The Journey to Transformation
Whole Health Clinical Care Symposium
Face-to-Face Course

1. Welcomes and Course Overview

Part I. Reading the Map
The Journey to Transformation: Whole Health Clinical Care
Why We Are Here: Learning Objectives

I. Reading the Map
   - Getting oriented
   - Meeting each other
   - Learning the fundamentals

II. Setting the Compass Heading
   - Aim statements and fine-tuning
   - Six essential questions

III. Planning the Journey
   - Change Management Skills
   - ADKAR
   - 7 Key Elements

IV. Hitting the Trail
   - Sharing your action plan
   - Looking ahead

Community Agreements 1

• Be present
  • Participate!
  • Minimize distractions (e.g., phones)
• Be curious and open-minded
• Be silent (sometimes)
  • Okay to pass
  • Watch side conversations

Community Agreements 2

• Be respectful
  • Confidentiality
  • Differences

• Be on time
  • After breaks and lunch
  • Signal to return to large group
  • We’ll get you out on time!

Agenda is at beginning of workbook
Whole Health Clinical Care
Day 1 Morning

**Community Agreements 3**

- Be healthy
- Stand or move as needed
- Go to the bathroom
- Stay hydrated
- Ask for movement
- Have fun!

**Any Others?**

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**A Word from the Boss: Logistics**

- Signing in
- Meals – lunch options
- Other key things to know

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**Course Materials**

- Everyone should have a workbook
- Each group should have a PowerPoint slide template for completing your WHCC Plan
  - You’ll give a slide presentation about your plan on Day Three
  - Do all groups have templates?
Faculty Introductions - Portland

- Mary Gallagher-Seaman
- Theresa Liao
- Jennifer McDonald
- Jennifer Patterson
- Justin Hessaker
- Adam Rindfleisch
- Codi Schale
- Lisa Witmer

Faculty, Please Share:
1) Name
2) Role in OPCC&CT, VA, and the Universe
3) What you are most looking forward to in the next 3 days
4) Superhero you are most like or want to be most like

2. Being the Change: Your Mission and Purpose

"Be the change you wish to see in the world."
- Mahatma Gandhi

The Journey to Transformation

To Begin...

- Why did you choose to work for the VA?
- Why did you choose to do work with Whole Health Clinical Care?

Write your ideas in the back of your Workbook (section for Module 2, page 73)
Reflecting for Yourself

• What do I want to learn/accomplish while I’m here?
• What do I want to give others during our time together?
• What do I need to do to see my time here as worthwhile and meaningful?

Reflecting on This Symposium

• Why does this matter?
• What’s the most important thing your group must accomplish during our time together?
• What’s the most pressing discussion you need to have?
• What problems are you solving?

Thank you!

With special thanks to Marc Castellani, Whole Health Clinical Education Coordinator OPCC&CT!
Movement Break!

3. Team Introductions: Who is in the Room?

The Journey to Transformation

Introducing...Your Teams!

Each team has 3 minutes:
1. One spokesperson per team shares:
   • Team mascot/team name (and origin of the name)
   • Where you are from – city, state, facility
2. Quickly around the table. Each team member shares:
   • Name
   • Role at your site
   • Role on this team (see list of roles to the right)
   • A superpower you bring

Roles on each team:
1. Leadership Sponsor
2. WH Champion or Point of Contact
3. Representative Clinician
4. Additional Stakeholder

Write down names of a few people to talk with over the 3 days. There will be more opportunity to get to know each other even better!
The Next Level: Speed Dating

1. Divide by your role on your team (Leadership, Point of Contact, Clinician, etc.)
2. Find a partner you don’t know
   - We’ll read a question. You’ll have 1-2 minutes each to answer
   - Stop with chime
   - Switch to a new partner for a new question.

Networking Opportunities

During These 3 Days:
Try to chat with at least 5 people you don’t know!

4. The Journey to Transformation: Fundamentals
The Essence of Whole Health Clinical Care

How Do You Define WHCC?

WH Clinical Care is the delivery of **excellent clinical care** that **empowers and equips** Veterans to live their life to the fullest, in support of their Mission/Aspiration/Purpose, across the lifespan and across the organization.
Whole Health Clinical Care
Day 1 Morning

What Would Your Patient Say?
1. My health care team cares about me and understands what matters to me.
   - True
   - False

2. I feel empowered to take a step in improving my own health and well-being.
   - True
   - False

WH Clinical Care – The Essence

Core Competencies Can Help
1. Help Veterans explore their own health and well-being and co-create a PHP, incorporating their values (MAP)
2. Work effectively as part of an interprofessional team
3. Demonstrate advanced skills in communication, empathy, and facilitation of behavior change in Veterans and families
4. Integrate CIH (appropriate professionals and approaches, evidence-based)
5. Care of the care-giver (Whole Health for clinician/staff self-care)
Whole Health Clinical Care
Day 1 Morning

### Keeping it Simple: Empower, Equip, Treat

- Consider and care for the whole person
- Practice across teams and over time
- Equip using a broad range of resources and support
- Actively use foundational skills (communication, relationship building, and MI)
- Connect with MAP
- Continue to provide excellent clinical care
- Set shared goals that link to MAP

### So...What does this look like?

1. To a clinician?
2. To a Veteran?

### What this is Like in Clinic: Clinic Flow or...?
Keeping it Simple: Clinical Process

- Explore and identify MAP (Life Purpose, Values, what matters most, meaning)
- Who I am
- Clinical assessment
- Self-care
- Collaborative goal setting connected to MAP

Keeping it Simple: Flow

- Clinical services or team member
- Pathway Courses
- WH Partner or Coach
- Well-being
- CI

- Provider
- Connect with MAP
- Assess
- Set Shared Goals
- Equip

- Pre-Provider
- Post-Provider

Making it Real: Examples

- Clinical services or team member
- Pathway Courses
- WH Partner or Coach
- Well-being
- CI
Phase 1: Preparation

With the Veteran’s personal health planning process as the foundation for exploring what matters most, the site is actively designing and building Whole Health Clinical Care component to change the conversation and clinical experience for the Veteran, family, and caregiver.
Phase 2: Foundational

The fundamental Whole Health Clinical Care component is in place to holistically treat the Veteran with an intentional focus on the Veteran’s mission, aspiration, and purpose (MAP), which allows clinical providers and teams to discover what matters most to the Veteran via a trusted and invited partnership with their Veteran patient.

Phase 3: Developmental

As Whole Health Clinical Care transformation becomes more widely adopted, the Veteran is better equipped and empowered with what is needed in support of Shared Goals (and thus MAP), which is documented into the Personal Health Plan to facilitate coordination across all Whole Health System components. As the site is intentional in actively and continually evaluating progress in changing the conversation and clinical experience for the Veteran, integration of Whole Health Clinical Care with the other WHS components is essential.

Phase 4: Full

A vibrant and vital Whole Health Clinical Care system is in full operation, well-utilized, tightly connected to the Pathway and Well-Being Program components, and highly valued and endorsed by Veterans. Because the site is focused on the integration of care with the PHP as the basis for coordination of care, Veterans feel empowered and engaged in all Whole Health System components as the site actively expands offerings to meet Veteran demand and continuously work towards full integration with all DM domains.
Phase 4: Full (cont’d)

At a minimum, Whole Health implementation has spread to primary care, mental health, and at least one other clinical setting with fully integrated Whole Health policies and procedures in place which includes referral and consultation processes.

Other Examples:
- Extended care
- Pain clinic
- SCI
- HPAC
- Specialty Care
- Inpatient med/surg

Designation

Clinic practice has evolved from a primary focus on the disease state (‘What’s the matter with you?’) to one that is focused on the state of health and well-being and asks, “What matters to you and how can we help you live your best life?” Mission, Aspiration, Purpose (MAP) and Personal Health Planning are the basis for integration of care and services. Every clinical care encounter acknowledges and values what a Veteran wants his/her health for and, and then links his/her health care to his/her MAP through use of Shared Goals.

Making it Real

Even while sites have clinicians or teams doing pilots, most are at the Preparation or Foundational phases

...And that’s why we are here!
### WH Clinical Care Resources (Workbook)

Designation Framework and Self-Assessment  
(for milestones and accomplishments for system transformation)

- Whole Implementation Guide
- Field Implementation Team
- National Personal Health Plan Template
- Whole Health System Coding and Tracking Guidance
- Whole Health System Dashboard
- Smart Change Toolkit
- Whole Health Evaluation Toolkit

- Whole Health: It Starts with Me (Veteran Handout)
- ABC Guide to the Circle of Health
- Example Questions to Ask During a Whole Health Visit
- Passport to Whole Health
- Whole Health Library
- Personal Health Inventory Tool

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And now, a presentation from our local site hosts!

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Lunch!