time permitting—inquire about potential or anticipated barriers/challenges and any contingency plans.

3) What barriers/challenges do you anticipate you may encounter as you try out your action steps?
4) What can you do when you encounter these barriers/challenges?

Assist the Partner in establishing accountability.

5) To whom would you like to be accountable and how?

Time permitting—utilize the scaling questions (1-10) to assess confidence.
### Observation Form for Triad Exercise: Stage III

<table>
<thead>
<tr>
<th>Skills</th>
<th>Comments (Did Well or Could Have Done Even Better!)</th>
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</table>
MINDFULNESS AWARENESS ACTIVITY—MINDFUL EATING

What Is It?
Mindful eating involves a series of practices used to focus awareness on eating. The intent is to bring people into a state of paying attention, nonjudgmentally, in the present moment. It can also encourage reflection about how one eats, one’s eating patterns, and the role of food in one’s life and health. Various practices tend to involve consuming a small quantity of food in a deliberate way, with close attention to sensations noted during the process.

How It Works
Mindful awareness practices, used over time, shift brain function, allowing for better focus and more positive states of mind.

Increasing numbers of studies support mindful eating. For example, the SHINE randomized controlled trial, which enlisted 194 participants with obesity, found that mindful eating led to decreased intake of sweets and lower fasting glucose levels.1

How to Use It
The following exercise is one example a person can try. It is easiest if it is read to them, versus trying to read it and follow it at the same time. It is possible to record it and then play it back.

The exercise, like any mindful awareness approach, can be repeated daily or interspersed with other mind-body approaches.

Eating Meditation
This exercise puts a new spin on the eating exercises that you may have tried in the past.

In her book, Mindful Eating, Jan Chozen Bays, MD, outlines nine different types of hunger.2 Imagine you have landed on another planet and need food. A seemingly friendly alien offers you an object and encourages you to eat. You have no idea what this object is. You must learn about it with the only tools you have: your senses. Using a single bite of a food of your choice (a raisin, a section of orange, a chocolate chip, etc.), explore the different forms of hunger with mindful awareness by following these steps:

1) **Begin** by tuning in to your baseline hunger. On a scale from 1 to 10, how hungry are you? Where are the signals your body gives you to tell you how hungry you are? Do they come from your stomach? Your brain? Your mouth? A combination of places?

2) **Place the “mysterious alien food item” in your hand.** Start with “beginner’s mind.” Imagine you have never seen anything like it before. How does it feel in your hand? What is its temperature? Does it have a good vibe to it?
3) **Eye hunger.** Look at the object. Note its color, texture, and shape. Is it visually appealing to you? Rate your eye hunger for this item on the scale from 1 to 10 in terms of how the looks of the food affect your hunger.

4) **Nose hunger.** Smell the alien food. Rate the nose hunger. On a scale of 0 to 10, how much does the smell of this food make you hungry?

5) **Mouth hunger.** Place the alien food in your mouth but do not bite it right away. You can roll it around and explore it with the tongue. What do you notice? After a pause, bite into the food just once and roll it around again. What do you notice?

   Don’t swallow yet! You know the drill: On a scale of 1 to 10, how much hunger do you have for this object based upon the sensations in your mouth?

6) **Stomach hunger.** “What the heck?” you think. “I am starving, and I have to eat something.” You decide to eat this object. Chew it slowly, and notice how it changes as your teeth and saliva break it down. How many times can you chew it? Take your time. Savor it. Swallow it and pay attention to the experience of swallowing. Are there any bits still in your mouth? Are there pieces in your teeth that might insult your mysterious alien host if you smile? What does the tongue do when you have finished eating the food? How long can you detect the aftertaste? Rate stomach hunger on a scale from 1 to 10. Is the stomach full or not? Does it want more of this alien item?

7) **Cellular hunger.** Tune in to how the food is moving into your body, through the digestive system, toward the bloodstream. How will your cells respond to it? Are there any other sensations that tell you that this food is being absorbed? What is your body’s feedback? Are you full? Nauseated? Now rate cellular hunger on a scale from 1 to 10. How much would your body’s cells like to have more of this food?

8) **Mind hunger.** What has your mind been saying about this food? Often, it will be in the language of “should” or “shouldn’t.” What are you thinking? Is your mind wandering. Is it judging? On a scale of 1 to 10, how much would the mind like to have more of this food?

9) **Heart hunger.** What about the heart, your emotions? Is the food soothing or comforting? Has it led you to feel anything new emotionally, like disgust, happiness, or contentment? Rate on a scale of 0 to 10 how much your heart would like you to have more of this food.

10) You can practice this with any number of foods, or throughout an entire meal. Don’t forget to try it with liquids as well.
This exercise is adapted from Mindful Eating: A Guide to Rediscovering a Healthy and Joyful Relationship with Food, by Jan Chozen Bays, as well as from an exercise based on her work that was created for WeBiteBack.com, at http://webiteback.com/forum/viewtopic.php?p=293409.

**When to Use It**
This can be used by anyone. The guidance of a trained mindfulness instructor may be very useful. It can put eating into a broader context before people start delving into details about healthy approaches to nutrition.

**What to Watch Out For (Harms)**
If someone has a history of an eating disorder, it is best done under the guidance of a mental health professional.

**Tips from Your Whole Health Colleagues**
- One man followed up after a Whole Health class to report that over 3 months he had lost 25 pounds simply by applying mindful eating to his life. He would constantly ask himself if he were truly hungry, and plan his eating accordingly. When he ate, he would do so slowly and deliberately, noticing each bite and not doing anything else while he was sitting down to eat, unless it involved conversations over the meal.
- Best to eat sitting down, with no distractions.
- There is an entire body of literature on “mindless eating” as well. The intention with this is to have people take steps that will lead to unconscious changes in how they eat.

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KEY PRINCIPLES OF PERSONAL HEALTH PLANNING

Education, Skill Building, Resources and Support
Self Reflection/Exploration (MAP)
Goal Setting (Shared and SMART Goals)
Whole Health Assessment

Personal Health Plan (Veteran Owned)

Key Principles of Personal Health Planning
TIPS FOR WRITING HEALTH PLANS

_The real voyage of discovery consists not in seeking new landscapes but in having new eyes._  
— Marcel Proust

The first part of personal health planning was to cover Mission, Aspiration, Purpose (MAP). Next was to review the Personal Health Inventory (PHI) and discuss the circle and what areas capture one’s attention the most. Now, it is time to create the Personal Health Plan (PHP).

Here are 12 important points to remember about health planning:

1) **Remember that health plans come in all shapes and sizes.** Sometimes, simply listening and offering compassion are sufficient. Sometimes a plan may be just one SMART goal. Others may be more detailed, if there is time, and cover multiple aspects of the Circle of Health. Be careful not to make too many suggestions at once. Part of individualizing care is to create a plan that is just the right length for the person.

2) **Your first order of business is to synthesize** all the information at your disposal. This includes what you can learn from the medical record, the exam, testing and studies, as well as the patient’s body language and what family members or friends tell you.

3) Don’t forget that your plans will be better if you **really get to know someone** and if you trust your instincts. When in doubt, share your insights and ask them if they feel they are accurate.

4) A health plan NEVER should be written by a clinician (or even a clinical team) alone. **The patient, as much as possible, should always be a co-author.** Remember that you should create the plan with your entire team. This is not something any single provider or other team member does alone.

5) **Follow up is ALWAYS part** of the plan. Before you finish, be certain they know what happens next. How will they be held accountable for following through with the plan? With whom will they follow up, and when? What resources will increase their chances of success?

6) **Be aware of contextual errors.** How might their social situation influence their ability to follow through with the plan? Clinicians are trained to follow guidelines and use decision aids, but we have to make sure the plan takes into account the specifics of a person’s life. Can they afford the medications or other therapies you are recommending? Do they have responsibilities to others that make it so they can’t be in a hospital or receiving long-term care? Do they have transportation to the consultant or complementary practitioner you want them to see?
7) **Be mindful of cultural issues** as well. Cultural humility includes not only knowing about how a person's culture might influence his or her health choices, but it also involves recognizing that people within a culture are also unique individuals. Don't stereotype.

8) It can help to **create a PHP template** you can follow. Many clinics design a template that can easily be used within the Electronic Medical Record (EMR) and simply be completed as part of the overall progress notes for a visit.

9) **Have clinical tools and educational materials on hand** to help with education and skill building. This saves time, and it helps patients understand more fully. The Whole Health Library and VA Patient Centered Care website have many materials designed to support Whole Health in practice.

10) **ALWAYS take some time, even if it is brief, to focus on the positives.** Note what they are doing right. Help them identify their assets.

11) One of the best ways to learn how to create a PHP is to **create your own PHP**. We know that clinicians are more likely to suggest practices that they have experience in for themselves.

12) **Compare notes with your colleagues.** What are others in your facility doing? How about other facilities? What do their PHPs look like?

For more information on writing health plans, see the Whole Health Library website at:

[http://projects.hsl.wisc.edu/SERVICE/](http://projects.hsl.wisc.edu/SERVICE/)

Under “Educational Overviews and Clinical Tools,” the third overview “Taking Action: How to Write a Personal Health Plan” focuses on health plan writing.
PERSONAL HEALTH PLANNING VISIT OUTLINE

INTRODUCE THE PROCESS

1. SET THE STAGE
Tell them what Whole Health and personal health planning are about (e.g., give your Elevator Speech)

2. SELF-REFLECTION: EXPLORE MEANING, ASPIRATION, PURPOSE (MAP):
Ask the big questions: What really matters? Why is their health important?

3. REVIEW THE PERSONAL HEALTH INVENTORY (PHI)

4. ASSESS THE CIRCLE
Are there any areas on the Circle of Health they want to focus on? Use the circle to guide you.

- Working Your Body
- Food and Drink
- Power of the Mind
- Recharge
- Family, Friends, and Coworkers
- Spirit and Soul
- Surroundings
- Personal Development

5. SET GOALS
   - Shared goals
   - SMART goals (Specific, Measurable, Action-Oriented, Realistic, Timed)

6. DISCUSS NEXT STEPS: EDUCATION, SKILL BUILDING, RESOURCES, SUPPORT:
(What needs to happen to allow them to achieve their goals?)
   - Referrals
   - Complementary and Integrative Health (CIH)
   - Skills
   - Handouts, websites, community resources
   - Follow up—when will you connect with them again?
PERSONAL HEALTH PLANNING WORKSHEET

Personal Health Plan (PHP)

Name:

Date:

Mission, Aspiration, Purpose (MAP):
My mission, aspiration or purpose in life is...

My Goals:

Strengths (what’s going right already)/Challenges:

My Plan for Skill Building and Support

Mindful Awareness:

Areas of Self-Care:

- Working Your Body
- Surroundings
- Personal Development
- Food and Drink
- Recharge
- Family, Friends and Coworkers
- Spirit and Soul
- Power of the Mind
Professional Care: Conventional and Complementary

- Health concerns
- Prevention/Screening
- Treatment (e.g., conventional, complementary, medication, supplements)
- Referrals

Community

- Resources
- Support Team

Next Steps

Please Note: This plan is for my personal use and does not comprise my complete medical or pharmacological data, nor does it replace my medical record.
CHOOSING A COMPLEMENTARY AND INTEGRATIVE HEALTH APPROACH (OR NOT)

Think of a therapy that you have considered trying for yourself (or a patient). Now, ask yourself the following questions about it using the ECHO mnemonic:

1) **Efficacy.** Do you think it will help? Are you aware of any research that indicates it will be useful? How else do you know that it does or doesn’t work?

2) **Cost.** How much does this approach cost? Is it accessible, in terms of how far you would have to travel to get it? What time commitment would it require you to make?

3) **Harms.** Is the therapy safe? What are the risks? How do you know? Do you need more information, and if so, where could you get more information?

4) **Opinions.** What do you believe about this therapy? Are you already convinced it will work? Do you feel strongly enough about it that the answers to the first three questions don’t matter, because you still will/won’t try it?

Discuss your answers with a partner(s). Each person will have a few minutes to share. If you have time, you can do this again for another CIH approach.
MODULE 10: STAGE IV—EXECUTING THE ACTION

TRIAD EXERCISE: STAGE IV—SUPPORT IN EXECUTING THE ACTION

Possible Questions

Ask the Partner how they perceived they did on their intended action.

1) How have you done on your action steps since we last met?

Have the Partner assess what they learned about themselves as a result of attempting to do the intended actions.

2) What did you learn about yourself as a result of attempting your action steps? What else?

Have the Partner articulate what barriers or challenges they encountered and what contingency plans they could create for the future.

3) What barriers did you encounter and what did you do?

4) What would you want to do the next time you encounter these challenges/barriers?

Have the Partner assess how they may want to revise their action steps for the following week.

5) How do you want to modify your action steps for this next week?

Check with Partner to see if they want to change their goal (or focus area).

6) What about your goals or area of focus? Do you want to modify or change?

Connect to Mission, Aspiration, Purpose (MAP).

7) Have the Partner review how this action supports their MAP.

Anything else the Partner may want to address.

8) Is there anything else you want to address today?
### Observation Form for Triad Exercise: Stage IV

<table>
<thead>
<tr>
<th>Skills</th>
<th>Comments</th>
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<tbody>
<tr>
<td>Being Present</td>
<td>(Did Well or Could Have Done Even Better!)</td>
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<tr>
<td>Listening</td>
<td></td>
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<tr>
<td>Inquiry</td>
<td></td>
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<td>Open, Closed</td>
<td></td>
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<tr>
<td>Simple or Complex Reflections</td>
<td></td>
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<td>Session Stayed on Task</td>
<td></td>
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<td>Avoided</td>
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<td>Giving Advice</td>
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<td>Percent of Time</td>
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<td>‘Speaker’ Spoke</td>
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<tr>
<td>Goal of Session (Stage) Met?</td>
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</tbody>
</table>
MODULE 11: NEXT STEPS: PERSONAL AND PROFESSIONAL DEVELOPMENT

OUTLINE FOR TEAM IMPLEMENTATION DISCUSSIONS

The intention for this exercise is to create clear and constructive action plans, which will be shared with your facility leadership, OPCC&CT representatives, and other course participants. (This is not a time to focus on frustrations and obstacles, but rather to empower solutions for your team and your facility.) Choose a scribe to jot down notes, and choose a spokesperson to share with the rest of the group.

- Discuss and list your ideas/strategies for implementing Whole Health into your work teams.
- Identify clear goals and action steps.
- What will be your timeframe?
- Who will take responsibility for various action steps?
- How will you know that you are successful?
- For sustainable change toward Whole Health, what support do you need from:
  ✓ Yourself
  ✓ Your co-workers
  ✓ Your supervisor
  ✓ Your facility leadership
  ✓ Office of Patient Centered Care & Cultural Transformation

**Designate a Work Group Volunteer to write a summary document** describing the changes in which you would like to be actively involved in bringing to your organization. (See following page for format and example document).
STRATEGIES FOR WHOLE HEALTH IMPLEMENTATION: WORKSHEET

This exercise is an opportunity to identify the ways in which you will apply what you have learned at the Whole Health in Your Life course, in support of Whole Health transformation. As a group, select a point of contact for communication with your Whole Health leadership, and a recorder who will write-up your plans. Together, create a summary of the actions you will take to move your practice and/or program toward Whole Health. This worksheet will be shared with your facility’s Patient Centered Care director, Whole Health advisory group and site leadership.

WORK GROUP TITLE:

WORK GROUP MEMBERS (please note who is serving as Point of Contact and Recorder):

<table>
<thead>
<tr>
<th>GOAL(s):</th>
<th>ACTION STEPS (to achieve each goal):</th>
<th>TIMEFRAME</th>
<th>RESPONSIBLE ROLES</th>
<th>MEASURES OF SUCCESS</th>
<th>SUPPORT NEEDED?</th>
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MINDFULNESS AWARENESS ACTIVITY—A COMPASSION PRACTICE

Derived from ancient practice of Loving Kindness Meditation or Metta Meditation.

Format inspired by the University of Wisconsin Mindfulness-Based Stress Reduction Program

Make sure you are in a comfortable position. Close your eyes or rest them comfortably with a soft gaze a few feet in front of you. Begin with five deep breaths. Focus on using your abdomen to breathe first. As you breathe in, your abdomen should go out. As you breathe out, your abdomen should go back in.

Now, focus on the area around your heart. With each breath, draw love, compassion and acceptance into your heart. It can help to focus on people who ‘warm your heart’ or memories that ‘make your heart sing.’

Next, turn your attention to feeling compassion for yourself and for others. Notice, as much as possible without judging, the feelings, thoughts, sensations, or images that arise.

While maintaining a compassionate focus, repeat the following statements. You can choose to say them aloud or under your breath. Pause with each statement—at least for the space of one breath—before moving on to the next one.

1) Start by directing the compassion towards yourself:

   May I be safe and protected.   (Breathe)
   May I be balanced and well in body and mind.   (Breathe)
   May I be full of loving kindness.   (Breathe)
   May I be truly happy and free.   (Breathe)

2) Next, direct this compassion toward someone you love or for whom you feel great gratitude. This can be a family member or friend, a teacher, a pet, a role model.

   May you be safe and protected.   (Breathe)
   May you be balanced and well in body and mind.   (Breathe)
   May you be full of loving kindness.   (Breathe)
   May you be truly happy and free.   (Breathe)
3) Now visualize someone you relate to in a neutral way, with neither like nor dislike. Perhaps someone you just passed on the street, a person you see on your way to work.  (Use phrases from #2 again.)

4) If possible, turn your attention to someone who is challenging, someone that you might be having a hard time relating to. This need not be the most difficult person in your life—do this in a way that does not cause you distress.  (Use phrases from #2 again.)

5) Now, direct this compassion toward all the Veterans/patients who you serve and their loved ones.  (Use phrases from #2 again.)

6) Next direct this compassion toward your colleagues that serve Veterans and their families. (Again, use phrases from #2.)

7) Direct this compassion toward all people and all beings everywhere:

   May all living beings be safe and protected.   (Breathe)
   May all living beings be balanced and well in body and mind.   (Breathe)
   May all living beings be full of loving kindness.   (Breathe)
   May all living beings be truly happy and free.   (Breathe)

8) And, finally, return to offering this compassion for yourself:

   May I be safe and protected.   (Breathe)
   May I be balanced and well in body and mind.   (Breathe)
   May I be full of loving kindness.   (Breathe)
   May I be truly happy and free.   (Breathe)

If you would like to listen to pre-recorded versions of loving-kindness meditations online, you can go to the following sites:

Mindfulness and Compassion (VA Greater Los Angeles Healthcare System)
https://www.youtube.com/watch?v=VgJbYzl2Sjk

University of Wisconsin Mindfulness Program Guided Loving-Kindness Meditations
http://www.fammed.wisc.edu/mindfulness-meditation-podcast-series/

Other VA Mindfulness Materials
- What is Mindfulness?
  https://www.youtube.com/watch?v=JbGe9BpnjIo
- Why Mindfulness for the VA?
  https://www.youtube.com/watch?v=5Ui79W7TPdo
- Four Ways to Cultivate Mindfulness
https://www.youtube.com/watch?v=sU-xRVB7rVE

- Beginning a Mindfulness Practice
  https://www.youtube.com/watch?v=zr42pt0kuZE

- Evidence Map For Mindfulness:
DAY 1 – PULSE CHECK
WHOLE HEALTH IN YOUR LIFE

We value your input, and it will shape how we plan the rest of the course.

1) What about the course today (Day 1) was most helpful to you?

2) What about the course today (Day 1) could be even better?

3) Other feedback and helpful suggestions:
Day 1 – Pulse Check, Page 2

Please do not write your course note on this back page as you will be turning this sheet in at the end of Day 1. See note pages starting on page 53 for space to take notes.
DAY 2 – PULSE CHECK
WHOLE HEALTH IN YOUR LIFE

We value your input, and it will shape how we plan future courses.

1) What about the course today (Day 2) was most helpful to you?

2) What about the course today (Day 2) could be even better?

3) Other feedback and helpful suggestions:
Day 2 – Pulse Check, Page 2
Please do not write your course note on this back page as you will be turning this sheet in at the end of Day 2. See note pages starting on page 53 for space to take notes.
Components of Proactive Health & Well-being Model
The “Circle of Health”

To learn more visit: https://www.va.gov/PatientCenteredCare/