



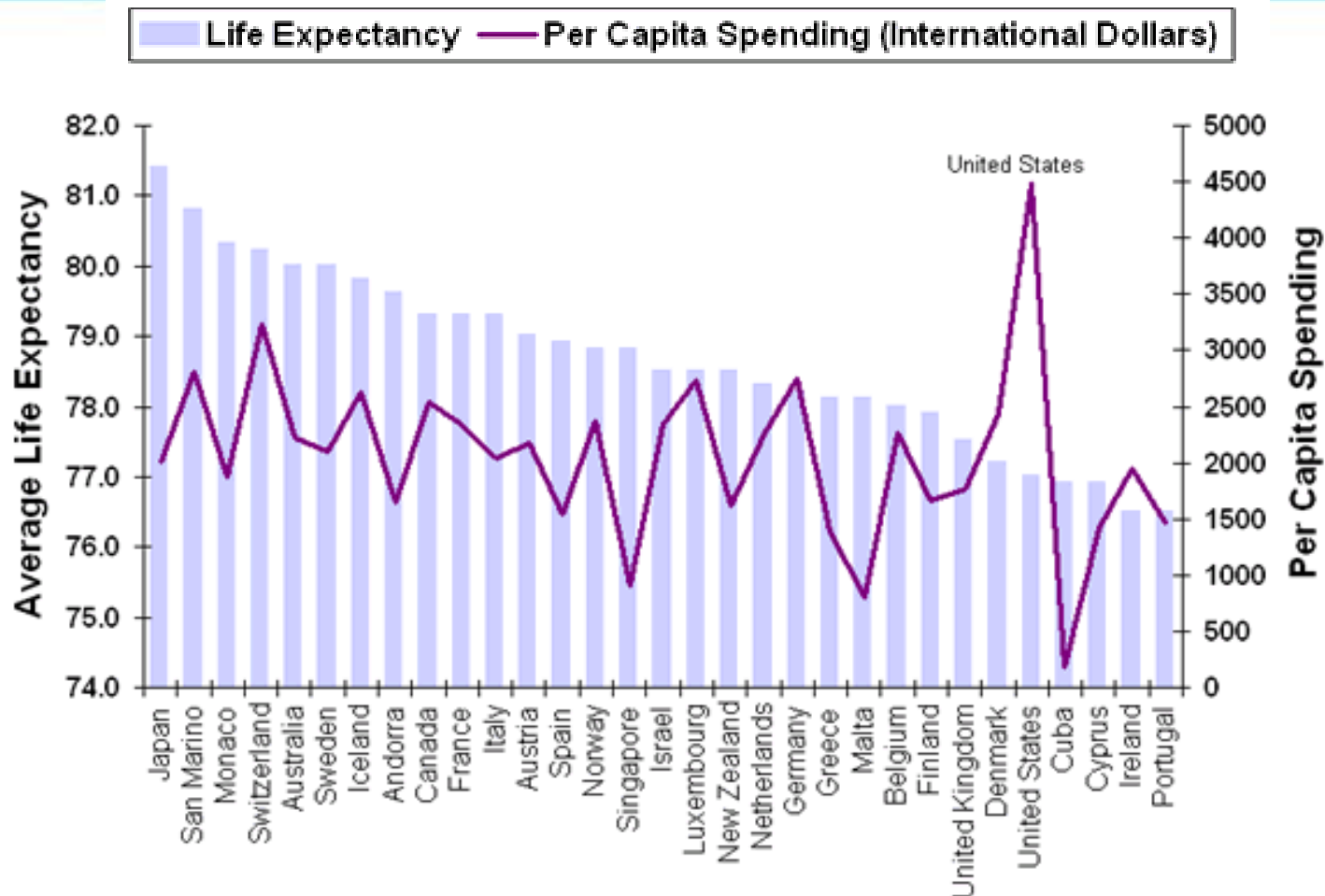
# Reconstructing Healthcare: From Problem Based Disease Care to Whole Person Health Care

**Tracy W. Gaudet, M.D.**

# How are we doing?

- U.S. Healthcare Ranked Dead Last Compared to 10 Other...Forbes
- US Healthcare Ranked Worst in the Developed World.....TIME
- Once again, US has most expensive, least effective health care... Wash Post
- Ranking 37<sup>th</sup> – Measuring the Performance of US Health Care....NEJM
- Spending More and Getting Less for Health Care – NYTimes
- US Health Outcomes Far Worse than Other Comparable Nations.

# The Economics and the Outcomes



# The U.S. is in a REAL crisis

## The Financial Imperative:

- Budget deficit and debt
- Healthcare consumes 18% of our GNP, with unsatisfactory results
- If it continues to rise 5% annually, in 2021 it will consume 31% of our GNP
- This is unarguably unsustainable. The United States will lose its ability to compete in the global market and the consequences are significant.

# The Outcomes: Heart Disease

- Heart disease remains the #1 killer of Americans
  - 1.3 m angioplasties, \$48k each, \$60B in 2006
  - 448,000 bypass, \$100k each, \$44B
  - Angioplasties and stents do not prolong life or prevent heart attacks in stable patients (95% of those who receive them) N Engl J Med 2007
  - Bypass surgery prolongs life in less than 3%
  - AND changing lifestyle could prevent at least 90% of all heart disease Lancet. 2004 Sep

# The Take Home Lessons

Doing more of the same,  
Even if we do it better,  
will NOT fix this problem.

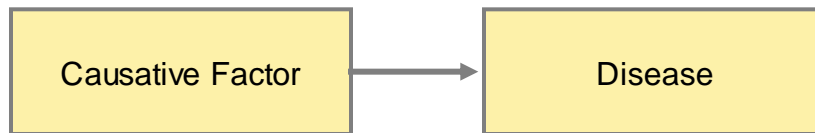
We are not designed to do what is needed.



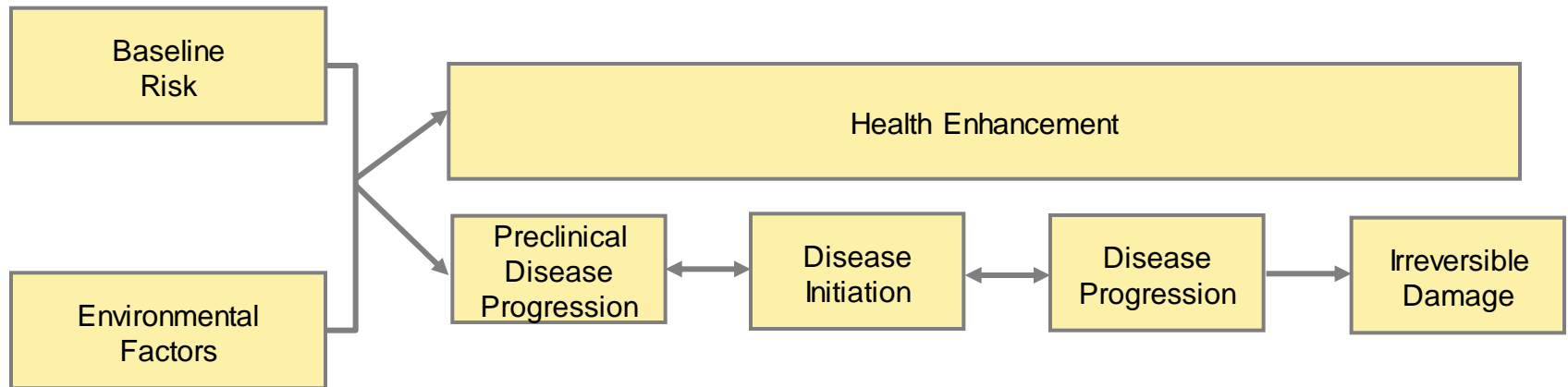
# How did we get here??

# Concepts of Health and Disease

1900s -- Reductionism: Single Factor = Find It/ Fix It



2000s -- Complexity: Multiple Factors = Predict It/Personalize It







# What Needs to Change?

# IOM Rules for the 21st Century Health Care

*Crossing the Quality Chasm*, Institute of Medicine, 2001

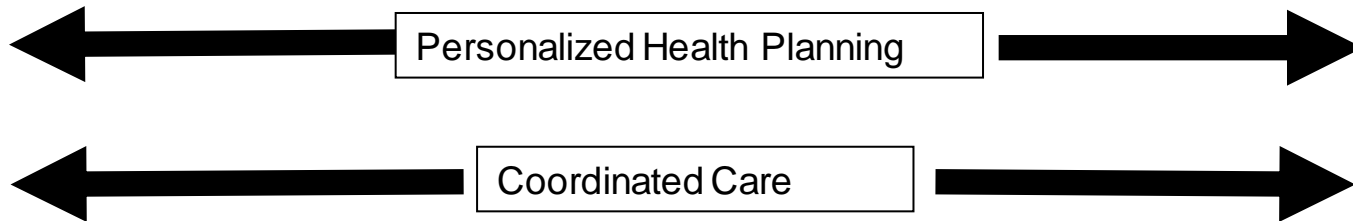
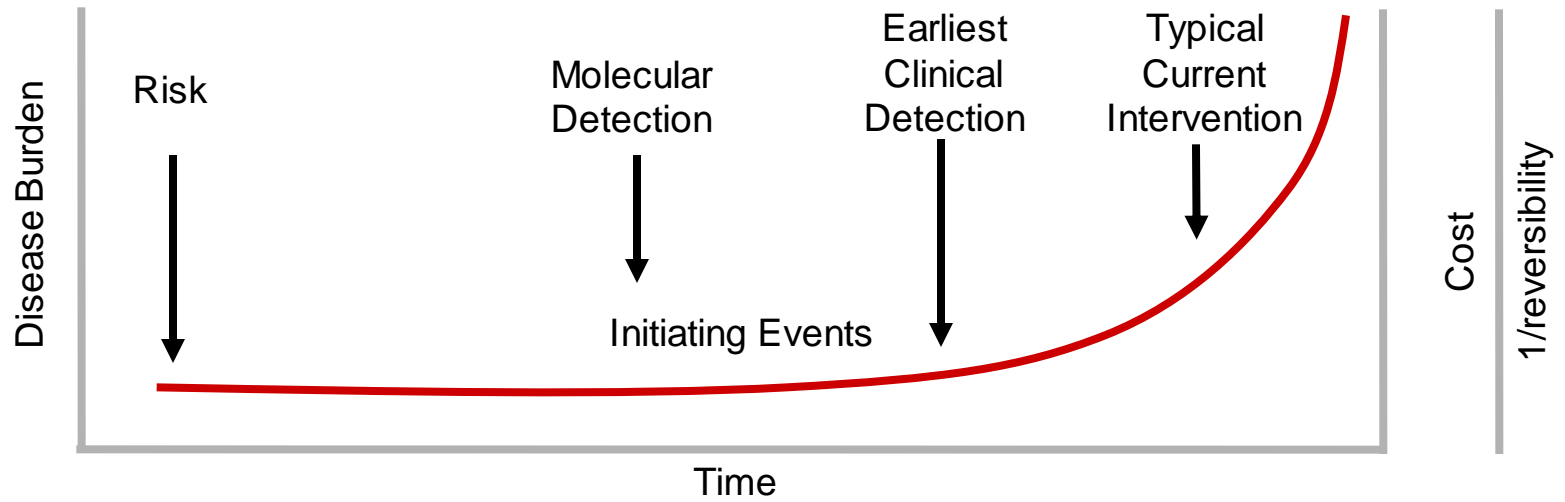
## Current Approach

- Care based on visits
- Professional autonomy drives variability
- Professionals control care

## New Approach

- Care based on continuous healing relationships
- Care is customized according to patient needs and values
- Patient is source of control

# Personalized and Proactive



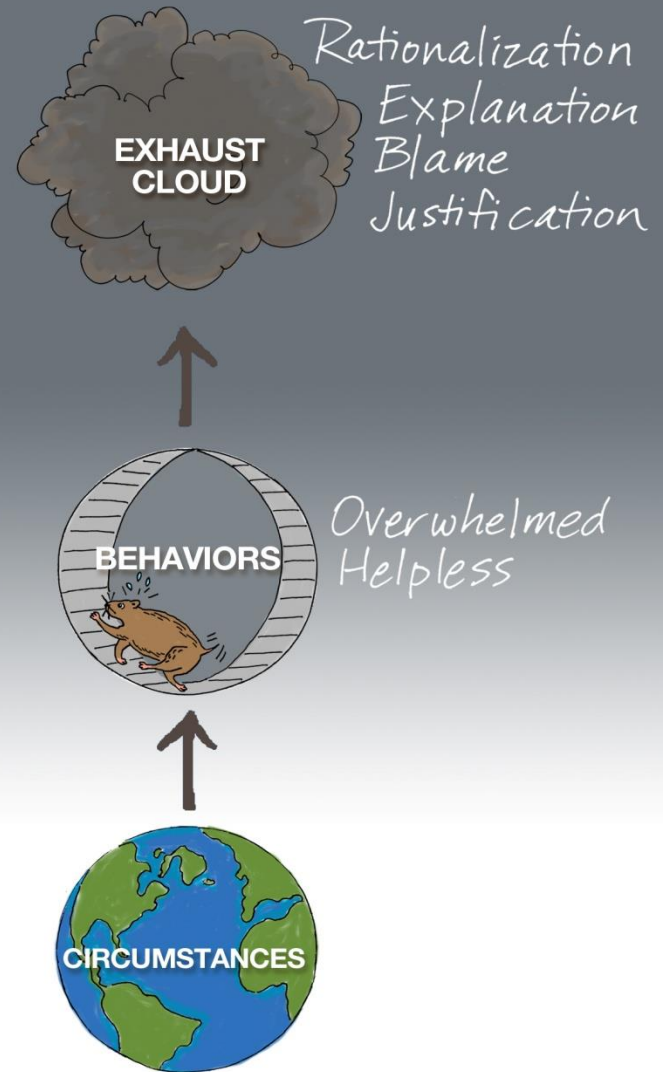
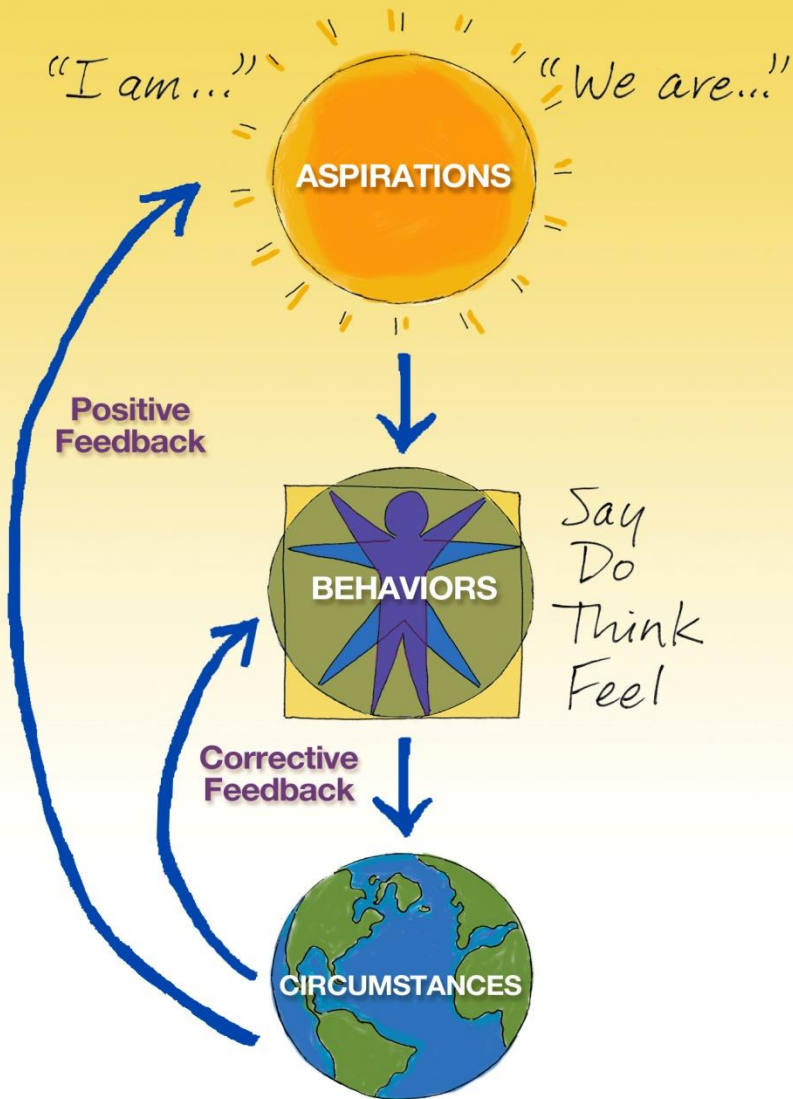
# The Root Cause Of Our Failure?

The root cause of the crisis is that we have put the disease at the center, not the person.

A few illustrations



# THE ASPIRATIONS MODEL



# Does it Really Matter? To Start with What Really Matters?

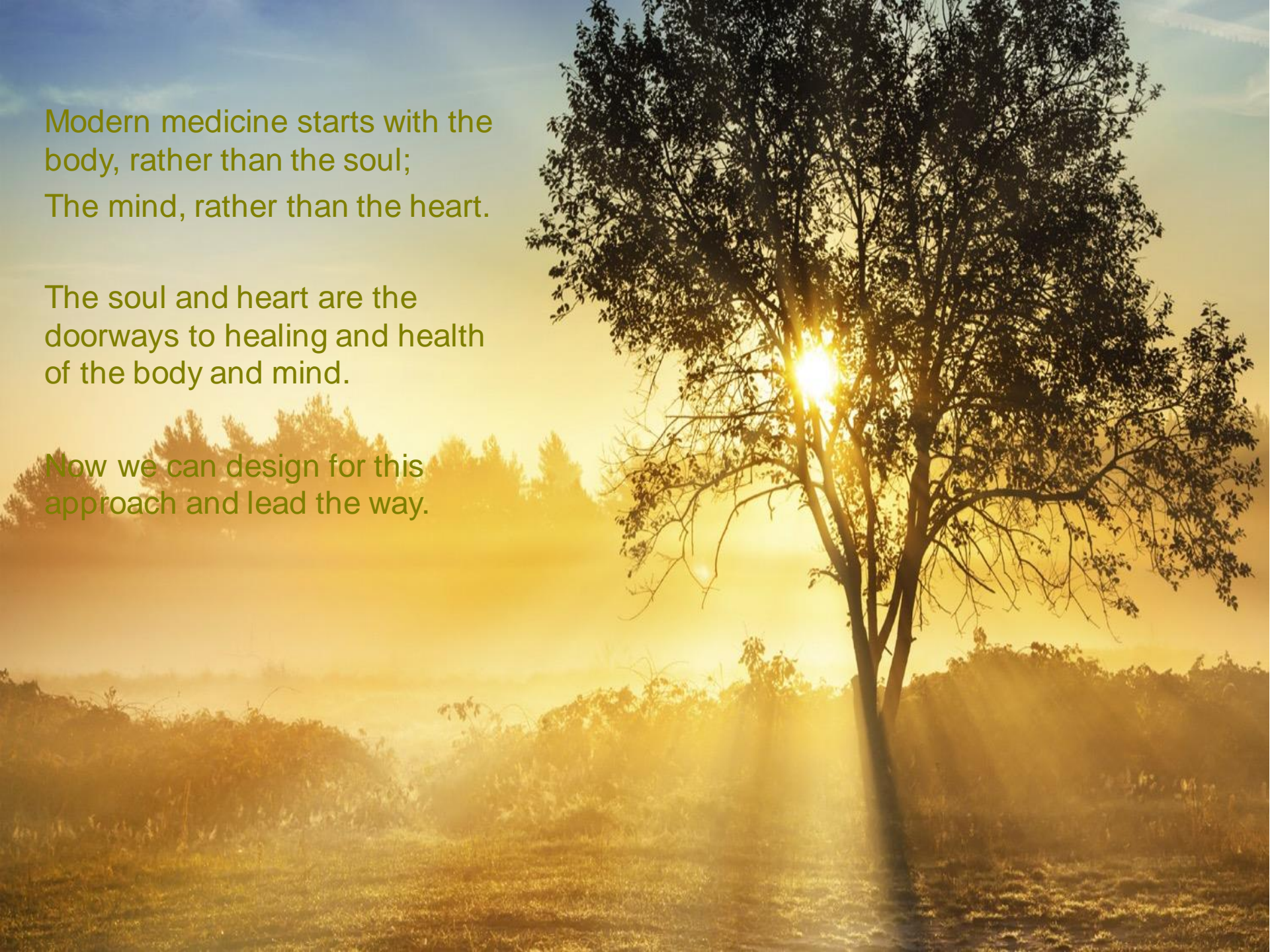
- Study done by Hill, et al, N > 6000
- People who had a greater sense of purpose and direction in life were more likely to outlive their peers
- People with a sense of purpose had a 15% lower risk of death compared to those who said they were aimless

And what happens if we intentionally link health care to this purpose?

Modern medicine starts with the  
body, rather than the soul;  
The mind, rather than the heart.

The soul and heart are the  
doorways to healing and health  
of the body and mind.

Now we can design for this  
approach and lead the way.





# The Role of the Veterans Health Administration



# The Blueprint for Excellence: From Sick Care to Health Care

ADVANCE HEALTHCARE INNOVATION  
FOR VETERANS AND THE COUNTRY

*Strategy 6:*

Advance health care that is personalized, proactive, and patient-driven, *and engages and inspires Veterans to their highest possible level of health and well-being.*



# Personalized, Proactive, Patient-Driven Care



# The HOW Expands

**Mission** for Life and Health

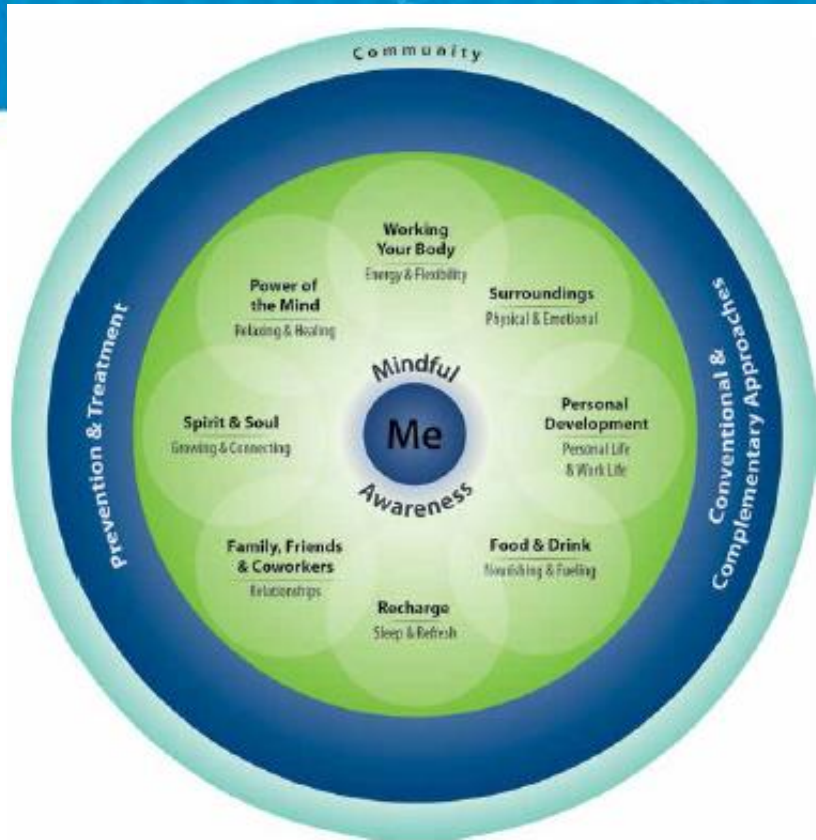
A Personal Health **Plan**

**Training** and Skill building

**Support** to succeed



# The Whole Health Model: The WHAT Expands



Integrative Health practices catalyze synergies across the dimensions of health and well-being to activate the Veteran's innate healing capacities.





# Billions of Generations Innovation



# Resources and Services





# Personal Health Inventory

## An Analysis of Veteran Responses



Center for Evaluating  
Patient-Centered Care in VA

### The Personal Health Inventory: An Analysis of Veteran Responses

White Paper

Prepared by:  
Barbara G. Bokhour<sup>1,2,3</sup>,  
Timothy P. Hogan<sup>1,2,4</sup>,  
Julie E. Volkman<sup>1,2,4</sup>

Center for Evaluating Patient-Centered Care in VA (EPCC-VA)<sup>1</sup>  
Center for Healthcare Organizations and Implementation Research  
(CHOIR); Edith Nourse Rogers Memorial VA Medical Center, Bedford, MA<sup>2</sup>  
Boston University School of Public Health<sup>3</sup>  
University of Massachusetts Medical School<sup>4</sup>

**Special Thanks to Dr. Thomas Findley, East Orange VAMC**

*This study was funded by the Department of Veterans Affairs, Office of Patient-Centered Care and Cultural Transformation and Health Services Research and Development, Quality Enhancement Research Initiative. The views in this paper are the views of the authors and do not represent the views of the Department of Veterans Affairs or the United States Government.*

The application of this tool clearly illustrates that the PHI alters the framing of the health of Veterans.



# Personal Health Plan Template

## Personal Health Plan

- Personal Mission (What matters)
- Health/life goals
- Self-care
- Therapeutic
- Skill building/Education
- Consults/referrals
- Timeline and follow-up

*Center for Integrative Medicine*  
**UW Health**  
University of Wisconsin  
Hospital and Clinics

**Health Plan for MH**

Dear XXXX,

It was a pleasure to meet the both of following are recommendations in re connection, environmental allergies.

I would like to briefly review the est

- The development of type 1 di to environmental triggers, wi observation that Enterovirus in a majority of type 1 diabet

You had mentioned some concern ab his diagnosis with DM1. Due to the cross reacts with a person's normal p suppressant (i.e. steroids) at the time contribute to the cause or worsening steroids are minimal and the actual t is typically unknown. The bottom li future, use of inhaled steroids in reg

A significant link between the gut in diseases is identified in the medical l Michael regarding optimal GI health

**Laboratory:**

The Comprehensive Digestive Stool

- non-invasive evaluation of g digestion, absorption, bacterial balance, yeast and parasites.

**Intestinal Permeability Assessment.**

- directly measures the ability of two non-metabolized sugar molecules –mannitol and lactulose—to permeate the intestinal mucosa.

**Antibody Assessment Panel**

- Identifies and quantifies both serum IgE and IgG antibodies in response to Foods Inhalants, Spices, and Herbs by ELISA (Enzyme Linked Immunosorbent Assay) test.

**PERSONALIZED HEALTH PLANNING SUMMARY**

What really matters to you in your life? (*pulled in from Whole health review form*)

What you need to be healthy for? (*pul*)

**My Health Risks** – concerns that my p  
(*designate: short, medium, long term risks*)

- 
- 
- 

**Our Shared Health Goals** –  
(*designate short (0-3 mo) or longer term g*)

- 
- 

**My Personal Whole Health Plan**  
(*Use SMART goals=specific, measurable,*)

I will \_\_\_\_\_

(Drop down box to click off these 3 op

Exercise prescription

Diet modification

Smoking cessation

Medication

**Review of Your Whole Health**

What is most important for us to accomplish today? What makes it important to you?

---

Tell us about your health as it relates to your body by checking the boxes below for symptoms you have been feeling in the last weeks:

<p><b>General</b></p> <p><input type="checkbox"/> Fever</p> <p><input type="checkbox"/> Chills</p> <p><input type="checkbox"/> Unintended weight loss</p> <p><input type="checkbox"/> Always thirsty</p> <p><input type="checkbox"/> Urinating often overnight</p> <p><input type="checkbox"/> Always hot</p> <p><input type="checkbox"/> Always cold</p> <p><input type="checkbox"/> Get infections frequently</p> <p><input type="checkbox"/> Bruise easily</p> <p><input type="checkbox"/> Bleed easily</p> <p><input type="checkbox"/> Sweat so much at night that you need to change your clothes or sheets</p> <p><b>Head and Neck</b></p> <p><input type="checkbox"/> Change in vision</p> <p><input type="checkbox"/> Pain in eyes</p> <p><input type="checkbox"/> Stuffy or running nose</p> <p><input type="checkbox"/> Hearing loss</p> <p><input type="checkbox"/> Trouble sleeping</p> <p><input type="checkbox"/> Sore throat or gums or mouth</p> <p><input type="checkbox"/> Difficulty swallowing</p> <p><b>Heart and Lungs</b></p> <p><input type="checkbox"/> Chest pain</p> <p><input type="checkbox"/> Heart beating too fast</p> <p><input type="checkbox"/> Shortness of breath that wakes you from sleep</p> <p><input type="checkbox"/> Shortness of breath at rest</p> <p><input type="checkbox"/> Shortness of breath with activity</p> <p><input type="checkbox"/> Cough that will not go away</p> <p><input type="checkbox"/> Wheezing</p> <p><b>Digestive</b></p> <p><input type="checkbox"/> Nausea</p> <p><input type="checkbox"/> Vomiting</p> <p><input type="checkbox"/> Pain in abdomen</p> <p><input type="checkbox"/> Diarrhea</p> <p><input type="checkbox"/> Constipation</p> <p><input type="checkbox"/> Blood in stool</p> <p><input type="checkbox"/> Black or tarry sticky stool</p>	<p><b>Skin</b></p> <p><input type="checkbox"/> Rash</p> <p><input type="checkbox"/> Itchiness</p> <p><input type="checkbox"/> New or changing skin marks or moles you are concerned about</p> <p><b>Urinary</b></p> <p><input type="checkbox"/> Pain with urination</p> <p><input type="checkbox"/> Blood in urine</p> <p><input type="checkbox"/> Needing to urinate frequently</p> <p><b>Bones and Joints</b></p> <p><input type="checkbox"/> Pain in any joints, or muscles</p> <p><b>Neurologic</b></p> <p><input type="checkbox"/> Dizziness</p> <p><input type="checkbox"/> Headache</p> <p><input type="checkbox"/> Numbness</p> <p><input type="checkbox"/> Weakness (like a stroke)</p> <p><input type="checkbox"/> Unstable balance</p> <p><input type="checkbox"/> Frequent falls</p> <p><input type="checkbox"/> Depressed thoughts</p> <p><input type="checkbox"/> Anxious thoughts</p> <p><input type="checkbox"/> Thoughts that race</p> <p><input type="checkbox"/> Ringing in the ears</p> <p><b>MEN ONLY</b></p> <p><input type="checkbox"/> Getting up frequently at night to urinate</p> <p><input type="checkbox"/> Difficulty starting the urine stream</p> <p><input type="checkbox"/> Stream is slow</p> <p><input type="checkbox"/> Difficulty achieving or maintaining an erection</p> <p><b>WOMEN ONLY</b></p> <p><input type="checkbox"/> Changing in bleeding pattern</p> <p><input type="checkbox"/> Irritation or abnormal discharge from vagina</p> <p><input type="checkbox"/> Pain with sexual intercourse</p> <p><input type="checkbox"/> Exposure to DES</p> <p><input type="checkbox"/> Difficulty becoming pregnant</p>
--	---

# Whole Health Education & Resources

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Clinical Program

Whole Health Coaching Program

Whole Health Group-Based Program

Whole Health Engagements

On-Line Modules

Community of Practice Calls

# Whole Health Online Curricula

- **Grounded in the Whole Health Approach**
- **Structured around the “Circle of Health”**
- **35 + Educational Overviews**
  - ✓ 3 Introductory Modules
  - ✓ 1 Mindful Awareness: Me at the Center
  - ✓ 9 Modules on Self-Care (green circles), and Clinician Self-Care Module
  - ✓ 22+ Professional Care Modules
  - ✓ Patient Vignettes
  - ✓ PHI and PHP featured universally
  - ✓ Call Out Boxes, Practice Tips and Mindful Awareness Moments
- **161 + Clinical Tools**
- **30 subject matter experts authored**
- **23 VHA peer reviewers**

# Clinical Course: Evaluation

- Three data collection points (pre-test, immediate post-test and two-month follow-up).
- Outcomes measured: (1) Attitudes towards IM, (2) Self-Efficacy to engage in Whole Health Behaviors, (3) Perceived Benefits of Whole Health, (4) Institutional Support, (5) Preparedness to Discuss with Veterans Non-Pharmaceutical Approaches for treating chronic conditions, (6) Intentions to use Whole Health strategies during clinical encounters, and (7) past month Engagement in Whole Health Approaches during clinical encounters.
- Statistically significant increases in all outcomes; across all sites, pre-test to immediate post-test (short term effects), including greater use of whole health approaches during clinical encounters, pre-test to the two-month follow-up (longer term effects).

## *WHOLE HEALTH: Change the Conversation Clinical Course*

### FINAL EVALUATION REPORT

by  
Kathy Atwood, Sc.D.  
David Collins, Ph.D.  
William Scarbrough, Ph.D.  
Stephen Shamblen, Ph.D.



September 2014

# Comprehensive On-Line Library

## 35 On-Line Modules 161 Clinical Tools

### WHOLE HEALTH: CHANGE THE CONVERSATION

*Advancing Skills in the Delivery of Personalized, Proactive and Patient-Driven Care*

About

Onsite Program

Educational Overviews & Clinical Tools

TMS

Medical Literature

#### Whole Health:

- Places each person at the center of his or her own health care
- Shifts the focus of care toward health and well-being
- Utilizes Mindful Awareness to promote self-care and healing
- Emphasizes the importance of relationships and partnerships
- Incorporates a range of conventional and complementary approaches
- Supports the VHA's mission and #1 strategic goal
- Includes an [onsite program](#), [educational overviews](#), [clinical tools](#) and [TMS curriculum](#)

#### VHA Mission

*Honor America's Veterans by providing exceptional health care that improves their health and well-being.*

#### VHA #1 Strategic Goal

*Provide Veterans personalized, proactive, and patient-driven health care.*

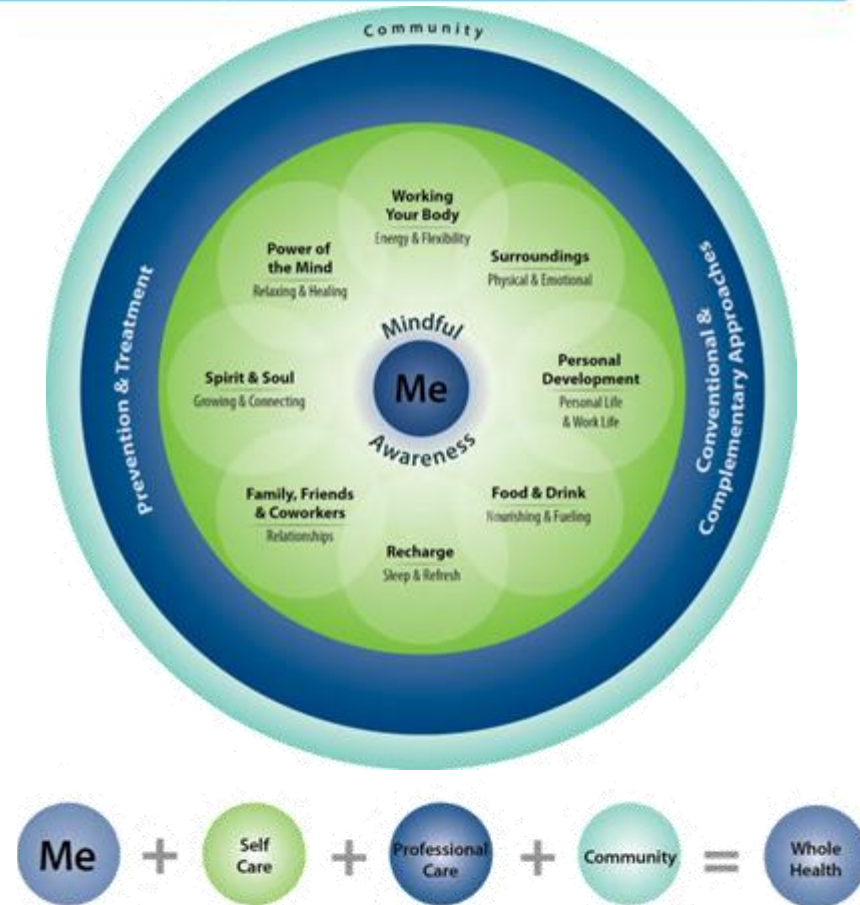


**Whole Health: Change the Conversation** is a collaborative effort of the VHA Office of Patient Centered Care and Cultural Transformation, Pacific Institute for Research and Evaluation, and the University of Wisconsin-Madison School of Medicine and Public Health, Integrative Medicine Program, in support of the VHA's effort to affect transformational change towards a *Whole Health* model of health care delivery.



# Whole Health Group Based Program

- Developed 9 week program
- Open & closed groups
- Peer-led
- 90 minute sessions
- 7 peer facilitators
  - 6 led or co-led one of the groups held at each site
- 11 program participants
  - 11 participated in at least 1 session and complete pre-test
  - 5 participated in at least 7 sessions and completed post-test



# Whole Health Coaching: Change in Individually Focused Outcomes (Pre- to Follow-Up)

Statistically significant increases were noted in the following outcomes:

- Preparedness to use WHC skills
- Self-efficacy
- Intention to use WHC skills
- Past month use of WHC skills

“During the last three days of health coaching, I was so overwhelmed with the power of health coaching, I developed a deeper appreciation of the application of health coaching and whole health in a unified manner. It was so powerful that I wanted to get these skills and knowledge to every primary care provider and teamlet today! Then, show them how to apply them in a practical matter.”

Parag Dalsania, M.D.

# Qualitative Results

## Peer Facilitator Comment

*“We see now that the whole goal is not to have an individual hospitalized, the whole goal is not to pour on medications, the whole goal is to get that individual involved in their whole health.”*

## Veteran Comments

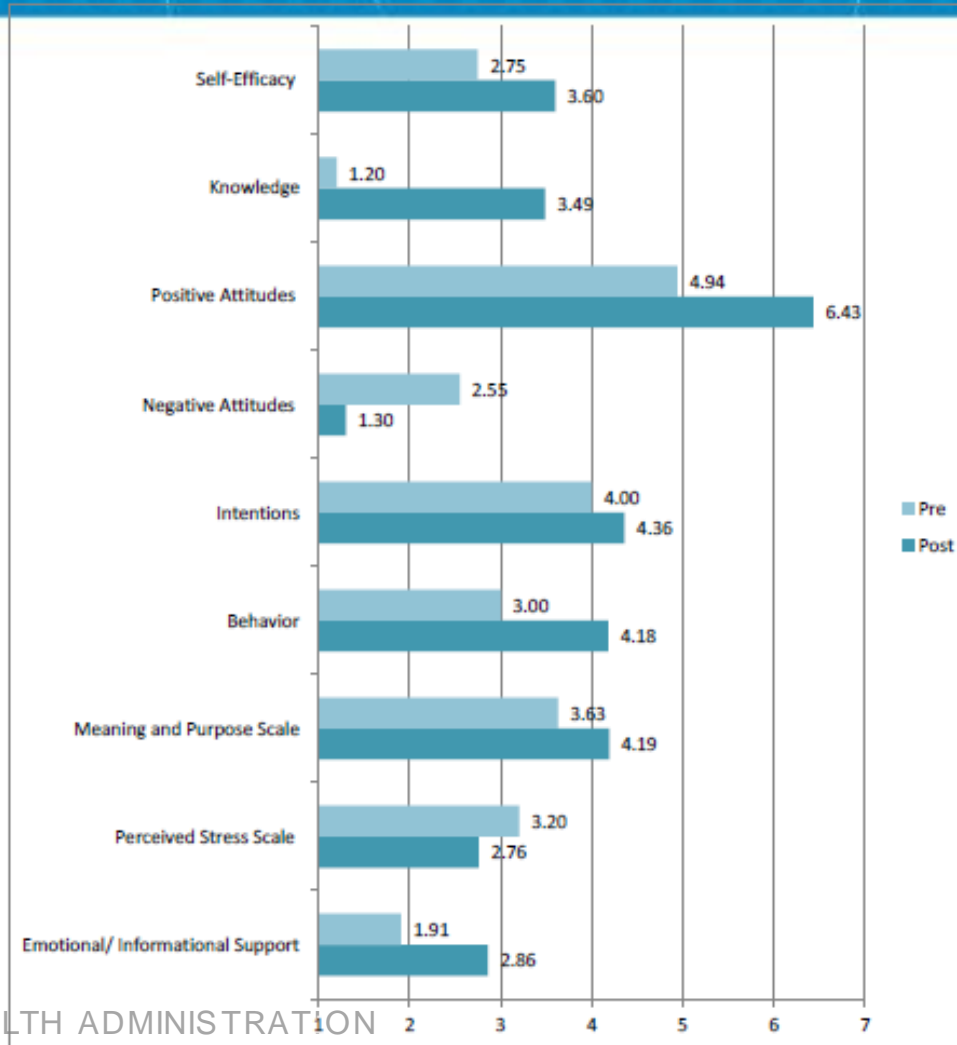
*“I applied to go to college, applied for my grants and loans. I got all that in the works. I’m fixing to get my GRE.”*

*“Nine weeks ago I was thinking about getting a job. Today I’m working at a job, so I kept my goal focused on what I had to do. I even got a resume. I done moved up. I got my resume. I got it. I hadn’t thought about stuff like that but I done accomplished that. I’ve got it done.”*

*“[SMART goals] taught you how to set goals for different things you wanna do. Things you never would have thought of doing. You’re doing it now. You’re listening. You got this. Go get a job. Stop drinking.”*



# Veteran Quantitative Results, Pre-Post



# Intranet, Cloud, and Internet Sites

Health for Life

OFFICE OF PATIENT CENTERED CARE AND CULTURAL TRANSFORMATION

PERSONALIZED, PROACTIVE, PATIENT-DRIVEN CARE

MULTIMEDIA RESOURCES SEARCH Search... GO

VHA PATIENT CENTERED CARE THE PRACTICE THE EXPERIENCE RESEARCH CENTERS OF INNOVATION GET INVOLVED

Health For Life: 21st Century Health Care The VA Way, Designing And Delivering The Future Of Health Care Today

Learn More >

EXPLORE THE STRATEGY OF PATIENT-DRIVEN HEALTH CARE

View Components of Proactive Health and Well-Being >

“What has happened to me in the last four years has really restored my faith.”  
Thomas Sells, VIETNAM VETERAN

Introducing Health for Life Through One Veteran's Story

Health for Life

WATCH THE VIDEO

THE PRACTICE

Building a health care system that is personalized, proactive, and patient driven means practicing a new kind of health care that builds on the successes of traditional VA medical care.

THE EXPERIENCE

Whether a welcoming smile or a helping hand, an open canteen or meditative space, every touch affects a patient's experience and contributes directly to their health and well being.

RESOURCES

Patient Centered Care Speaker Request

Personalized Health Approach Documentation

Personal Health Plan Staff Guide

Personal Health Inventory / Patient Stories

GET INVOLVED

Sign up to learn more about the Practice and Experience of Health for Life

FIRST NAME

LAST NAME

E-MAIL

Subscribe

MAIL FB TW B Y+

SEARCH

SITE MAP [A-Z]

About VA Resources Media Room Locations Contact Us

## and Cultural Transformation

Cultural Transformation

- OPCC Home
- OPCC and Cultural Transformation: Promoting Whole Health
- What is Patient Centered Care?
- Explore Patient Centered Care
- Multimedia & Resources
- Contact Us



**Personal Health Inventory**

The MyStory: Personal Health Inventory (PHI) helps you and your care team discuss what matters most to you and find the right care for your needs.

Learn more >



# Research and Evaluation



# Compendium of Research Related to Patient Centered Care



INTEGRITY • COMMITMENT • ADVOCACY • RESPECT • EXCELLENCE

## VHA Office of Patient Centered Care and Cultural Transformation

### A Compendium of Patient Centered Care Related Research



#### 1. Implementation of patient-centered clinical practice interventions

- [1a. Customized Health Planning](#)
- [1b. Motivational Interviewing / Coaching](#)
- [1c. Shared decision making/ Provider communication](#)
- [1d. Integrative therapies \(integrative health, integrative medicine, CAM\)](#)
- [1e. Use of healthcare informatics to improve access, expand reach, increase patient engagement \(e.g., telehealth, mobile apps., etc.\)](#)
- [1f. Collaborative/integrative care interventions: integrations of mental health, behavioral health, substance abuse services, or chronic pain management interventions that are designed to specifically promote](#)
- [1g. Intervention strategies designed to promote family involvement in patient care](#)
- [1h. Intervention strategies designed to promote peer support, such as the implementation of peer support specialists](#)
- [1i. Other patient centered care](#)

#### 2. Implementation of patient-centered experience interventions

- [2a. Human resources practices \(e.g., patient-centered care training for staff, hiring new staff who embody the patient centered culture\)](#)
- [2b. Physical environment \(e.g., relaxation/relief spaces, noise control, Planetree, etc.\)](#)
- [2c. Other studies that examine patient healing environments, such as staff and provider interactions with patients](#)

# Evidence Maps: Mindfulness, Acupuncture, Tai Chi, Yoga

Department of Veterans Affairs  
Health Services Research & Development Service

Evidence-based Synthesis Program



Department of Veterans Affairs  
Health Services Research & Development Service

Evidence-based Synthesis Program

Department of Veterans Affairs  
Health Services Research & Development Service

Evidence-based Synthesis Program



## Evidence Map of Acupuncture

## Evidence Map of Mindfulness

## Evidence Map of Tai Chi

September 2014

Department of Veterans Affairs  
Health Services Research & Development Service

Evidence-based Synthesis Program



## Evidence Map of Yoga for High-Impact Conditions Affecting Veterans

August 2014

Prepared for:  
Department of Veterans Affairs  
Veterans Health Administration  
Quality Enhancement Research Initiative  
Health Services Research & Development Service  
Washington, DC 20342

Prepared by:  
Evidence-based Synthesis Program (ESP) Center  
West Los Angeles VA Medical Center  
Los Angeles, CA  
Paul G. Shekelle, MD, PhD

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Michele R. Solberg, PhD

Research Associates:  
Isomi M. Mialke, BS  
Jessica M. Berres, BS  
Roberta Sherman, MS

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Department of Veterans Affairs  
Veterans Health Administration  
Quality Enhancement Research Initiative

### Investigators:

Principal Investigator:  
Remy R. Coyle, M.D., Ph.D.

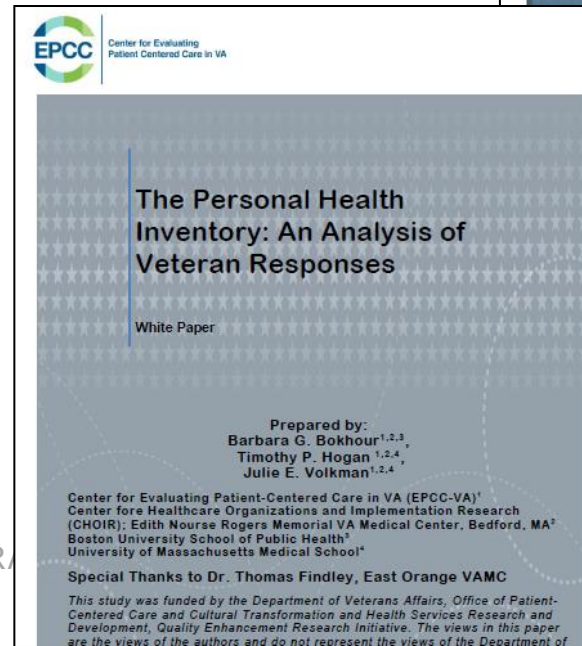
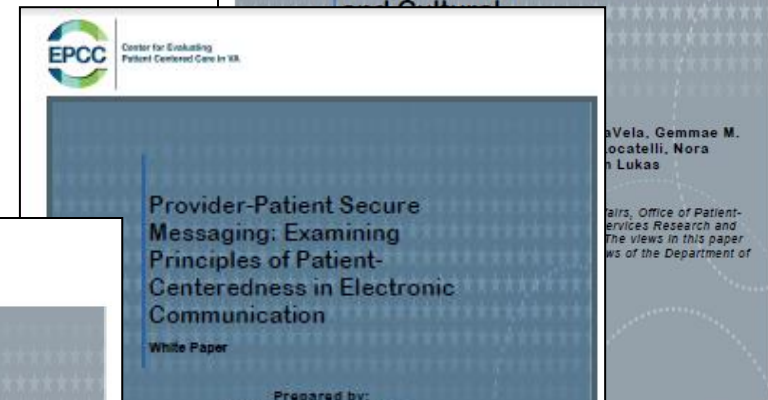
Co-Investigators:

# Health Systems Research & Evaluation

## Partnerships with QUERI & PIRE

<http://healthforlife.vacloud.us/index.php/research-education/research>

- Lessons from the Field for Implementing PCC
- Compendium of VHA research related to PCC
- Personal Health Inventory Analysis
- Whole Health Education Level 3&4 Evaluation
- Integrative Health Implementation
- Interactive Patient Care Evaluation
- PCC Metrics Project
- PRIMIER
- All Employee Survey
- Evaluation Toolkit



# NIH DOD-VA Collaboration

- **National Center for Complementary and Integrative Health's (NCCIH) Advisory Council Working Group report entitled, "Strengthening Collaborations with the DoD and VA: Effectiveness Research on Mind and Body Interventions," is now available.**
- **The press release is available at:**  
**<https://nccih.nih.gov/news/press/020915>.**
- **The full report is available at:**  
**<https://nccih.nih.gov/about/naccih/military-report>**



# Next Steps

- Comprehensive Roadmap with defined levels of transformation across the core elements and tools for advancing in each.
- Advance education and new approaches for clinicians, Veterans, and peers.
- Integrating across service lines.
- Scalable outreach such as peer groups, Getwell Network Whole Health
- Expand research.

# Reorientation to Whole Health

- A portfolio of approaches to be personalized, including:
  - Gateway to Whole Health
  - Peer led group based Program for Veteran and their family
  - Clinical integration (PACT, MH, Specialty Care)
  - Care in the community
  - Community interfaces and resources

## *How Privileged We Are*

Imagine a day when the job of Health Care is to help people explore, discover and reconnect to their purpose, their aspiration, their joy.

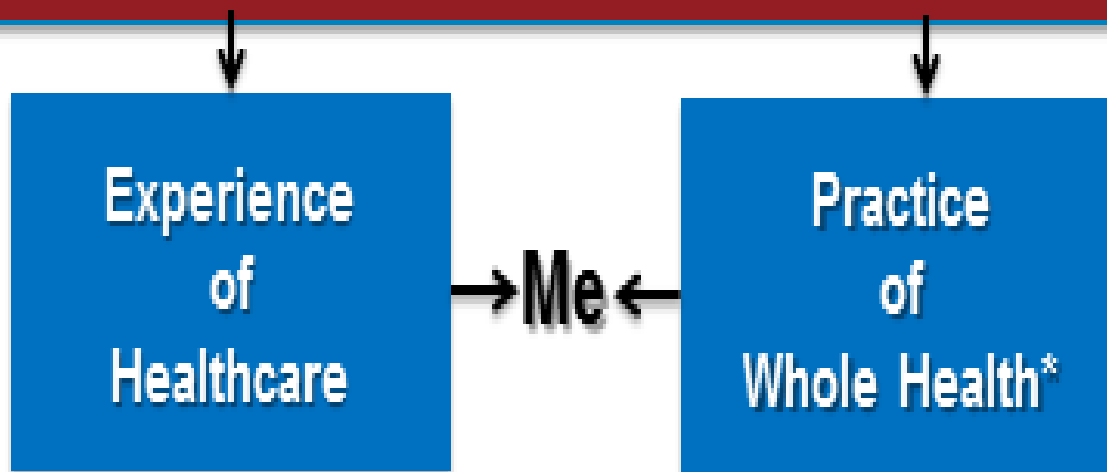
And then, we work together to strengthen one's health and healing to live *this*, to live one's fullest life.



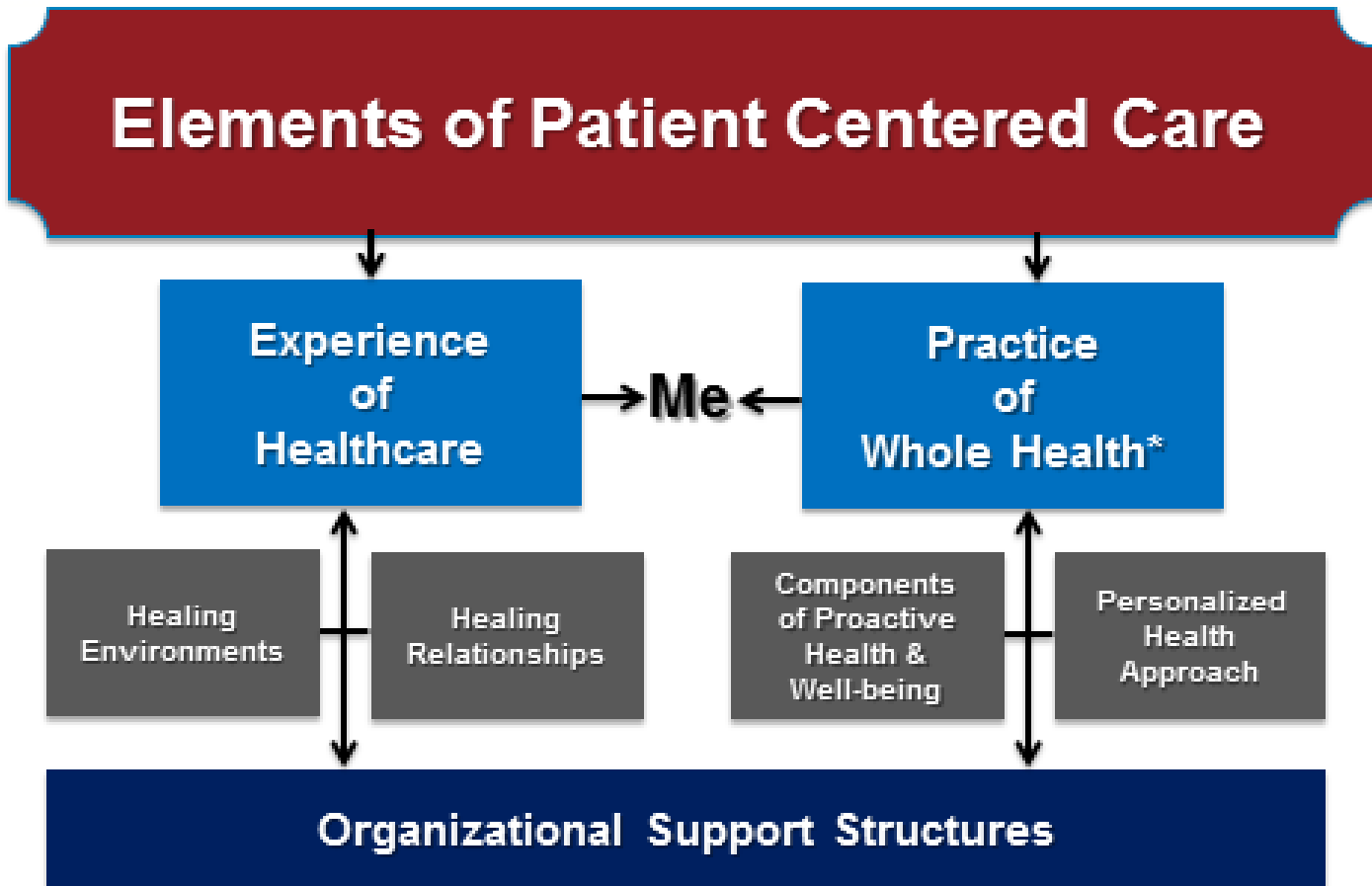


# Questions, Comments, and Invigorating Discourse

# Elements of Patient Centered Care



\* Personalized, Proactive, Patient-driven Care



\* Personalized, Proactive, Patient-driven Care