VHA Whole Health: Personalized Health Planning Staff Guide

VHA Office of Patient Centered Care and Cultural Transformation
Updated – In process.
The Department of Veterans Affairs established the Office of Patient-Centered Care and Cultural Transformation (PCCCT) in January, 2011. PCCCT works with VA leadership and other program offices to transform the current system of healthcare from the traditional medical model of “find it, fix it” to a model that partners with Veterans to create a strategy to optimize health and well-being. This approach is personalized, proactive, and patient-driven and honors what really matters to people.

“You ought not to attempt to cure the eyes without the head or the head without the body, so neither ought you attempt to cure the body without the soul....for the part can never be well unless the whole is well.”

Plato

VHA and the Office of Patient Centered Care and Cultural Transformation in deeply grateful to Duke Integrative Medicine for allowing us to adapt some of the content in this handout from the “Personalized Health Plan Manual”, © 2010 Duke Integrative Medicine/Duke University Medical Center.
Personal Health Planning: An Overview

Introduction

The personalized health planning approach is at the heart of patient centered care. This guide provides an overview and guidance on how to implement or enhance the practice of Whole Health using the Personal Health Planning (PHP) approach.

Patient Centered Care refers to a system that prioritizes the patient, incorporates the patient’s values, and partners with the patient to create a personalized, proactive strategy to optimize health and well-being. The Veterans Health Administration is moving from a traditional model of managing disease to one focused on Whole Health care; this represents a move from “what’s the matter with you” to “what matters to you.”

The patient is the key partner in the personalized health planning process which is designed to achieve optimal health and well-being and ultimately, serve as a strategy and motivation for the Veterans’ health. Using an approach that honors an individual’s own wisdom and innate capacity to heal, the process of personalized health planning inspires change by connecting people with the ways in which their health supports their values, vision and purpose in life. This approach aligns with VHA’s mission to “Honor America’s Veterans by providing exceptional health care that improves their health and well-being.” Using the personalized health planning process is one of the first steps in a radical shift in the approach to healthcare, focusing on the whole person, including one’s values and ideals, and not just their disease or condition. This approach has been coined 'Whole Health' and acknowledges that a whole being is so much greater than the sum of his/her parts and focuses on what really matters to patients and their lives.

The Practice of Whole Health

Whole Health is personalized, proactive, patient-driven care that affirms the importance of the relationship and partnership between a patient and their healthcare team. The focus is on empowering the self-healing mechanisms within the whole person while co-creating a personalized, proactive, patient-driven experience (Adapted from the Consortium of Academic Health Centers for Integrative Medicine and the VHA 2013 – 2018 Strategic Plan). This approach is informed by evidence and makes use of all appropriate therapeutic approaches, health care professionals, and services to achieve optimal health and well-being.
This Whole Health approach combines current state of the art, standard, conventional medicine with personalized health planning, complementary and integrative health interventions, and innovative self-care approaches. Using the personal health planning process is one of the first steps in the personal health approach and is a central tool in helping clinicians focus on the whole person, including one’s values and ideals, and not just their disease or condition.

**Personal Health Planning Process**

The personalized health planning process is an aspect of whole health implementation that partners with Veterans to create a plan to achieve their optimal health and well-being. This is a process of exploration, not of just the health issues of Veterans, but of their values and ideals. When Veterans and their health care team understand what really matters to the individual Veteran and aligns their health care with that, they can achieve successes they never before imagined. The road to optimal health and well-being resides within each Veteran, and the health care team serves as a guide and partner. There are multiple points of care at which personalized health planning may be done, spanning from primary care, inpatient, community living centers, and rehabilitation to palliative and hospice care.

The following are the four organizing principles of Personal Health Planning:

1. Whole Health Assessment
2. Shared Goals
3. Personal Health Plan
4. Skill building & Support

This is a process and each organizing principle builds on the previous one. This guide will provide background and further expansion of each principle.
1. WHOLE HEALTH ASSESSMENT

Whole Health Assessment is intended to expand beyond the clinical assessment and health risk assessment to include self-reflection. Thus, the Whole Health Assessment incorporates patient’s priorities and life aspirations with the clinical exam and health risks. In this process, the patient is the authority on themselves; the provider is the authority on physiology and disease. Both perspectives are needed in order to have an assessment of the patient’s whole health. In the whole health assessment phase of the personal health planning process, there are three components:

A. Self-Reflection Tool  
B. Health Risk Assessment (HRA)  
C. Clinical Evaluation

A. Self-Reflection Tool:

The Personal Health Inventory (PHI) is a patient self-assessment, self-reflection tool used to identify psychosocial, behavioral, and environmental issues that can impact the patient’s care and health status. This information is then shared with the provider and team. The PHI is based on the areas in the Components of Health & Well-Being. The PHI gold standard is the MyStory: PHI, which allows patients to quantify both their current and desired states of health and wellbeing. The self-reflection process allows patients the first step in engaging in their care by focusing their attention towards self-care areas. This aids in moving the clinical encounter away from chief complaints and toward identifying what is important to the patient. The MyStory PHI is available here.

The Components of Health & Well-Being illustrated here highlight eight important areas of self-care. Evidence shows that each of these areas of self-care contributes a great deal to an individual’s overall health and well-being. They can also affect their chances for developing diseases as well as the seriousness of that disease. Refer to the Components of Proactive Health and Well-being for information on each of the areas.

The Components of Health and Well-beign are central to the PHP process. Thus, sharing this image and walking a veteran around the circle early on in the PHP process is key. This can be done by any member of the team.
Here are examples of how to introduce the Components of Health and Wellbeing:

- Explain that it starts in the center with “Me”. The “Me” in the center represents the patient and that they are the Captain of their journey through life. They are the expert on their personal goals, priorities and values. This means that only they know WHAT they want their health for. Allow the patient to ask him or herself, “What does the best possible health mean to me?” How would I feel? “What would I be doing?” and/or “Who would be in my life?” By sharing their response(s) to these questions, it will allow you, the provider, to develop shared goals with the patient(s) that are personalized to his/her values.

- Another conversation starter that can be used “It would really help me partner with you in your care if I understand what is important to you in your life. Would you be OK telling me what really matters to you in your life?”

- Follow-on questions include:
  - “How does your current health impact what is most important to you?”
  - “Is there an area on the “circle” that stands out that you would like to focus on?”
  - “What’s going on in that area of your life?”

NOTE: The words you choose and the questions you ask are very important. These questions do not take additional time to ask; they are used in place of some of the traditional questions. When asking these questions it is also extremely important to listen. Empathically listening and offering reflections when the patient is finished sharing will allow you to further explore what is really important to the patient.

- B. Health Risk Assessment (HRA):

  HRAs provide an evaluation of health risks, habits, and history. There are numerous HRA instruments, such as Framingham, Healthy Living Assessment, Functional Assessments, and Depression and Opioid scales. Some of the VA clinical reminders also assess specific risks. The choice of HRA used may be one that is broad, like the NCP’s Healthy Living Assessment, or targeted, based on the person’s condition or specific risks. Selection of the HRA is based on clinical appropriateness. More than one HRA can be used.

- C. Clinical Evaluation:

  The Clinical Evaluation includes the mental, physical and social exam, identification of symptoms, interpretation of laboratory, genomic data, and imaging studies as well as specialist and consultation reports.
2. SHARED GOALS

Shared goal setting is a critical component of personal health planning; this is where “the rubber meets the road.” The clinician and patient must come to agreement about realistic goals to improve the patient’s health. During this process, it is crucial to tie the shared health goal with the Veteran’s life aspirations, which is an essential component to patient empowerment and engagement. Clinicians report that the goal setting stage is most successful when patients are invited to guide the process and offer the goals themselves; in other words, when goal setting is not just patient-centered, but also patient-driven (Simmons, Drake, Gaudet, & Snyderman, 2014).

Shared goals build on the whole health assessment (i.e., the personal health inventory, the health risk assessment and the clinical evaluation). The provider partners with the Veteran to set shared goals that match and support what is most important to the Veteran. This information can be drawn from the PHI, often brought forward by the Veteran’s self-reflection guided by the the Componenets of Health & Well-being. This draws not only from the patient centered care/ whole health model, but also clinical rationale. This approach helps engage and activate Veterans, which are important factors in promoting health behavior change.

Goals that are set based on external factors (e.g., someone else’s priorities) and aren’t grounded in the Veteran’s life values are far less likely to be sustained over time. Thus, goal setting is most effective and meaningful when the Veteran guides the process instead of the provider prescribing solutions. Goals do not have to be complex and grand. Simple and basic goals can have meaning and serve an important purpose in the “here and now” of a person’s life. Remember, this is a shared activity; the Veteran is the expert on themselves and what matters most to them, and the provider is the clinical expert. Both these parties bring their knowledge and recommendations to the table, and work together to identify meaningful goals that will help the Veteran live his/her life more fully.

3. PERSONAL HEALTH PLAN (PHP)

Personalized health planning process leads to the development of a personalized health plan (PHP). The PHP is an individualized, customized plan that is designed to guide and optimize the health and well-being of each patient according to what really matters to him or her. The PHP is the culmination of the personal health planning process. The PHP is the written plan which includes the Veteran’s personal mission, shared goals and steps to achieve the shared goals. It is essential that the documentation process occurs with the Veteran. The creation of the PHP is a co-writing process, not a mere medical documentation process. Optimally the Veteran should have a written plan from which to work post-appointment and allow them to reference and mark progress.

Overall, the PHP includes a combination of clinical information and a treatment plan along with the Veteran’s mission, and shared goals. It addresses the skills and support needed to help engaged patient’s manage their disease in order to maintain optimal health and well-being, or manage chronic disease and disability to the greatest extent possible.
The plan includes the elements of:

- Personal mission (what matters)
- Shared goals
- Self-care
- Professional care
- Skill building and education
- Consults and referrals
- Timeline and follow-up

The clinician seeks to understand the patient’s strengths and challenges and connects/refers the Veteran to others who can help. The personal health plan is documented in the record and shared with the patient. The elements may be captured in different areas of CPRS, a locally developed template, or a hand-written or typed document. All members of the healthcare team are aware of and contribute to these elements and the Veteran is the primary “owner”.

Some overarching questions to consider in the creation of the PHP:

- Does plan align with what the patient wants their health for (Veteran’s aspirational goal)?
- Does current plan address the patient’s goals for the visit?
- How important does the patient think it is to implement the plan/make the change?
- How confident is patient in being able to make the change?

The PHP components include:

- Personal Mission:

  The patient is the expert on his life, values, goals and priorities. Only he or she knows what they want their health for. Their knowledge of themselves and their mission is what drives their health and healthcare. The first and perhaps most important part of the PHP is the identification of the Veterans' personal mission and life aspirations. This is identified in the Whole Health Assessment stage of the personal health planning approach, specifically in the Personal Health Inventory (PHI). See Appendix A for an example of a PHI – MyStory PHI.

- Shared goals including overall life and health goals:

  The shared goals identified in the second step of the personal health planning process should be included in the personal health plan. This process provides patients with the support they need to make the best individualized care decisions, while allowing providers to feel confident in the care they prescribe. The clinician provides his expert knowledge while respecting the patient’s rights to be fully informed of all of his/her options.

- Self-care:

  Self-care and mindfulness are inter-related. Mindfulness is being fully aware, or paying attention. Sometimes, we go through our daily lives on autopilot. We are not fully aware of the present. We often dwell on the past and plan events in the future. We do not spend much time really paying attention and noticing what is happening right now; without judging or trying to fix it. Being mindful, or aware, allows you to make conscious proactive choices about every aspect of your health. Mindfulness connects you
to each component of your well-being, and to your whole self, and orients you to which self-care mechanism may most fit your needs and life aspirations.

Self-care is often the most important factor in living a healthy life, which in turn allows an individual to live his/her life fully, in the ways that matter to them. Self-care includes all the choices one makes on a daily basis that affect the physical, mental, and spiritual health. In fact, how one takes care of oneself will have a greater impact on his/her health and well-being than the medical care they receive. The Components of Health and Wellbeing (outlined earlier) is a great tool to help Veterans identify areas in their life that could be supported through self-care mechanisms. Additionally, complementary and Integrative Health (CIH) approaches often are often helpful in supporting the self-care.

- **Professional Care:**

  Professional care includes disease prevention, treatment plans that contain both conventional and complementary and integrative health approaches, as well as pharmaceuticals and supplements. The plan to manage or treat disease, and to prevent disease, will include strategies that are rooted in self-care.

  Additional information can be found at:
  - [http://healthforlife.vacloud.us/navigator/#149](http://healthforlife.vacloud.us/navigator/#149)
    - (username and password: service)

- **Support including skill building and education:**

  This section explores the types of support that can assist the Veteran in successfully achieving health goals and life aspirations. For Example:
  - Social Support: positive social support (such as family/friends, coworkers, healthcare team, and community,) play an important role in one’s ability to make healthier choices.
    - The PHP should identify the veteran’s preferred support system so the healthcare team can work collaboratively with them.
  - VA Resources: There are many resources available in the VA healthcare system, but before making recommendations, it is helpful to evaluate the Veteran’s needs for skill building and training so that we provide them with every opportunity to be successful.
  - Community Resources: In addition to the numerous VA resources, the community often offers additional resources for Veterans.
    - NOTE: It is helpful to become familiar with your facility’s environmental scan, often available through the Health Promotion Disease Prevention (HPDP) coordinator. HPDP environmental scan is a tool used by VHA clinicians to identify resources in the community. Community resources may include but not limited to physical fitness, spiritual guidance, integrative health modalities, etc. that may be more convenient for the Veterans especially for Veterans living in rural communities and do not have access to all VA services. This [link](http://vaww.prevention.va.gov/Healthy_Living_Messages.asp) discusses the various environmental scans as well as the toolkit.
**Next Steps after the PHP is designed and documented:**

- **Consults/Referrals:** Refer to specialists and/or programs for which the Veteran has expressed an interest and/or willingness in seeking to work on the shared goals. Some of the referrals may include additional tests/measurements to assist the provider in ongoing evaluation of any disease processes.

- **Timeline and follow-up:** Clear next steps should be discussed and included in the plan, which could include a secure message from the patient to check in on progress, collaboration with a health coach, or a scheduled phone call.

- **Support:** Most people need support during the change process, and encouragement is critical during this step. Social support groups, mental health groups, and peer support groups could be helpful Veterans to cope with their disease and or life stressors.

- **Note:** Personal Health Planning is also very effective when done in a group setting, such as Shared Medical Appointment, as evidenced by VA's Whole Health Group Based pilot project on peer led groups (Simmons et al.). The participants described the program as a positive experience that facilitated personal engagement in their health.

- **See appendix B for an example of a PHP.**

**4. SKILL-BUILDING & SUPPORT**

This is the final organizing principle of the personal health planning process. This step is about supporting the personal health plan (PHP). The PHP is a living document. Over the course of a lifetime, a person’s condition and situation changes. The PHP is reviewed with the patient and updated at least annually or as significant changes occur in their health or life. During follow-up it is important to identify successes as well as failures so that the Veteran can modify the goals to be more realistic. Another strategy that can be offered during this discussion with the Veteran is support through peer support, health coaching, case management, or Veteran groups. Ensure the PHP is effectively communicated to the Veteran as well as the expanded team members and partner services involved in providing the Veteran’s care.

Veterans are the key drivers of their own health care. This is a shift and a part of the cultural transformation at VHA. VA clinicians should partner with Veterans to work on shared health goals. Clinicians and staff should invite a patient’s questions until shared understanding is achieved every time. Including the Veteran and their families in quality improvement and in the design of care processes will give clinicians and staff important perspectives and spark ideas that may be wholly different from their own knowledge. Clinicians are skilled at providing support and resources to Veterans and as a result empower them to make their own health care goals.

**Changing the Conversation**

This section provides guidance, sample conversation starters, and tools that can be used to discuss the personalized health planning process with your patients. We know that time is of the essence during patient appointments. So how do we get address patient’s whole health and get to “what really matters” to them in a busy clinical setting? This is a team process and the following steps can be addressed by a variety of team members.

The [Circle of Health Brief Guide](#) is a tool designed to help guide the clinician in quickly exploring and discussing the Veteran’s priorities and values in key areas of the Veteran’s life. This information informs
discussion to link life goals and health goals; a defining step in practicing Whole Health care. This tool facilitates the conversation about what matters to Veterans by graphically illustrating that they are at center. At the center of the circle is “Me”—who they are as a person, and expands outward to encompass mindful awareness, the eight areas of self-care, professional care, and the community. Print this tool front-to-back and laminate it, as desired. The front-side of the tool has the “Circle of Health” graphic and the back-side has simple ABC steps and for clinicians, along with examples about changing the conversation and personal health planning.

See Appendix A and Appendix B for personal health inventory and personal health plan examples.

As service members of our nation’s military, Veterans committed to the mission of defending our country. To ensure success, they developed a plan of action. They received training to execute the plan. Lastly, they were a part of team, built on trust, designed to provide support. These steps can be applied to the Veterans themselves, as a strategy to their medical care, health and well-being.

As health care providers, our mission is to support the Veterans in achieving their health goals. The steps to do this are not concrete; the plans of action are not finite; there is not a ‘checklist’ for completing or implementing the plan. The process is a dynamic, individualized approach to care that is strengthened through the partnership and deepening conversations between the Veterans and their health care teams. This is a process of exploration, not of just the health issues of Veterans, but of their values and ideals.

Resources

The Office of Patient Centered Care & Cultural Transformation has a team of Personal Health Planning consultants that are available to assist you. They provide support and expertise in the design, implementation, dissemination, and sustainment of the personal health planning approach. They can assist in developing a plan specific to your needs and providing resources. Below is a brochure about the Personal Health Planning Consultative services that are available. If you would like to discuss any of these services with a PHP Consultant please email VHAOPCC&CTPHI_PHPSpecialistTeam@va.gov

Read the Personal Health Planning (PHP) Consultation brochure here.

Additional resources can be found at:

- OPCC&CT SharePoint Site: [http://vaww.infoshare.va.gov/sites/OPCC/default.aspx](http://vaww.infoshare.va.gov/sites/OPCC/default.aspx)
- Motivational interviewing (MI)- an invaluable technique when working through the stages of change with a Veteran. More information on MI can be found at:
Appendix A: Juan’s Story  - Personal Health Inventory

Introduction to Juan

Juan Caprillo is an Army Veteran and proud father of two young children and a newborn baby. Juan has arthritis and high blood pressure and is moderately overweight. He takes medication for arthritis and high blood pressure. His knees really bother him and the pain keeps him from exercising. He wants to lose weight and be active with his children. He also wants to limit the amount of medication he has to take for arthritis and high blood pressure.

Juan’s Personal Health Inventory

What REALLY matters to you in your life?
My family is important to me.

What brings you a sense of sadness or sorrow?
Not being able to play outside with my children. I don’t like taking medication.

What do you want your health for?
I want to be physically active with my children and to do more around the house. I want to be able to exercise again.

On the following scales, place an “X” showing where you feel you are on the scale.

**Physical Scale:**

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I am frustrated about my weight and the pain in my knees. I used to be so strong and active and I want that back. I don’t like having to take so much medication for arthritis and high blood pressure.

**Mental/Emotional Scale:**

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<td>(happy, hopeful, connected, content)</td>
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I am a pretty happy person in general. I am just really frustrated right now.

**Life Scale: How is it to live your day to day life?**

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<td>(easy, fulfilling)</td>
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It is pretty hard living my life right now between the kids, a new baby, and my health.

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**Current and Desired States**

**Working the Body:** “**Energy and Flexibility**” Movement and physical activities like walking, dancing, gardening, sports, lifting weights, yoga, cycling, swimming, and working out in a gym.

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<th>Current State: Rate yourself on a scale of 1 (low) to 10 (high)</th>
<th>Desired State: Where would you like to be?</th>
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<td>1 2 3 4 5 6 7 8 9</td>
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What are the reasons you choose this number?

* I like exercising, but I can’t anymore with the pain in my knees.

What changes could you make to help you get there?

* I really want to get back in shape so I can play soccer with my kids and be strong again.

**Recharge:** “**Rest and Sleep**” Getting enough rest and sleep and participating in activities that help you feel recharged and fueled.

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What are the reasons you choose this number?

* I have trouble sleeping when I am stressed. A new baby makes sleep difficult, but that comes with the territory. I get up with the baby at least once a night to help my wife get some rest.

What changes could you make to help you get there?

* I sleep a little better if my wife and I have had time to talk before bed. Maybe we could make that an everyday goal.

**Food and Drink:** “**Nourish and Fuel**” Eating healthy well-balanced meals with plenty of fruits and vegetables.
each day. Drinking enough water and limiting sodas, sweetened drinks, and alcohol.

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What are the reasons you choose this number?

*My eating is out of control. I have trouble avoiding junk foods and I eat when I am bored or upset.*

What changes could you make to help you get there?

*I could cut down on the snacking and choose healthier snacks. I eat less when I am active or less stressed.*

**Personal Development:** “*Personal life and Work life*” Learning and growing. Developing abilities and talents. Balancing responsibilities where you live, volunteer, and work.

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What are the reasons you choose this number?

*I’d like a job that makes more money so I wouldn’t worry so much about bills. I can’t go back to school though.*

What changes could you make to help you get there?

*It may seem small, but snacking less may actually save money. I just don’t see how I can do a lot in this area right now.*

**Family, Friends, and Co-Workers:** “*Hearing and Being Heard*” Having caring and supporting relationships where you feel heard and connected to the people you love and care about. The quality of your communication with family, friends and your co-workers.

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What are the reasons you choose this number?

*I have a very supportive wife and great kids. My sister is there for me, too. We got closer when my mom died. I just don’t usually ask others for help.*

What changes could you make to help you get there?

*I am pretty good in this area. I guess I could talk to my wife when I am stressed, or even lean on my sister a little.*
**Spirit and Soul: “Growing and Connecting”** Having a sense of purpose and meaning in your life. Feeling connecting to something larger than yourself. Finding strength in difficult times. This may include your faith or religion, meaningful community organizations, or other sources of comfort and strength like music, nature, or the arts.

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What are the reasons you choose this number?
*I grew up in the church, but have gotten away from that with all my responsibilities. Going always helped me feel more balanced.*

What changes could you make to help you get there?
*Talk about no time for more things! I don’t know how I could fit this in right now. I’d like to bring my kids up in the church though.*

**Surroundings: “Physical and Emotional”** Feeling safe and having comfortable, healthy spaces where you work and live. The quality of the lighting, color, air, and water. Decreasing unpleasant clutter, noises, and smells.

<table>
<thead>
<tr>
<th>Current State: Rate yourself on a scale of 1 (low) to 10 (high)</th>
<th>Desired State: Where would you like to be?</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 2 3 4 5 6 7 8 9 10</td>
<td>1 2 3 4 5 6 7 8 9</td>
</tr>
</tbody>
</table>

What are the reasons you choose this number?
*My home is comfortable and nothing bad really comes to mind in this area.*

What changes could you make to help you get there?
*I think I am good in this area.*

**Power of the Mind: “Strengthen and Listen”** Tapping into the power of your mind to heal and cope. Listening to your inner thoughts, paying attention, and noticing. Using mind-body techniques like relaxation, breathing, biofeedback, or guided imagery.

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<td>1 2 3 4 5 6 7 8 9 10</td>
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</tbody>
</table>

What are the reasons you choose this number?
*In the Army, I really disciplined my mind and knew I could tackle anything. I haven’t thought about that since I got out. I am also kind of hard on myself and get frustrated easily.*

What changes could you make to help you get there?
*I’d like to think about this more. Maybe I can use some of that discipline from the Army to help me with my pain and weight. Maybe I can also be a little less tough on myself.*

What stands out for you about where you currently are and where you’d like to be?

*In some ways, I’m in pretty good shape. It’s nice to see that not everything about me is broken. I can see that so many things tie back to the pain in my knees and the things I can’t do. I feel motivated to work on things that would help me be more active with my kids.*

If nothing changes in your health and well-being choices, what do you think your health will look like 5 years from now? What might the worst case be?
I think I will continue to gain weight and do less and less with my kids. It might get in the way of having a good relationship with them. I might not be a good role model. And I do worry about high blood pressure. I don’t want to have to take more medication or end up with a heart attack like my mother.

If you make changes in your health habits, what is your likely health 5 years from now? What might the best case scenario be?

I can see me being an active part of my kids’ lives. I can see them looking up to me and looking to me to do stuff with them. It would be great not to have to take medication for arthritis or high blood pressure, or at least not as much. Way down the road, I can see me and my wife being an old happy married couple with great kids and maybe eventually grandkids.
Appendix B: Nate’s Personal Health Plan

NATHAN S. (Nate)
DOB: 11/11/1981

MISSION (in Nate’s words):

To be physically well enough to actively participate in all the events that matter to me, spending time outside doing nature photography and being with my girlfriend.

BRIEF SUMMARY OF PLAN (Top themes and Action Plan items):

You have a lot you want to do with your life, but you say you are overwhelmed, especially because of all your chronic illnesses. You want help navigating the system to work with them all. You have been working with a psychiatrist and mental health provider for assessments and counseling, in addition to taking your prescribed medications. Right now, you state that your physical well-being: how you eat and your activity level are your highest priorities. You have shared that your joy comes from photography, helping others, and feeling useful. You want to work with a Whole Health Coach to focus your efforts over the next 12 months.

OVERALL HEALTH GOALS:

1. Improve nutrition and lose 20 pounds within the next year. Work with a nutritionist or Dietitian through MOVE.
2. Increase physical activity (walking, hiking, yoga) to 30 minutes per day or a total of 180 minutes per week. Create an exercise plan with a personal trainer, and meet with trainer twice a month. Consider group classes.
3. Learn how to incorporate mind-body tools in daily life through exercises taught by mental health providers.

MINDFUL AWARENESS:

- Note your sleep patterns and keep a sleep journal: hours of sleep, times woke up, dreams, or flashbacks.
- Pay attention to what you notice just before a flashback, so you can learn more about the patterns and make it easier for you to predict when they will come. Continue to learn ways to keep yourself safe when they occur.

PROACTIVE SELF-CARE

A. Working the Body

As we agreed, start ramping up your exercise with the goal of getting 180 minutes (3 hours) each week. Go out hiking once or twice a week. You agreed that you could benefit from the help of a personal trainer. I will refer you to the MOVE program.

B. Recharge

Review the information on healthy sleep and make sure you follow the sleep hygiene steps. It is okay to continue with the melatonin. Keep following through with your counselor for the work with your PTSD. Consider the sleep study referral.
C. Spirit and Soul
You lit up talking about your photography. Be sure to keep it up. Display some of your work at that gallery that was interested. Continue to pray. A men’s prayer group might be a great way to get more social contact and help you feel more spiritually connected.

D. Surroundings
I am glad that you like your current home and have fixed it up. We discussed the safety of your home. You shared that you do not keep a gun at home because of the flashbacks. This is a good idea. I ask that you keep me updated if this changes for you, and I will continue to check in with you.

E. Power of the Mind
As we discussed during your visit, there are many ways to explore the mind-body connection. You can talk with your counselor about options, too. Suggest you start with deep breathing exercises as I demonstrated with you. I gave you a handout for that. Talk to your psychologist about biofeedback, as we discussed.

SUPPORT TEAM

<table>
<thead>
<tr>
<th>Principal Professionals</th>
<th>Personal Support Team</th>
</tr>
</thead>
<tbody>
<tr>
<td>Primary Care Provider</td>
<td>Girlfriend, Lisa (most support)</td>
</tr>
<tr>
<td>Psychiatrist</td>
<td>Friends (casual going out friends)</td>
</tr>
<tr>
<td>Mental Health Provider</td>
<td>Parents (does not rely on them)</td>
</tr>
<tr>
<td>Whole Health Coach</td>
<td></td>
</tr>
<tr>
<td>Dietitian</td>
<td></td>
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</tbody>
</table>

PROFESSIONAL CARE

Prevention
Up to date. Follow up with the cholesterol tests and A1c as scheduled.

Medications
Continue medications as prescribed. OK to continue dietary supplements, as we discussed.

Results
Blood pressure up at 150/90; return for re-check in 2 weeks.

Treatment (Conventional and Complementary)
Chiropractic is fine to continue, but use caution with intensive approaches where a lot of force is applied to your lower back. Start the new blood pressure medication. I am glad your psychologist is using some of the techniques helpful for PTSD, pain, and some of your other concerns.

Referrals
Nutrition and health coaching on board. Follow-up with that sleep study as discussed.

Skill building and education
Breathing techniques. Mindful eating.

FOLLOW UP (Next Steps)
1. Call to set up an initial appointment with the Whole Health Coach (within 1 week).
2. Register for the MOVE program and meet with the Dietitian (within 1 week).
3. Follow-up with the Sleep Study referral (within the next month).
4. Return for nurse blood pressure check (in 2 weeks).
5. See me again in 2 months, and we will go over supplements in depth at that time.