Whole Health: Change the Conversation

ADVANCING SKILLS IN THE DELIVERY OF PERSONALIZED, PROACTIVE AND PATIENT DRIVEN HEALTH CARE

VETERANS HEALTH ADMINISTRATION
OFFICE OF PATIENT CENTERED CARE & CULTURAL TRANSFORMATION

Prepared Under Contract to the VHA by Pacific Institute for Research & Evaluation
March 11, 2016
## Whole Health: Change the Conversation

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# AGENDA

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<tr>
<td>7:30am –  7:55am</td>
<td>Registration</td>
</tr>
<tr>
<td>8:00am –  8:15am</td>
<td>Welcome and Introductions</td>
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<tr>
<td>8:15am –  9:00am</td>
<td>Vision of Whole Health</td>
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<tr>
<td>9:00am –  9:05am</td>
<td>Movement</td>
</tr>
<tr>
<td>9:05am –  9:50am</td>
<td>Community &amp; Introductions</td>
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<tr>
<td>9:50am – 10:25am</td>
<td>Where We’ve Been, <em>Where We Want to Go</em></td>
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<tr>
<td>10:25am – 10:40am</td>
<td>Break (15 min)</td>
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<tr>
<td>10:40am – 11:20am</td>
<td>Possibilities</td>
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<tr>
<td>11:20am – 11:50am</td>
<td>The Power of You</td>
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<tr>
<td>11:50pm – 12:35pm</td>
<td>Lunch (45 min)</td>
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<tr>
<td>12:35pm – 1:50pm</td>
<td>Enhancing Healing Communication</td>
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<tr>
<td>1:50pm –  2:35pm</td>
<td>Mindful Awareness</td>
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<tr>
<td>2:35pm –  2:50pm</td>
<td>Break (15 min)</td>
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<tr>
<td>2:50pm –  4:05pm</td>
<td>Introduction to Personal Health Planning</td>
</tr>
<tr>
<td>4:05pm –  4:30pm</td>
<td>Introduction to Tai Chi &amp; Qigong</td>
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<tr>
<td>4:30pm</td>
<td>Adjourn</td>
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# Whole Health: Change the Conversation

## DAY 2

<table>
<thead>
<tr>
<th>Time</th>
<th>Topic/Title</th>
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<tbody>
<tr>
<td>7:30am – 7:55am</td>
<td><strong>Registration</strong></td>
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<tr>
<td>8:00am – 9:00am</td>
<td>Walking the Circle: <em>Working Your Body, Surroundings, Personal Development</em></td>
</tr>
<tr>
<td>9:00am – 9:40am</td>
<td>Walking the Circle: <em>Food &amp; Drink</em></td>
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<tr>
<td>9:40am – 9:55am</td>
<td>Mindful Eating</td>
</tr>
<tr>
<td>9:55am – 10:15 am</td>
<td>Walking the Circle: <em>Recharge</em></td>
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<tr>
<td>10:15am – 10:30am</td>
<td><strong>Break (15 min)</strong></td>
</tr>
<tr>
<td>10:30am – 11:30am</td>
<td>Walking the Circle: <em>Power of the Mind, Family, Friends &amp; Co-workers, Spirit &amp; Soul</em></td>
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<tr>
<td>11:30am – 12:30am</td>
<td>Complementary &amp; Integrative Health (CIH)</td>
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<tr>
<td>12:30pm – 1:00pm</td>
<td><strong>Lunch (30 min)</strong></td>
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<td>1:00pm – 1:30pm</td>
<td>Video: Escape Fire</td>
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<tr>
<td>1:30pm – 2:15pm</td>
<td>Pain Management &amp; Case Study</td>
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<tr>
<td>2:15pm – 2:30pm</td>
<td><strong>Break (15 min)</strong></td>
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<tr>
<td>2:30pm – 3:05pm</td>
<td>Narrative Medicine</td>
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<tr>
<td>3:05pm – 3:15pm</td>
<td>Movement</td>
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<tr>
<td>3:15pm – 4:15pm</td>
<td>Self-Care Strategies &amp; Compassion Practice</td>
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<tr>
<td>4:15pm – 4:30pm</td>
<td>Whole Health Teams &amp; Implementation Strategies</td>
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<td>4:30pm</td>
<td><strong>Adjourn</strong></td>
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<td>Time</td>
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<tr>
<td>7:30am – 8:00am</td>
<td><strong>Registration</strong></td>
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<tr>
<td>8:00am – 8:10am</td>
<td>Whole Health Check-in</td>
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<td>8:10am – 8:30am</td>
<td>PHI/PHP Case Study: PTSD</td>
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<td>8:30am – 8:45am</td>
<td>Movement</td>
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<td>8:45am – 9:45am</td>
<td>Breakout Groups: GI Case Study &amp; Mindfulness Skills Practice</td>
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<td>9:45am – 10:00am</td>
<td><strong>Break (15 min)</strong></td>
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<tr>
<td>10:00am – 11:30am</td>
<td>Whole Health Resources &amp; Promising Practices</td>
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<td></td>
<td><em>Group Discussion: Local Resources</em></td>
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<td>11:30am – 12:15pm</td>
<td><strong>Lunch (45 min)</strong></td>
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<tr>
<td>12:15pm – 1:15pm</td>
<td>Whole Health: Strategies for Implementation (small group)</td>
</tr>
<tr>
<td>1:15pm – 2:00pm</td>
<td>Whole Health: Strategies for Implementation (large group)</td>
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<td></td>
<td><em>Facility Leadership present</em></td>
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<tr>
<td>2:00pm – 3:00pm</td>
<td>Wisdom into Action &amp; Closing Circle</td>
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<tr>
<td>3:00pm</td>
<td><strong>Adjourn</strong></td>
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RUSSELL GREENFIELD, MD

Russell H. Greenfield, M.D. is Director of Greenfield Integrative Healthcare, PLLC and President of Greenfield Consulting, LLC. He completed his residency training in Emergency Medicine at Harbor/UCLA Medical Center and subsequently entered into an administrative and teaching fellowship. He became involved in the Emergency Medicine residency program at Carolinas Medical Center, where he was honored as the inaugural recipient of the Golden Apple Award for Excellence in Teaching. Russ later became one of the first four physicians worldwide to graduate from the fellowship in Integrative Medicine at The University of Arizona College of Medicine under the direct tutelage of Dr. Andrew Weil.

Russ was a consultant in the development of national model guidelines for the use of complementary and alternative therapies, is co-author of Healthy Child, Whole Child (2nd ed. HarperCollins, 2009), and was founding Medical Director of Carolinas Integrative Health, a freestanding center in Charlotte, NC owned and operated by the Carolinas HealthCare System. He currently maintains a medical practice in Charlotte and consults with businesses and organizations on integrative wellness initiatives.

DAVE RAKEL, MD

Dave Rakel, MD, is the Director of Integrative Medicine at University of Wisconsin Department of Family Medicine & Community Health. After medical school at Baylor College of Medicine, Dave completed a family practice residency in Greeley, Colorado. He spent the next five years in rural practice as one of two physicians staffing a fourteen-bed hospital in Driggs, Idaho. As Medical Director for Grand Targhee Ski resort, he developed an interest in Sports Medicine and received his CAQ in 1999. Dave completed a two-year fellowship in Integrative Medicine at the University of Arizona from 1999-2001. He joined the UW Department of Family Medicine in 2001 where he teaches and practices while serving as the Founder and Director for UW Health Integrative Medicine.

Dave is board certified in Family Medicine, Holistic Medicine and Sports Medicine. He is also certified in Interactive Guided Imagery. He is co-editor for the Textbook of Family Medicine and Editor for Integrative Medicine, now in its fourth edition. He has been awarded a number of teaching awards including the Baldwin E. Lloyd clinical teacher award, the UW Department of Family Medicine faculty excellence award, the Marc Hansen lecture award, and the resident Teacher-of-the-Year award. His interests include learning how the body self-heals, mind-body health influences, sports medicine, nutrition and incorporating health and healing curriculum into medical school education.
ADAM RINDFLEISCH, MD

PIRE Consultant & Faculty, Whole Health Clinical Program  
UW Director & Faculty, Whole Health Advanced Clinical Education Program  
Director, Academic Integrative Medicine Fellowship Program  
UW-Madison Department of Family Medicine & Community Health

Adam Rindfleisch, MD, is an Associate Professor in the University of Wisconsin Department of Family Medicine & Community Health. He graduated from Albertson College of Idaho in Caldwell, Idaho and completed a Masters of Philosophy at Oxford in Comparative Social Research. He completed his medical training at Johns Hopkins University School of Medicine and his family medicine residency at the University of Wisconsin Madison.

In 2005, Adam completed the University of Arizona Online Integrative Medicine Fellowship and a UW Fellowship in Academic Integrative Medicine. Since that time, in the role of Integrative Medicine Fellowship Director, he has been developing a comprehensive Integrative Medicine curriculum for fellows, residents and faculty colleagues, which is currently also being used by the Osher Integrative Medicine Fellowship in San Francisco. Adam has an integrative primary care practice and routinely does integrative medicine consultations as part of his practice.

Adam is course director of the Humanistic Elective, in Activism, Reflective Transformation, and Integrative Medicine (HEART-IM), which supports 4 weeks of Integrative Medicine learning at a retreat center in the redwoods for fourth year medical students from around the country. He has been the recipient of several teaching awards at University of Wisconsin. Adam’s interests include dietary supplements, mind-body medicine, healthcare practitioner self-care, and shamanism.

CHRISTINE MILOVANI, MSW, LCSW

Program Director & Faculty, Whole Health Clinical Education  
PIRE Consultant, Synergy Whole Health/Healing & Balance LLC

Christine Milovani, LCSW, received her Bachelors in Social Work from Marquette University and her Masters Degree in Clinical Social Work from University of Wisconsin-Madison with a focus on Integrative Health. She is a Licensed Clinical Social Worker, Certified Clinical Hypnotherapist, Certified Reiki Master Teacher and a Certified Integral Qigong & Tai Chi Practitioner. Over the past 16 years she has focused on teaching practices of self-care including meditation, mindfulness, breath awareness, reiki, qigong, tai chi, guided imagery, and hypnotherapy.

Christine excels at heart-centered patient care while improving the effectiveness of health care systems. She has worked as a Medical and Clinical Social Worker in hospital and clinic settings in the areas of Mental Health, Adolescent Psychiatry, Emergency Services, Cardiology Services and Wellness Clinics. She has successfully integrated aspects of whole health practices into each of these clinical settings, and enjoys mentoring other clinicians to do the same. Christine has maintained her private practice in Madison, Wisconsin since 2000, and has coordinated and facilitated groups, workshops, retreats and conferences since 1990 in the areas of Personal Development, Spirituality, Resilience and Health.
ABOUT THE COURSE

This 3 day clinical education program is designed to extend the boundaries of care beyond disease management to include the creation of health and wellness, both for the Veteran and the clinician caring for them. Non-surgical and non-pharmacological means of addressing common conditions that Veterans face and the research into these techniques will be discussed, and case studies will be used to support clinical relevance.

The program also faces clinician burnout head on by providing a personal experience for clinicians to consider while enhancing their sense of purpose, their resilience, and their health. Experiential learning, dialogue, and opportunity for reflection will occur alongside traditional didactic teaching methods to help enhance self-care and practice at the local level. Participants will ultimately be welcomed as collaborators in the transformation of healthcare both within and outside VHA.

You are invited to:

- Be an integral part in leading the VHA's #1 Strategic Goal in advancing personalized, proactive, patient-driven care.

- Learn about co-creating a Whole Health experience that can bring more fulfillment to your clinical practice.

- Receive evidence-based tools and information to support your health and well-being, as well as that of your patients and co-workers.

- Share your experiences and your wisdom as you engage in collaborative conversations about the future of healthcare and how to take action in your facility.

- Enhance your knowledge of clinical, VHA and community resources.

During this program you will learn how to:

- Develop treatment plans that are even more personalized and that can better reflect the goals and values of the Veterans you serve.

- Collaborate with Veterans to find proactive opportunities that help prevent illness, optimize health, and support the innate healing response through diet, lifestyle, and select complementary therapies.

- Better understand what really matters in each Veteran’s life, so the healthcare decisions jointly made are patient-driven and engage them in moving toward whole health.

- Integrate mindful awareness in your daily interactions.
VISION REFLECTION QUESTIONS

Find a partner you don’t know well and introduce yourself. Take 2 minutes each to ask each other the following, in any order you like:

1) Why are you here…at this course?

2) Why are you here… working in the VA?

3) Why are you here… in health care?
DEFINITIONS

PATIENT-CENTERED CARE
A system that prioritizes the Veteran and their values, and partners with them to create a personalized, proactive strategy to optimize health and well-being. (*OPCC&CT*)

VHA #1 STRATEGIC GOAL
Provide Veterans personalized, proactive, and patient-driven health care. *(From VHA 2013-2018 Strategic Plan)*

VA HEALTH CARE DELIVERY
VA health care partners with each Veteran to create a personalized, proactive strategy to optimize health and well-being, while providing state-of-the-art disease management.

HEALTH
A state of complete physical, mental, and social well-being, and not merely the absence of disease or infirmity *(World Health Organization & cited in VHA 2013 – 2018 Strategic Plan)*

WHOLE HEALTH
Whole Health is patient centered care that affirms the importance of the relationship and partnership between the patient and their community of healthcare providers. The focus is on empowering the self-healing mechanisms within the whole person while co-creating a personalized, proactive, patient-driven experience. This approach is informed by evidence and makes use of all appropriate therapeutic approaches, healthcare professionals and disciplines to achieve optimal health and well-being.

*(Adapted from the Consortium of Academic Health Centers for Integrative Medicine and the VHA 2013-2018 Strategic Plan).*

COMPONENTS OF PROACTIVE HEALTH AND WELL-BEING
A conceptual framework that depicts whole person health care. The graphic model is a circle that begins at the core with the word “Me” and expands outward to encompass mindful awareness, self-care, professional care, and the community.
PERSONALIZED
A personalized approach requires dynamic customization of self-care and professional health and social service strategies in a manner that is specifically relevant to the individual, and based upon factors such as their medical conditions, their genome, their lifestyle, needs, values and circumstances. (From the Department of Veteran Affairs Blueprint for Excellence, VHA 9/21/2014).

A dynamic adaptation or customization of recommended education, prevention and treatment that is specifically relevant to the individual user, based on the user’s history, clinical presentation, lifestyle, behavior and preferences. (From VHA 2013 – 2018 Strategic Plan)

Plain Language: Tailoring a person’s healthcare to their individual characteristics, medical conditions, genes, circumstances, values, etc.

PROACTIVE
Proactivity implies strategies that strengthen the person’s innate capacity for health and healing, such as more holistic, mind/body approaches, including nutrition, exercise and healthy behaviors related to tobacco, alcohol, prescription medications and other substances. (From the Department of Veteran Affairs Blueprint for Excellence, VHA 9/21/2014).

Acting in advance of a likely future situation, rather than just reacting; taking initiative to make things happen rather than just adjusting to a situation or waiting for something to happen. (From VHA 2013 – 2018 Strategic Plan).

Plain Language: Using strategies that strengthen the person’s innate capacity for health and healing, such as mind/body approaches and nutritional strategies prior to surgery or chemotherapy.

PATIENT-DRIVEN
Being patient-driven is perhaps the most critical of the three attributes of this new model of healthcare. Motivation for health and engagement in care is fundamentally rooted in and driven by that which matters most in a person’s life, and the best possible outcome is alignment of an individual’s health care with their day-to-day, and longer-term, life goals. Together with Veterans Service Organizations and other advocates, VA can inspire motivation for health and engagement in care to help Veterans become increasingly “mission-ready” for their lives. (From the Department of Veteran Affairs Blueprint for Excellence, VHA 9/21/2014).

An engagement between a patient and a health care system where the patient is the source of control such that their health care is based in their needs, values, and how the patient wants to live. (From VHA 2013 – 2018 Strategic Plan).

Plain language: Healthcare that is based in and driven by what really matters to the person in their life, and aligns their health care and goals accordingly. This requires that we change the conversation and start from a different place.
PERSONAL HEALTH PLANNING
The personal health planning process partners with Veterans to achieve optimal health and well-being. This is a process of exploration, not just of the health issues of Veterans, but of their values and ideals.

PERSONAL HEALTH PLAN
A uniquely personalized plan for health that is built upon each patient’s values, conditions, needs, and circumstances which uses the most appropriate interventions and strategies. It addresses the skills and support needed to help engaged patients manage their disease, in order to regain and maintain optimal health and well-being, or manage chronic disease and disability to the greatest extent possible. (From VHA 2013 – 2018 Strategic Plan)

SELF-CARE
Self-care is the ability of individuals, families, and communities to promote health, prevent disease, and maintain health to cope with illness and disability with or without the support of a health-care provider. (World Health Organization 2013)

PERSONAL HEALTH INVENTORY (PHI)
A self-assessment tool to help people explore areas of their life. It asks people to think about what really matters to them and brings them happiness or sorrow. It asks them to reflect on what they want their health for and to rate their physical and mental/emotional states and life circumstances. It includes an assessment of the eight components of self-care, recognized by the World Health Organization to affect health outcomes.

MINDFUL AWARENESS
Mindful awareness is a foundational skill in a proactive approach to one’s life and health. An essential element of this approach is being fully aware and present in a non-judgmental manner.

CENTERS OF INNOVATION
The elements of our strategies are organized around the Office of Patient Centered Care and Cultural Transformation Innovation Engine Model, namely the Voice of the Veteran, Clinical Experience and Innovation, Outcomes and Analysis, Education and Training, and Deployment across the Field. In FY11, the Office partnered with nine VA medical centers to become Centers of Innovation (COI). Five of the COIs are facilities well engaged in their journey to Patient Centered Care, and 4 of the COIs are brand new medical centers who can embed Patient Centered Care elements throughout their organization, including the hiring process. Funding has been provided to the COIs to further their innovation and piloting of new models of care, and funds were also awarded to support other innovative projects throughout all VA Medical Centers.

ELEMENTS OF PATIENT CENTERED CARE
Comprised of both the experience (Healing Environments and Healing Relationships) and practice (Components of Health and Well-Being and the Personalized Approach) of patient centered care, based on a whole person approach, and set upon the foundation of the VHA ICARE principles: Integrity, Care, Accountability, Respect, and Excellence.
EXPERIENCE OF HEALTHCARE
The foundation of an optimal “experience” of healthcare is the healing relationship, within which providers can use the power of their words and the strength of their caring to support healing, even when physical curing is not possible. Care can be provided in healing environments with attention to making the spaces feel safe, comfortable, and peaceful. VHA leaders across the country have made this cultural transformation a priority and national training programs are underway to help every employee understand their role in creating healing relationships and healing environments. In addition, VHA construction and design guidelines have been updated to support the creation of healing spaces for Veterans as renovation occurs and new spaces are created.

HEALING ENVIRONMENTS
A healing environment is a setting that supports and empowers patients, families, and caregivers during illness, hospitalization, medical visits, recovery, and bereavement. A healing environment fosters health, healing, well-being, and a sense of community by introducing positive surroundings, spaces, and ambience that reduce stressors and impediments to recovery resulting in improved health outcomes and increased satisfaction of Veterans and staff.

HEALING RELATIONSHIPS
Healing relationship are developed when provider and staff use the power of their words and the strength of their caring to support healing, even when physical curing is not possible.
DAY 1

MODULE 2: COMMUNITY & INTRODUCTIONS

COMMUNITY AGREEMENTS

- **BE PRESENT.** We invite you to be present during this time together. Set aside distractions and allow yourself to be curious and open-minded. Your participation matters in pairs, small groups and large group discussions. Please show up on time at the start of the day and after breaks, and the instructors will make sure that you are able to leave on time each day. Please silence pagers and cellphones.

- **BE CURIOUS.** We invite your curiosity and questions. Take time to reflect and ask questions for yourself and each other. It is okay to respectfully disagree and to be open to new ideas. Consider where others are coming from in their own experience. Pay attention and learn from your own reactions, responses and experiences.

- **BE SILENT, SOMETIMES.** It is also okay for you to pass or observe, if you are not ready to share or discuss during an exercise. It is also helpful to take a moment of silence after an exercise, or after someone shares, as an opportunity to deepen your presence and learning.

- **BE RESPECTFUL.** We invite you to consider open and respectful body language that invites others to explore these concepts with you. A more helpful learning environment exists when one person is speaking at a time. We also ask to refrain from advice giving, to speak your own truth, and to use “I” statements as much as possible.

- **BE CAREFUL.** We invite you to create a space of trust and safety with each other while exploring these concepts for yourself. It is important to make sure that what is shared in small groups or the large group remains confidential, and is not repeated without express permission. Share what you have learned and your own experiences.

- **BE HEALTHY.** We invite you to stretch and move during the next three days together to take care of your body. You will receive a morning and afternoon break, in addition to lunch. We also invite your to take breaks, walk outside and care for your whole self, as needed.

- **BE HONEST.** We invite you to share your responses with us and let us know how we can improve, and what is working for you. We learn from you, and respect your opinions and experiences related to the course and the integration into your clinical practice. There will be opportunities each day to share your feedback on Pulse Checks and a final evaluation. We thank you in advance for taking the time to share your ideas.
**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 month (Self-Care)</th>
<th>Ate both fruits and veggies one day in the past week (Food &amp; Drink)</th>
<th>Have a spiritual community (Spirit &amp; Soul)</th>
<th>Have good communication with someone every day (Family, Friends, Co-workers)</th>
<th>Spent time on a farm (Surroundings)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sleep 7-8 hours a night (Recharge)</td>
<td>Play a sport (Working Your Body)</td>
<td>Listen to Classical Music (Surroundings)</td>
<td>Go to fitness class at least once a week (Working Your Body)</td>
<td>Did an art or craft project in last year (Personal Development)</td>
</tr>
<tr>
<td>Did an activity outside this past week (Surroundings)</td>
<td>Am currently taking a class outside of work (Personal Development)</td>
<td>WHOLE HEALTH FREE SPACE</td>
<td>Play a musical instrument (Personal Development)</td>
<td>I take at least one 15 minute break while I am at work (Recharge)</td>
</tr>
<tr>
<td>Went on a personal or outdoor adventure in past year (Surroundings / Personal Development)</td>
<td>Read an inspirational poem in the past month (Spirit &amp; Soul)</td>
<td>Have a vegetable garden (Food &amp; Drink, Surroundings)</td>
<td>Have a pet (Surroundings / Family, Friends &amp; Co-workers)</td>
<td>Practice Mindful Awareness at least 3 times a week (Power of the Mind)</td>
</tr>
<tr>
<td>Have a live plant at work (Surroundings)</td>
<td>Ate lunch with someone last week (Food &amp; Drink / Family, Friends, 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>Have volunteered in the community in the past year (Personal Development)</td>
</tr>
</tbody>
</table>
EIGHT AREAS OF PROACTIVE SELF-CARE

1) Choose an area below that helps you thrive in your life.

2) Introduce yourself to your neighbor and share how this area supports your overall health and well-being?

LARGE GROUP INTRODUCTIONS

This room is filled with clinicians from many different areas, who also have knowledge and experience with different resources for the Veterans. We would like to take a moment to have you introduce yourselves to the larger group. (10-15 seconds each).

Please briefly share the following information:

- Your name & your role/team at the VA
DAY 1

MODULE 3: WHERE WE’VE BEEN, WHERE WE WANT TO GO

BRAINSTORM

What is wrong with the practice of healthcare today?

What is right with the practice of healthcare today?
Identify something that you hold to be:

- A belief:

- An opinion:

- A fact:
DAY 1

MODULE 5: THE POWER OF YOU

CARE MEASURE FOR EMPATHY

Developed by Dr. Stewart Mercer and colleagues in the Departments of General Practice at Glasgow University and Edinburgh University.

ITEMS FOR EMPATHY SCORING:

- Making you feel at ease
- Letting you tell your “story”
- Really listening
- Being interested in you as a whole person
- Fully understanding your concerns
- Showing care and compassion
- Being Positive
- Explaining things clearly
- Helping you to take control
- Making a plan of action with you

Mercer SW and Reynolds W J. Empathy and quality of care. BJGP 2002, 52 (Supplement); S9-S12. The theoretical background and validation of the CARE measure can be found in:


RELIEVE

RELATIONSHIP centered care built on

EMPATHY and trust creates a positive environment where the clinician can

LISTEN to a complicated story that creates

INSIGHT into a problem that results in an

EXPLANATION that is consistent with the patient’s

VALUES leading to

EMPOWERMENT and action towards health

EXAMPLES OF CLINICIAN QUESTIONS / PROMPTS:

Remember to give context to the conversation and help the Veteran to understand how this information may impact their health and overall life goals. Empowering the Veteran to take an active role in their own self-care, and then offering additional resources and support from the team to help them achieve their goals.

CONVERSATION STARTERS & VISION QUESTIONS:

- It would help me partner with you in your care, if I understood what is important to you in your life.

- As we work together on your health goals, could you describe a vision of your best possible health?

- How does your current health impact what is most important to you?

- What is your vision of your best possible health?

CONNECTING TO CIRCLE OF HEALTH:

- In thinking about your best possible health, can you choose at least one self-care area that you would like to focus on today to support your health?

- How would focusing on this area of self-care support your health right now?

- What needs to change for you to achieve your best possible health?

SUPPORT NEEDED:

- What steps are you interested in taking to make a change for your health?

- What resources do you have that will help you achieve your goal?

- What support do you need in this area of your life?

- What support do you need from me, or your health team to make progress towards your goal?

- Would you like more information on this area of self-care?

- Are you interested in any specific referrals or resources to support your goal?
EMPATHY: QUESTIONS FOR PERSONAL REFLECTION

After watching this video, please note your experience. (thoughts, emotions, body sensations).

If you were in this video walking down the hallway, what would be written over your head to describe your experience in life right now?

Was there a time in your life when someone really listened to you and understood you? How did that feel? What was noticeable about the person’s approach, body language or words?

Think of a time when you were able to really listen and understand another person’s experience. How did that feel for you? What was the person’s response? What made it possible or easier for you to be fully present?
ENHANCING SKILLS: LISTENING AND EMPATHY

- What really matters to you in your life?
  - Ask this question to your partner
  - Listen to their answer (empathy)
  - Reflect back what you heard

ENHANCING SKILLS: OPEN ENDED QUESTIONS & REFLECTION

1) The speaker will choose one of these topics to focus on, and the listener will start by asking one of these corresponding questions:

- **Joy** – What brings you a sense of joy and happiness?
- **Dreams** – Describe one of your life-long dreams.
- **Vision of Health** – What is your vision of your best possible health?

2) Listen to the answer, pause, and reflect what you heard.

3) Ask relevant open-ended or clarifying questions

4) Consider asking this question:

   How would your life or health change if you focused on this in your life?
   - What would you be doing?
   - What would be different?
   - How would you feel?
REFLECTION WITH PARTNERS:

1) What did you notice and experience when you were sharing, and when you were listening?

2) How do the skills of listening, empathy and asking different types of open-ended questions support your clinical practice with Veterans?

3) How would you frame a conversation with a Veteran, before asking one of these questions? You might think about examples for different patient care situations.

VIDEOS:

Empathy: The Human Connection to Patient Care Video
https://www.youtube.com/watch?v=cDDWvj_q-o8

TC BAND Dream Rangers Video
https://www.youtube.com/watch?v=5mITOUzfu2w
DAY 1

MODULE 7: INTRODUCTION TO MINDFUL AWARENESS

DEFINITION OF MINDFULNESS

“Way of being in the present moment, on purpose, without judgment.”

EXAMPLES OF MINDFUL AWARENESS ACTIVITIES

- Mindful Breathing
- Mindful Walking
- Mindful Exercise
- Mindful Eating
- Mindful Meditation
- Mindful Centering Prayer
- Mindful Compassion Practice

**Informal Practice**: bringing mindful awareness to your daily activities

**Formal Practice**: having a set time and space that you practice the skill of mindfulness

DISCUSSION QUESTIONS:

1. How can you integrate mindful awareness in your clinical interactions?

2. How might you integrate mindful awareness in your daily life?
RESOURCES

MINDFULNESS TOOLS KIT:

Resources from the VHA Mindfulness Toolkit created by Greater Los Angeles under grant from OPCC&CT, produced by Finn Partners for the War Related Illness & Injury Center (WRIISC).

AUDIO FILES:

http://www.va.gov/PATIENTCENTEREDCARE/Podcasts.asp

Guided Meditation Podcast: Paced Breathing (7:50)
Guided Meditation Podcast: Mental Muscle Relaxation (5:01)
Guided Meditation Podcast: Mini Mental Vacation (7:39)
Introduction to Meditation with Dr. Greg Serpa (5 mins)
Grounding Meditation (5 mins)
Mindfulness of Breathing Meditation (10 mins)
Mindfulness of Sounds Meditation (10 mins)
Compassionate Breathing Meditation (10 mins)
Loving Kindness Meditation (10 mins)
Body Scan Meditation (15 mins)
Body Scan with Loving Kindness Phrases (15 mins)

VIDEO FILES:

What is Mindfulness?
https://www.youtube.com/watch?v=JbGe9BpniJo

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=zar42pt0kuZE

Mindfulness and Compassion
https://www.youtube.com/watch?v=VgJbYzl2Sjk

STAR WELL-KIT:
http://www.warrelatedillness.va.gov/education/STAR/

EVIDENCE MAP FOR MINDFULNESS:
DAY 1

MODULE 8: INTRODUCTION TO PERSONAL HEALTH PLANNING

KEY DIAGRAMS

RESOURCES

Link to My Story: Personal Health Inventory:

Link to the audio podcast of Dr. Tracy Gaudet taking you through the PHI:
MY STORY, MY HEALTH – PERSONAL HEALTH INVENTORY

Your PERSONAL HEALTH INVENTORY

1. What REALLY matters to you in your life?

2. What brings you a sense of joy and happiness?

3. On the following scales from 1-5, with 1 being miserable and 5 being great, circle where you feel you are on the scale.

Physical Well-Being:

<table>
<thead>
<tr>
<th></th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
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<tbody>
<tr>
<td>Miserable</td>
<td></td>
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<td>Great</td>
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Mental/Emotional Well-Being:

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</thead>
<tbody>
<tr>
<td>Miserable</td>
<td></td>
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<td></td>
<td>Great</td>
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Life: How is it to live your day-to-day life?

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</table>
WHERE YOU ARE AND WHERE YOU WOULD LIKE TO BE

(example of just one area of self-care rating, all would be listed in full form)

<table>
<thead>
<tr>
<th>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.</th>
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<table>
<thead>
<tr>
<th>Where you are now?</th>
<th>Rate yourself on a scale of 1 (low) to 5 (high)</th>
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<tbody>
<tr>
<td>1</td>
<td>2</td>
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<table>
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<tr>
<th>Where you would like to be?</th>
<th>Rate yourself on a scale of 1 (low) to 5 (high)</th>
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<tbody>
<tr>
<td>1</td>
<td>2</td>
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</table>

What are the reasons you choose this number?

What changes could you make to help you get there?

PROFESSIONAL CARE

Prevention:

On a scale of 1-5, circle the number that best describes how up to date you are on your preventive care such as a flu shot, cholesterol check, cancer screening, and dental care.


Clinical Care:

If you are working with a healthcare professional, on a scale of 1-5, circle the number that best describes how well you understand your health problems, the treatment plan, and your role in your health.


REFLECTIONS

Now that you have thought about all of these areas, what is your vision of your best possible health?

What would your life look like? What kind of activities would you be doing?

Are there any areas that you would like to work on? Where might you want to start?
SHARED GOALS

SMART GOAL:

- **Specific** – Be concrete about what you exactly what you want to do.
- **Measureable** – The amount of time and frequency that you will do the activity.
- **Action Oriented** – Describe the specific action of the goal.
- **Realistic** – Start with something small and achievable, and build on small steps.
- **Timed** – Have a start date and end date, and celebrate your success!

Examples:

“I plan to increase my vegetable intake by adding one serving of carrots to my lunch each day over the next week.”

“I will increase my movement this week by walking at lunch for 15 minutes each day.”
PERSONALIZED HEALTH PLAN TEMPLATE (PHP)

ASSESSMENT:

What really matters to me. My mission, aspiration, purpose (MAP). What I want my health for?

SHARED GOALS:

Overall well-being and health goals:

PLAN:

Mindful Awareness:

Self-Care:
Working your Body
Food and Drink
Power of the Mind
Recharge
Family, Friends & Co-workers
Spirit & Soul
Surroundings
Personal Development

Professional Care:
Prevention

Treatment Plans (including conventional and complementary approaches)
Pharmaceuticals and Supplements

SUPPORT:

Skill building and Education

Team Members (healthcare team, family, friends, community)

NEXT STEPS:

Consults/Referrals

Follow-up (including community resources)
For each of the areas below, place a rating in the outer ring:

1 – I would like more information
2 – I am interested in setting a self-care goal
3 – I would like more support in meeting my goal
4 – I am working toward my goal
5 – I achieved my goal or this area is a strength for me
SELF-REFLECTION

Please use these questions for further self-reflection. Based on time available, you may also discuss with a partner or with others at your table.

- What areas did you identify as a strength in your life? How do these areas of strength impact your health?

- What areas are you interested in setting a self-care goal? If you made progress in this area, would it impact any other areas?

- Do you see a relationship between any of these areas of self-care in your life?
Mission, Aspiration, Purpose: What really matters to me, and what I want my health for?

Proactive Self Care

As I reflect on aspects of Whole Health in my life, I am willing to take action this week regarding my own self-care in the area(s) that I have checked below.

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

My specific goal for the next week:

Resources that I have to meet my goal:

Support that I need to achieve my goal:
SAMPLE QUESTIONS TO EXPLORE COMPONENTS OF SELF-CARE

**Working Your Body “Energy & 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?

**Surroundings “Physical & 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 physical health and well-being?
- How often do you spend time outdoors or in nature?

**Personal Development “Personal Life & 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?

**Food & Drink “Nourishing & 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?
<table>
<thead>
<tr>
<th><strong>Recharge “Sleep &amp; Refresh”</strong></th>
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<tbody>
<tr>
<td>• Are you satisfied with your energy level on a daily basis?</td>
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<tr>
<td>• What time of the day are you most energized, and least energized?</td>
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<tr>
<td>• Do you wake up feeling rested? How much sleep do you get per night?</td>
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<tr>
<td>• Have you ever used guided imagery or breathing practices before sleeping?</td>
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<table>
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<tr>
<th><strong>Family, Friends &amp; Co-workers “Relationships”</strong></th>
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<tbody>
<tr>
<td>• Do you get the support you need from family and friends?</td>
</tr>
<tr>
<td>• Do you have someone you trust and can talk to about your health?</td>
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<tr>
<td>• Is there someone in your life that you share your thoughts and feelings?</td>
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<tr>
<td>• Do you feel supported by your co-workers?</td>
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<table>
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<tr>
<th><strong>Spirit and Soul “Growing &amp; Connecting”</strong></th>
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<tbody>
<tr>
<td>• Do you have a sense of meaning and purpose in your life?</td>
</tr>
<tr>
<td>• What does spirituality mean to you?</td>
</tr>
<tr>
<td>• Are you part of a spiritual or faith community?</td>
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<tr>
<td>• What gives you strength during difficult times?</td>
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<tr>
<th><strong>Power of the Mind “Relaxing &amp; Healing”</strong></th>
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<tbody>
<tr>
<td>• When do you feel most at ease and relaxed?</td>
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<tr>
<td>• How do you manage stress in your life?</td>
</tr>
<tr>
<td>• Where do you carry your stress in your body?</td>
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<tr>
<td>• Do you have a meditation or mindfulness practice?</td>
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</table>
DAY 1

MODULE 9: INTRODUCTION TO TAI CHI & QIGONG

RESOURCES

Tai Chi Evidence Map

STAR Well-Kit: Veteran explains his experience of Qigong
http://www.audio.va.gov/warrelatedillness/MP4/STAR_Well-Kit_2d.mp4

Health for Life: What Veteran’s Value
https://www.youtube.com/watch?v=g2pUQmitHPE

SOME BASIC MOVEMENTS COVERED IN THE COURSE:

- Centering posture with focus on alignment, breath and intention
- Flowing Motion: slowly raise hands up from side and flow back down weightless
- Swinging Arms, Ringing the Temple Bell or Knocking on the Door of Life
- Sensing Chi/Qi with your hands, Holding a Ball of Light
- Cloud Hands or Watching Clouds Pass
- Weight shifting for balance, eventually touch with one foot, then raise one foot
- Harmonizing Yin/Yang
- Gathering Heaven and Earth
- Rising Sun and Falling Rain
DAY 2 – COURSE MATERIALS

MODULE 10: MINDFUL EATING

A MINDFUL EATING SCRIPT

Begin by connecting to your breath and body, feel your feet on the ground and notice your experience in this moment. With your awareness in this moment, notice any thoughts, sensations or emotions you are experiencing. (Pause)

Tune into the awareness or sensation that you have in your body of feeling hungry, thirsty or maybe even feeling full. If you were going to eat or drink something right now, what is your body hungry for? What is it thirsty for? Just pay attention and notice with awareness the sensations that give you this information. (Pause)

Now, bring your attention to the item in your hand and imagine that you are seeing it for the first time. Observe with curiosity as you pay attention and notice the color, shape, texture, and size. Is there anything else that you notice, sense or feel? (Pause)

Imagine what it took for this item to get to your hands: sunshine, water, time, processing, and shipping. You may choose to be aware of gratitude for everyone involved in the cultivation and preparation of this item of food. You may choose to bring in your own gratitude or spiritual blessing. (Pause)

Now place the item between your fingers and feel the texture, temperature and ridges. You may notice smoothness or stickiness. Again, notice if you have any thoughts, sensations or emotions at this time. Continue to breathe and be fully present in this moment. (Pause)

Take the piece of food and bring it toward your nose and smell with your full awareness. Notice if you have any memories, sensations or reactions in your body. Even before you eat it, you may notice that you begin to have a digestive response in your body just by noticing and smelling. (Pause)

With full awareness of your hand moving toward your mouth, place the object (fruit or chocolate) into your mouth without chewing or swallowing it. Just allow it to be in your mouth, roll it around to different parts of your mouth and tongue. Notice the flavor and texture. Notice the physical sensations within your body, especially your mouth and your gut. Continue to breathe as you explore the sensation of having this item in your mouth. (Pause)

Next take just one bite and notice the flavor, notice the change of texture. Then very slowly begin to chew this piece of food, and notice the parts of your mouth that are involved in chewing. Notice the sound and movement of chewing, as you continue to notice the sensations and flavor. (Pause)

When you are ready, swallow this item and notice the path that it follows from your mouth and throat into your stomach. Notice the sensation and taste that may linger in your mouth. Connect again to your body and your breath and notice your experience in this moment. (Pause)

Next, I invite you to pick up another food item, and choose to eat it however you wish. Noticing your choice and your experience. Notice how it is similar or different. (Pause for 30-60 seconds, and then return to large group discussion about the experience).

Script written by Christine Milovani, LCSW

Resources:
Jon Kabat-Zinn. Fully Catastrophe Living; McWatters, Dawn R. 2009.
Principles of Mindfulness:

- Mindfulness is deliberately paying attention, non-judgmentally.
- Mindfulness encompasses both internal processes and external environments.
- Mindfulness is being aware of what is present for you mentally, emotionally and physically in each moment.
- With practice, mindfulness cultivates the possibility of freeing yourself of reactive, habitual patterns of thinking, feeling and acting.
- Mindfulness promotes balance, choice, wisdom and acceptance of what is.

Mindful Eating is:

- Allowing yourself to become aware of the positive and nurturing opportunities that are available through food preparation and consumption by respecting your own inner wisdom.
- Choosing to eat food that is both pleasing to you and nourishing to your body by using all your senses to explore, savor and taste.
- Acknowledging responses to food (likes, neutral or dislikes) without judgment.
- Learning to be aware of physical hunger and satiety cues to guide your decision to begin eating and to stop eating.

Someone Who Eats Mindfully:

- Acknowledges that there is no right or wrong way to eat but varying degrees of awareness surrounding the experience of food.
- Accepts that his/her eating experiences are unique.
- Is an individual, who by choice directs his/her awareness to all aspects of food and eating on a moment-by-moment basis.
- Is an individual who looks at the immediate choices and direct experiences associated with food and eating: not to the distant health outcome of that choice.
- Is aware of and reflects on the effects caused by unmindful eating.
- Experiences insight about how he/she can act to achieve specific health goals as he/she becomes more attuned to the direct experience of eating and the feelings of health and wellbeing.
- Becomes aware of the interconnection of earth, living beings, and cultural practices and the impact of his/ her food choices has on those systems.

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 MODULE 11: COMPLEMENTARY & INTEGRATIVE HEALTH (CIH)

GLOSSARY OF TERMS

**Acupressure**
A technique similar in principle to Acupuncture. Pressure, instead of needles, is used on the body’s surface and applied by hand, by elbow, or with various devices to stimulate the flow of energy within the body.

**Acupuncture**
The term “acupuncture” describes a family of procedures involving the stimulation of anatomical points on the body using a variety of techniques. The acupuncture technique that has been most often studied scientifically involves penetrating the skin with thin, solid, metallic needles that are manipulated by the hands or by electrical stimulation.

**Animal Assisted Therapy**
A type of therapy that involves an animal, other than a service animal, as a fundamental part of a person's treatment.

**Aromatherapy**
Ayurveda is a system of medicine that originated in India several thousand years ago. In the United States, Ayurveda is considered a type of CAM and a whole medical system. As with other such systems, it is based on theories of health and illness and on ways to prevent, manage, or treat health problems. Ayurveda aims to integrate and balance the body, mind, and spirit.

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**Biofeedback**
Biofeedback uses information from physiological monitoring devices to teach individuals how to consciously regulate physiological functions (e.g. brainwaves, skin temperature, heart rate) and is often used to induce the relaxation response.

**Chelation Therapy**
Chelation therapy is a chemical process in which a substance is used to bind molecules, such as metals or minerals, and hold them tightly so that they can be removed from a system, such as the body. For example, a person who has lead poisoning may be given chelation therapy in order to bind and remove excess lead from the body before it can cause damage.
Diet Therapy
Diet therapy uses specialized dietary regimens, not related to allergies or intolerance, to support the treatment or prevention of specific diseases (such as cancer or cardiovascular disorders) or generally to promote wellness. Other examples include the Mediterranean diet, the Ornish diet, a very low-fat vegetarian diet, and the anti-inflammatory diet. Some of these diets may include significant additions or reductions in certain daily nutrient requirements.

Dietary / Nutritional Supplements
A dietary supplement is intended to provide nutrients that may otherwise not be consumed in sufficient quantities. Supplements as generally understood to include vitamins, minerals, fiber, fatty acids, or amino acids, among other substances, usually sold in pill or capsule form. Examples include omega 3’s, melatonin, probiotics, SAMe, CoQ10, glucosamine, and chondroitin, as well as vitamins and minerals.

Guided Imagery
Guided Imagery is a technique used to guide an individual in mental imagery. Guided Imagery can help guide the mind and body toward a relaxed, focused state and are used to address physical, emotional and psychological issues.

Healing Touch
Healing Touch is an energy therapy in which practitioners consciously use touch with her hands in an intentional way to restore and promote health.

Herbal Medicines
Herbal medicine -- also called botanical medicine or phytomedicine -- refers to using a plant's seeds, berries, roots, leaves, bark, or flowers for medicinal purposes. Examples include Gingko, Valerian, Kava Kava, Echinacea, St. John’s Wort, Saw Palmetto.

Homeopathy
Homeopathy is a system of medical practices based on the theory that any substance that can produce symptoms of disease or illness in a healthy person can cure those symptoms in a sick person. For example, someone suffering from insomnia may be given a homeopathic dose of coffee. Administered in diluted form, homeopathic remedies are derived from many natural sources, including plants, metals, and minerals.

Hypnosis
Hypnosis is an altered state of consciousness characterized by increased responsiveness to suggestion. The hypnotic state is attained by first relaxing the body, then shifting attention toward a narrow range of objects or ideas as suggested by the hypnotist or hypnotherapist. A person under hypnosis is said to have heightened focus and concentration with the ability to concentrate intensely on a specific thought or memory, while blocking out sources of distraction.

Hypnotherapy
The application of hypnosis for therapeutic purposes.
Indigenous Healing Performed by a Healer
(e.g. Botanica, Curandero, Espiritista, Hierbero, Yerbera, Shaman, Sobador)
Methods based on indigenous theories, beliefs, and experiences. Healers implement health
practices, approaches, knowledge and beliefs incorporating plant, animal and mineral-based
medicines, spiritual therapies, manual techniques and exercises, applied singularly or in
combination to treat, diagnose and prevent illnesses or maintain well-being.

Integrative Health/Medicine
The practice of medicine that reaffirms the importance of the relationship between practitioner
and patient, focuses on the whole person, is informed by evidence, and makes use of all
appropriate therapeutic approaches, healthcare professionals and disciplines to achieve optimal
health and healing.

While synonymous with Integrative Medicine, the term Integrative Health more accurately
reflects the inclusive scope of this approach, which impacts the entire spectrum of health care
from optimizing health and well-being to prevention and the treatment and mitigation of chronic
diseases.

Massage Therapy
Massage Therapy encompasses many different techniques. In general, therapists press, rub, and
manipulate the muscles and other soft tissues of the body, primarily by using the hands and
fingers to enhance relaxation and well-being.

Meditation
Meditation is a mind and body practice and has been practiced by many different cultures
throughout the world for thousands of years. Generally, a person who is meditating uses
certain techniques, such as a specific posture, focused attention, and an open attitude toward
distractions. Meditation may be practiced for many reasons, such as to increase calmness and
physical relaxation, to improve psychological balance, to cope with illness, or to enhance
overall health and well-being. Practicing meditation can change how a person relates to the
flow of emotions and thoughts. There are many types of meditation- three common types of
meditation are defined below.

- **Mantram Repetition**
  A form of non-sitting meditation where sacred words or phrases are silently, internally
  repeated throughout the day as objects of concentration and re-directed attention.

- **Mindfulness**
  A form of meditation where the focus of attention is on what is being experienced in the
  present moment, without reacting to or judging it.

- **Transcendental Meditation**
  A technique of sitting meditation derived from Hindu tradition that promotes deep relaxed
  awareness through the use of a mantra.
Movement Practices (e.g. Alexander technique, Feldenkrais, Pilates)
A broad range of Eastern and Western movement-based approaches used to promote physical, mental, emotional, and spiritual well-being.

Music Therapy
The clinical and evidence-based use of music interventions to accomplish individualized goals within a therapeutic relationship to improve and maintain physical, cognitive, emotional and social functioning, as well as promoting health and optimizing well-being.

Native American Healing Practices
A Native American Healer or Medicine Man is a traditional healer who uses information from the “spirit world” in order to benefit the community. People see Native American healers for a variety of reasons, especially to find relief from illness or to find spiritual guidance.

Naturopathic Medicine
Naturopathic medicine or Naturopathy is a medical system that has its roots in Germany and was further developed between the 19th and early 20th century in the United States. Practitioners view their role as supporting the body’s ability to maintain and restore health, and prefer to use treatment approaches they consider to be the most natural and least invasive. These approaches include dietary and lifestyle counseling and may include the use of vitamins/nutritional supplements, herbal medicines, homeopathy, hydrotherapy, exercise therapy, therapeutic massage and joint manipulation.

Non-traditional Spiritual Practices (e.g. coordinated through Chaplain)
Alternative Pastoral / Spiritual Care utilizes spiritual interventions or practices provided or facilitated by qualified chaplains that lies outside of traditional religious / faith practices and traditional health care.

(By policy, In VA all pastoral / spiritual care for patients is either provided by or facilitated by VA chaplains. For example, if a Native American shaman provides direct patient spiritual care, it is under the management and supervision of a VA chaplain.)

Progressive Muscle Relaxation (PMR)
Progressive Relaxation is used to relieve tension and stress by systematically tensing and relaxing successive muscle groups.

Qi gong
Qi gong is an ancient Chinese discipline combining the use of gentle physical movements, mental focus, and deep breathing.

Reiki
Reiki is an approach where practitioners place their hands lightly on or just above a person, with the goal of facilitating the person’s own healing response.
Relaxation Therapy or Stress Management / Relaxation Therapy (SMRT)
Relaxation therapy is a broad term used to describe a number of techniques that promote stress reduction, by inducing the relaxation response. The relaxation response is characterized by slower breathing, lower blood pressure, and a feeling of calm and well-being.

Sweat Lodge
The sweat lodge (also called purification ceremony, sweat house, medicine lodge, medicine house, or simply sweat) is a ceremonial sauna and is an important event in some North American First Nations or Native American cultures.

Tai Chi
Tai chi, which originated in China as a martial art, is a mind and body practice. Tai chi is sometimes referred to as “moving meditation”—practitioners move their bodies slowly, gently, and with awareness, while breathing deeply.

Therapeutic Touch
Therapeutic Touch is a contemporary interpretation of several ancient healing practices. It is a consciously directed process of energy exchange during which the practitioner uses the hands as a focus to facilitate the process.

Traditional Chinese Medicine (TCM)
Traditional Chinese medicine is a broad range of medicine practices sharing common concepts which have been developed in China and are based on a tradition of more than 2,000 years, including various forms of herbal medicine, acupuncture, massage, exercise, and dietary therapy.

Yoga
Yoga is a mind and body practice with historical origins in India. Like other meditative movement practices used for health purposes, various styles of yoga typically combine physical postures, breathing techniques, and meditation or relaxation.

Reference
2015 Complementary and Integrative Health (CIH) Survey
Healthcare Analysis & Information Group (HAIG)
A Field Unit of the Office of Strategic Planning & Analysis within the Office of the ADUSH for Policy and Planning
MODULE 12: NARRATIVE MEDICINE

VIDEO

My Life, My Story
https://www.youtube.com/watch?v=fpzgVlExS20&feature=youtu.be

CASE STUDY – DAVE

- 68 year old male who is an Army Veteran (Vietnam).
- Married (2nd marriage) and has one son (47) and one daughter (45).
- Previous Car and engine mechanic, now retired.

Current concerns:

- Difficulty falling asleep, occasionally reports flashbacks and nightmares.
- Diagnosed as diabetic for 25 years.
- Struggles with managing blood sugar levels.
- Right BKA 4 years ago.
- Chronic pain in left leg with poor circulation and leg sores.
- Left foot was removed 3 days ago, and he is currently in the hospital preparing for surgery to remove his lower left leg tomorrow.
MY LIFE, MY STORY – DAVE

I had a good life until I was about 9 years old. My dad died from a heart attack and my mom remarried about a year and a half later. My stepdad was bad news; he and my mom burned down the family house to get the insurance money. After that there was nothing but craziness and alcohol at home. When I was 11 my parents lost custody of the 5 youngest kids and we moved to the Holy Family Orphanage in Marquette, MI.

Two years later I went into a foster home and they were a nice couple but the husband lost his job and they had to move so I went back to the orphanage. After that my younger brother and I got placed with an elderly couple that lived on a farm. Looking back on it I can see that they only wanted us there to help them work the farm. So that’s what we did. We went to school when we had the chance and basically ran the farm for them. They were mean people and used to lock us into our bedroom at night until it was time to milk the cows in the morning. I ran away when I was sixteen and half.

The state sent me to a reform school. I didn’t feel like I’d done anything to deserve that and I told them that I would run away again the first chance I had. Eventually they gave me permission to join the Army early so that I wouldn’t have to go back into foster care. I enlisted shortly before my 17th birthday.

My basic training was in Fort Knox, KY and I did my AIT training in Fort Dix. My MOS was 11-B-10, Weapons Specialist Demolition. Eventually I joined the Rangers (an elite infantry unit in the US Army). In December of 1964 I got my papers for Vietnam and was sent to Da Nang. It seemed like fun at first. I was 18 and a happy-go-lucky kind of guy. At that time we were serving as advisors in Vietnam and were not technically fighting the war. We did a little bit of advising and a little bit of fighting. I know that we could have wiped out the enemy at that time if we had been allowed to. They hadn’t built tunnels systems yet and there were a lot fewer of them then there were by ’68 and ’69. My unit had a lot of casualties but we done pretty good. The guys never lost their spirits.

In 1965 I shipped out to Bamberg, Germany. Our unit did border patrol on the East German border. I saw as much action in Germany as I had in Vietnam but the public never heard about it. We lost 7 guys to snipers in one year. They would fire 60-100 rounds a night at us but we could not shoot back. One night we were driving a deuce and a half truck down the road and we got ambushed. The last thing I remember was an explosion. They killed my buddy and I woke up 4 days later in a hospital with 253 stitches and a brain concussion. I’d been shot in the leg and hip and spent almost 2 months in the hospital. Like I always say, “It’s not the bullet that says To Whom It May Concern that you’ve got to worry about, it’s the bullet that’s got your name on it that you’ve got to worry about.”
I had a terrible homecoming when I came back to the States. I was still limping from the bullet wound in my leg and I went to buy some shoes. The salesman noticed my military uniform and said, “You’re one of those baby killers, aren’t you?” I threw him up against the wall and never went back. When you get home, who wants to talk about the war? You want to get on with your life. It was hard back then: I felt that the only people who understood me were other Vets.

I got married in 1966 but it only lasted five years. We had a son but I didn’t know that until 20 years later. He called me over the phone and told me. I told him that I was sorry that we had missed out on all that time but that I wanted to have a relationship with him going forward – and we do.

I married my current wife in 1972 and we’ve been together over 40 years. She stuck with me through a lot of shit but I’ve never been abusive to her and she never had to work a day in her life. We had one daughter who is now 45.

I became a mechanic on large diesel engines and got a job with a company that repaired mining equipment. For 18 years I travelled all over the world to different countries. After that I had my own shop in Michigan where I sold and repaired cars.

I was diagnosed as diabetic in 1986 and I’ve struggled with managing my blood sugar levels ever since. Four years ago my right leg was amputated below the knee at the VA hospital in Milwaukee. Now the same thing is happening to my left leg. They removed my foot a couple days ago. They will be taking off the lower portion of my leg tomorrow. When I recovered from the last amputation I found that physical therapy wasn’t as important as having a positive attitude. If you sit around and dwell on what’s bad, it’s going to get worse. You have to keep busy and occupy yourself with something else.

My wife is also sick which makes things hard at times. She was diagnosed with Milroy’s disease 25 years ago and her legs have swelled up hugely because of the disease. The only known cure is to keep your legs elevated at all times, which isn’t very helpful if you want to have a life and stay busy. We get frustrated like anybody but the Good Lord and family have helped us through. Sometimes I wonder how much we can handle.

My wife and I were foster parents from 1969 until last year, 2012. During that time we raised 45 foster kids in our home. That’s actually the longest that any couple has been foster parents in the US. We are close to all our kids. Every year a dozen or more of our kids come home to visit during the holidays. We started doing foster care after we took in my youngest brother. He was still living in the orphanage at the time and was about to be sent to reform school. We took him in and just kept doing it. Raising the kids was always something that was very important to me. I wanted to give them something different. I wanted to give them something that I never had – a hand up.
DAY 2

MODULE 13: SELF-CARE STRATEGIES

PRACTICE QUESTIONS

What really matters to you… or what do you want your health for?

- And, how does your health impact what is most important to you?

Where on the circle do you want to start, in order to achieve your health goals?

- Proactive Self-care -- Choose one area of self-care to focus on for your health

Who do you need support from to achieve your goal?

- Resources you have to meet your goal
- Support you need from your team, (professionals, family or friends) to achieve your goal
To begin, sit comfortably with your eyes closed, opening your heart and allowing generosity, acceptance, love and compassion to enter your heart. Next imagine what you wish for your life and for the greater good of others in the world, and then formulate your desires/wishes into statements. Offer these statements with at least one breath in between each wish as you visualize. As you offer the statements, be aware of what comes up for you in your body, thoughts and emotions, and keep returning to your breath and to the statements with a compassionate heart. For this practice today, we will be using the intentions for happiness, health, safety and peace.

1. Start with by directing the wishes for yourself:
   - May I be happy (Breathe)
   - May I be healthy (Breathe)
   - May I be safe (Breathe)
   - May I be peaceful (Breathe)

2. Next, direct the wishes towards someone you feel loving towards, or someone that you feel grateful for their presence in your life:
   - May you be happy (Breathe)
   - May you be healthy (Breathe)
   - May you be safe (Breathe)
   - May you be peaceful (Breathe)

3. Now visualize someone you feel neutral about— you neither like nor dislike. Someone that you just met or passed in the hallway: (use phrases from above)

4. Next visualize someone that you don't like or who you are having a hard time with, and direct the wishes towards them. (use phrases from above)

5. Next direct the wishes toward the Veterans that you serve and their families. (use phrases from above)

6. Next direct the wishes toward your colleagues that serve Veterans and their families. (use phrases from above)

7. Finally, direct the wishes toward all people and all beings everywhere:
   - May all beings everywhere be happy,
   - May all beings everywhere be healthy,
   - May all beings everywhere be safe
   - May all beings everywhere be peaceful.

Return your awareness to yourself and notice how you feel. Notice your breath, your body, your heart.

*Derived from ancient practice of Loving Kindness Meditation or Metta Meditation. Format written by Christine Milovani, LCSW for the Whole Health Course*

**Hawaiian version of a Compassion Meditation – Ho’ oponopono**

“I am sorry. Please forgive me. Thank you. I love you.”
COMMON EXAMPLES OF IMPLEMENTATION STRATEGY TOPICS

- Incorporating Mindfulness at team meetings / huddles

- Utilizing the PHI or Circle of Health with Veterans
  - Individually, in groups and Shared Medical Appointments

- Whole Health group with rotating weekly topics

- Create a pilot with Veterans to test rollout

- Collaborate with key partners at your facility

- Creating an updated resource list with referral information

- Teach Whole Health principles to team members
REFLECTION QUESTIONS

What ideas do you have for implementing Whole Health?

Consider one step that you can take today, tomorrow, next week that will help you to personally move toward greater Whole Health in your life?
NATE’S STORY

• Complex past medical history:
  o PTSD
  o Sleep concerns
  o Depression
  o High Cholesterol
  o IBS

• What REALLY matters?
  o I want to be happy again
  o Success with girlfriend, family, job
  o Be able to relax

• What brings you joy and happiness?
  o Sleep
  o No pain or diarrhea
  o Working with my hands and martial arts

• Well-being ratings:
  o Physical = 2/5
  o Mental = 1/5
  o Day-to-day life = 1/5  (Check suicide risk)

• Components of self-care ratings:
  o Family, Friends, Co-Workers, 1/5. Wants partner and family, emotional control; limited social connection
  o Personal Development 1/4. Wants more education to become an engineer
  o Recharge also 1/3. Seems desperate to sleep better. Has low energy
  o Working the body is 2/5. Wants to exercise more
  o Food and Drink 2/5. Struggles with weight and needs guidance
  o Spirit and Soul 3/5. Searching for meaning, finds peace working with his hands
  o Power of the Mind 3/5. Wants to learn more, sees the role of mind/stress
  o Surroundings 5/5. Can just focus on this as a positive for now
OUTLINE FOR TEAM DISCUSSION

The intention for this exercise is to create clear and constructive action plans which will be shared with your Facility Leadership, OPCCCT Leadership and the other participants at this course. (This is not a time to focus on frustrations and obstacles, but rather to empower solutions for your team and your facility).

- 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?

- How will you know that you are successful?
Whole Health: Change the Conversation

- Who is willing to champion this action plan at this facility? What roles will be involved?

- 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 formatting and example document that will be emailed).
Write a summary document describing the changes in which you would like to be actively involved in bringing to your organization. Please send your summary document to Christine Milovani at ckmilovani@gmail.com in a word document. Please include your work group and site name in your file name that you send. Below is an outline format to be used for your work group summary.

**Strategies for Implementing Whole Health into our Work Team**

**Work Group & Site Name:**

*(You may list as many goals, action steps and timeframes as you have discussed).*

**Goal:**

**Action Steps:**

**Timeframe:**

**Responsible roles (position, not names):**

**Measures of success:**

For sustainable change toward Whole Health, the following support is needed from:

- Ourselves
- Our co-workers
- Our supervisor
- Our facility leadership
- Office of Patient Centered Care & Cultural Transformation

***Please send your summary document within one week of course completion.***

Christine Milovani, Whole Health Clinical Education Program Director
Email: ckmilovani@gmail.com
COMMUNITY OF PRACTICE CALLS

- **Whole Health: Continue the Conversation** Community of Practice call
  - Whole health learning and skill-development, subject matter experts, best practices.
  - Monthly call on 1st Thursday at 2:00 ET.
  - VANTS: 1-800-767-1750, Access Code 43351

- **Personal Health Planning** Community of Practice call
  - Deep dive into personal health planning.
  - Monthly call on 2nd Wednesday at 3:00 ET.
  - VANTS: 1-800-767-1750, Access Code 65595
  - Adobe Connect link: [http://va-eerc-ees.adobeconnect.com/p8pen6v2w2i](http://va-eerc-ees.adobeconnect.com/p8pen6v2w2i)

- **Whole Health Coaching** Community of Practice call
  - Whole Health coaching education and skill-development, subject matter experts, best practices.
  - Monthly call on 4th Thursday at 2:00 ET.
  - VANTS: 1-800-767-1750, Access Code 43351

You may submit questions and requests for additional information to:
[http://healthforlife.vacloud.us/index.php/contact-the-staff](http://healthforlife.vacloud.us/index.php/contact-the-staff)
WEBSITES

VA Health for Life site – (OPCC&CT links to resources for clinicians and leaders)
http://healthforlife.vacloud.us

VA Patient Centered Care site – (external facing website with information resources)
http://www.va.gov/patientcenteredcare/

VA Whole Health Subject Guide – (online VA access journals, books, databases and articles)
http://www.va.gov/LIBRARY/Subject/Whole_Health.asp

OPCC&CT SharePoint – Community of Practice Calls
http://vaww.infoshare.va.gov/sites/OPCC/COP/default.aspx

OPCC&CT SharePoint – Clinical Course page
http://vaww.infoshare.va.gov/sites/OPCC/Whole%20HealthClinical%20Courses/Forms/AllItems.aspx

VA Pulse – (Patient Centered Care and Cultural Transformation, Integrative Health Community, Whole Health Community of Providers)
https://www.vapulse.net

UW Whole Health Library Website – (course links, modules, clinical tools)
http://projects.hsl.wisc.edu/SERVICE/

LIST OF HANDOUTS INCLUDED

Included in this section are hardcopy handouts, you will also receive electronic versions in your post-course email:

- Components of Health & Wellbeing Poster
- Personal Health Inventory (PHI original form)
- Personal Health Inventory (PHI short form)
- Walla Walla VA Example
- Boston VA Example
- OPCC&CT Components Male Brochure
- OPCC&CT Components Female Brochure