

Implementing Whole Person Primary Care

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THE INNOVATION

We implemented a whole person care model, the HOPE Note Toolkit, in 16 practices across the United States. The HOPE Note Toolkit is a person-centered, relationship-based approach to integrate self-care with evidence-based conventional medicine, and non-drug treatments (complementary/alternative care). The HOPE Note Toolkit includes social determinants of health along with other personal determinants of health and healing: the physical, environmental, lifestyle, emotional, mental, and spiritual dimensions, which all must be balanced for true wellness. The Veteran's Administration piloted a similar toolkit as part of Whole Health in 18 sites for chronic pain management (<https://www.va.gov/wholehealth/phi.asp>).

WHO & WHERE

The Samueli Foundation (SF) and the Family Medicine Education Consortium (FMEC) established a yearlong virtual integrative health learning collaborative (IHLC) to test its implementation of the HOPE Note Toolkit in private practices, health systems, federally qualified health centers (FQHCs), and family medicine residency training programs in urban (13), suburban (6), and rural (3) locations.

HOW

The HOPE Toolkit has 3 components. (1) Patients complete a self-administered survey, the Personal Health Inventory (PHI), to identify their meaning and life purpose, current health needs, and readiness for change before or during a primary care visit ([Supplemental](#)

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[Appendix 1](#)). (2) Instead of using the traditional Subjective, Objective, Assessment and Plan (SOAP) note format, the clinician uses a HOPE note first to explore the patient's values and life goals and to identify their personal needs for healing ([Supplemental Appendix 2](#)). (3) Clinicians and their teams partner with patients using the Personalized Healing Plan template to develop a care plan comprising conventional and nonpharmacologic combined with self-care support and identified social needs ([Supplemental Appendix 3](#)).

The IHLC supported implementation and testing of the HOPE Note Toolkit using a "learning collaborative" process. This used expert and peer-supported practice improvement and action research to help clinical teams develop the skills and processes needed to conduct whole person integrative health (IH) visits using the Toolkit. Practices attended monthly meetings where the tools and resources were introduced and small group meetings where clinics discussed implementation strategies and challenges. All clinics were asked to use these tools and practice improvement processes to implement and evaluate their delivery of whole person integrative care. Three surveys were given before, during, and after the yearlong process to evaluate their success. We used what was learned from the IHLC to develop an online course aimed at teaching interested practices how to implement this whole person care approach (IntegrativeHealthCME.org).

LEARNING

Sixteen clinics completed the IHLC and represented more than 220 clinicians serving approximately 39,000 patients annually. Participating practices reported using the HOPE Note tools in 942 patients during the timeframe and implemented aspects in a variety of ways. ([Supplemental Table 1](#)). Of participants, 91% agreed or strongly agreed with the statement, "I like the PHI" and 83% agreed with the statement, "The PHI is easy to use." Most clinics planned to expand their use of the tools and reported improved knowledge, skills, and delivery of whole person care. Participating practices implemented more whole person care, expanded their integrative health services, found the process enjoyable, and gained knowledge and skills in IH methods. This strategy could be used to spread the delivery of high-quality whole person primary care.

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Key words: integrative health; whole person care; learning collaborative; whole person health; primary health care; primary health care transformation; workforce training

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Previous presentation: Shared preliminary results of evaluation: Rosenbaum E, Gordon AE. How to implement integrative health using the HOPE toolkit: lessons from a year-long learning collaborative. 2022 International Congress of Integrative Medicine and Health; May 6, 2022; Phoenix, Arizona.

 [Supplemental materials](#)