



For Immediate Release
April 4, 2022

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Case Studies Show Progress on Integrative Health

DAYTON, OHIO – The Samueli Foundation and the Family Medicine Education Consortium (FMEC) have released [case studies](#) from their joint [Integrative Health Learning Collaborative \(IHLC\)](#) which capture challenges and successes from four participating clinics. The IHLC helped clinics better manage chronic disease by addressing social and behavioral determinants of health to improve the delivery of whole-person care and make integrative health (IH) routine and regular in primary care.

Seventeen clinics participated in the learning collaborative. Their efforts targeted specific patient populations, including patients with specific diagnoses (e.g., chronic pain, diabetes, hypertension, anxiety/depression, etc.), patients new to or interested in integrative health, and all patients. They received IH training including use of the [HOPE \(Healing Oriented Practices & Environments\) Note](#) and other tools and exchanged pioneering practices through faculty-led small group sessions and full collaborative meetings.

The rich examples from the case studies include the following highlights.

- The **Cleveland Clinic** Family Medicine Residency Program at its Lakewood (Ohio) Family Health Center has long focused on whole-person care, offering training to residents through the University of Arizona online [Integrative Medicine in Residency](#) program. By joining the IHLC, they hoped to better organize and deliver IH services and increase the volume of such services. A formal research study was designed to track implementation of IH practices, specifically use of the [PHI](#) (Personal Health Inventory), IH discussions with patients, and changes in self-assessments of health and functional status. While the study is ongoing, improvements in the clinic to date include increased use of IH tools, incorporation of IH questions into annual physicals, and workflow changes that make IH visits easier for providers.
- **UCI Health**, the clinical enterprise of the University of California Irvine (UC Irvine), is home to the Susan Samueli Integrative Health Institute. IH teams use a patient-centered, whole-person, systems-based approach to tailor each patient's treatments and therapies. Participation in the IHLC enabled them to develop and pilot a process for inter-professional collaboration with other UC Irvine providers who aren't trained in IH, as well as to implement a clinical flowchart that didn't disrupt workflow. They also developed a HOPE Note template and plan, using SmartPhrase for their Epic system.
- **Jamaica Hospital Medical Center** is a 404-bed hospital that is part of MediSys Health Network, and its Jamaica Family Medicine Center is a residency clinic where more than 20 providers handle about 1,800 patient visits monthly. The Center had already started implementing integrative approaches to patient care, with an emphasis on nutrition, exercise and prevention. During the IHLC, Jamaica also embedded IH tools into Epic. Furthermore, the team worked to change the mindset of providers from sick care to wellness, delivered integrative care to more patients, and developed processes for tracking and documenting IH visits. They added IH group visits, expanded the role of patient navigators, and plan to add acupuncture and massage services by partnering with local schools. By engaging underserved patients in more IH visits, their work is helping to reduce disparities.
- **UC Health**, the health system of the University of Cincinnati, has 19 primary care clinics, 27 specialty ambulatory clinics, and more than 800 physicians and advanced practice providers. Their case study briefly describes UC Health Centering Group Visits, their standardized, patient-centered group visit program, which was initiated for pregnancy and parenting but is being expanded to other conditions.



Patients share their own perspectives and health management strategies during the group visits, expanding on what the provider alone might suggest, which helps address health equity. Group visits also allow more time for providers to spend with patients and reduce information repetition. The IHLC helped UC Health bring more structure and services into their group visits, with a focus on the newer group visits UC Health had established for chronic pain, obesity and diabetes. Residents were taught how to incorporate segments of the PHI during the medical assessment before group visits, based on the topic for the group visit. In addition, activities such as chair and balance exercises and art activities were added to group visits. Conversations in the group visits changed to focus more on social support and physical environment issues, which resonated strongly with patients.

Across the case studies, providers engaged in the ILHC noted the value of participating in a collaborative where they were inspired, educated and challenged by colleagues at other practice sites. They cited the COVID-19 pandemic as a barrier to keeping up with their ILHC work and making practice improvements. For some, however, COVID-19 challenges showed the value of IH. Group visits helped combat loneliness exacerbated by the pandemic, and many IH strategies were useful in helping patients recover from ongoing or long COVID symptoms.

In addition to highlights from participating sites, the case study reports include an overview of whole-person care and IH, evidence supporting whole-person care, and information on quality improvement methodology. The reports also include links to tools including the [PHI](#) (Personal Health Inventory), which assesses the person's meaning and purpose in life, current health and readiness for change, and the [HOPE \(Healing Oriented Practices & Environments\) Note](#), a patient-guided process to identify the person's values and goals in life and for healing so the provider can assist them in meeting those goals with evidence and other support.

The full case study reports as well as an overview are posted on the [website of Dr. Wayne Jonas](#). More information on the Integrative Health Learning Community can be found on the [FMEC website](#).

About Samueli Foundation

[Samueli Foundation's](#) Integrative Health Programs are dedicated to the promotion of personal health and well-being with the support of health teams dedicated to all proven approaches, including conventional, complementary and self-care. Dr. Wayne Jonas, the former director of the NIH Office of Alternative Medicine and the former director of a World Health Organization Center for Traditional Medicine, is clinical professor of Family Medicine at the Uniformed Services University and at Georgetown University School of Medicine.

About the Family Medicine Education Consortium

The [Family Medicine Education Consortium](#), Inc. (FMEC) is a catalyst, convener, and incubator that connects family physicians and other stakeholders to improve the health communities by strengthening family medicine, primary care and medical education. The FMEC serves 14 states and the District of Columbia in the northeast region of the U.S., working with 60 medical school departments of family medicine, 195 family medicine residency programs, and thousands of family physicians and other health care providers in community settings. Through an Annual Meeting for nearly 1,000 health professionals, annual awards, learning communities, and quality improvement projects, the FMEC inspires medical students to seek careers in family medicine, strengthens academic family medicine through faculty development and leadership experiences, and stimulates innovative approaches to primary care service delivery.

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