



# Functional Medicine Based Group Visits : From Personalized Medicine to Public Health

Kara Parker MD, AIHM, IFMCP  
Whittier Clinic Integrative Health  
Minneapolis, MN



# Where I Work and Serve

At an inner city Family Medicine Residency



Clinic in Minneapolis, in a hospital system with high exposure to Medical Assistance and uninsured



- 3 Functional Medicine MDs
- 1 Integrative PA
- 1 Holistic NP
- 1 Acupuncturist
- 1 Chiropractor
- 2 Nutritionists
- Physical Therapy Department
- Dedicated Scheduler
- Coordinator/ Facilitator for Group Visits
- Integrative Medicine in Residency Program (IMR) through University of AZ



# HCMC Whittier Integrative Health Clinic





## Benefits of Group Visits for the Lifestyle Management of Chronic Disease

Tolu Abikoye MD MPH<sup>\*</sup> Satlaj Dighe MA MPH(C)\* Kara Parker MD James Anderson PhD

Department of Family and Community Medicine, Hennepin County Medical Center, Minneapolis, MN

### Abstract

- In the past few years, there has been a considerable increase in use of medical group visits to address a wide spectrum of medical conditions
- Our qualitative study seeks to understand the perceived benefits of group visits for the management of chronic disease
- Patients and providers identified peer support and increased provider satisfaction as benefits of group visits as compared to traditional office visits
- Clinicians managing patients with chronic diseases will benefit from implementing group visits into their practices

### Background

- Research indicates that group visits offer
  - More patient education
  - Increased provider productivity when compared to traditional office visits
- Research also shows that patients who participate in group visits show
  - Better utilization of health services
  - Better perception of quality of life
  - Reduction in emergency room visits (Jaber et al., 2006)



### Methods

- Patients with chronic disease with high Medical Symptom Questionnaire (MSQ) scores were invited to participate in group visits facilitated by a family medicine physician and psychologist
- Two 40 minute semi-structured focus group discussions (Group 1 n=9, Group 2 n=5) were conducted, two providers were interviewed
- Audio data was transcribed in verbatim and was textually analyzed. Emerging themes were identified using the compare and contrast method
- A pre-post survey was conducted to evaluate participants ability to deal with their health condition

### Results



- Group visits provided an effective platform for health education and communication for patients and physicians
- Participants noted that they received more health education in group visits vs regular clinic visit
- Peer support was identified as a recurring theme
  - Feeling of connectedness
  - Sharing of information
  - Support and encouragement for goal setting and treatment compliance
  - Providing a safe environment to practice social and communicating skills in patients who felt isolated

By listening to other participants talk about how they cope with their health condition, I am able to better take actions to deal with my health condition



Survey results showed a one point positive change in the notion of self-efficacy

### 3. Benefits to providers include

- Increase patient access
- Increased work satisfaction
- Less burn-out
- Increased insight to the coping resources of patients
- Observing the healthy aspects of the patient's lives was rewarding

### Conclusion

Participation in group visits was noted as a fulfilling health care experience by patients and clinicians alike

- Patients received; more health education; increased physicians' attention; benefits from peer support
- Clinicians had more time to teach coping strategies and to empower patients to achieve a healthy lifestyle and reduce the burden of chronic disease
- In order to become a regular feature of health care services, group visits need to be a financially and logically viable option for institutions and patients
- Clinicians managing patient with chronic diseases will benefit from implementing group visits into their practices

\*Denotes equal author contribution

# GV Research Outcomes

PubMed and Medline 1974 to 2004 Review:

- Group visits improve patient and physician satisfaction, quality of care, quality of life, decrease emergency department and specialist visits.
- “Group visits have proven to be an effective way to improve patient’s dietary compliance and intermediate markers for diabetes and coronary artery disease.”

<http://www.jabfm.org/content/19/3/276>



## Using Group Medical Visits With Those Who Have Diabetes: Examining the Evidence

Laura M. Housden<sup>1</sup> · Sabrina T. Wong<sup>2</sup>



Published online: 2 December 2016  
© Springer Science+Business Media New York 2016

**Abstract** The number of people with diabetes is expected to rise to over 592 million by the year 2035. Past work provides evidence that the conventional method of primary care delivery may not meet many patients' needs. An alternative to the conventional one-on-one appointment is care offered to a group of patients through group medical visits (GMVs). Group medical visits for diabetes have a positive impact on physiologic and self-care outcomes including improved HbA1c, blood pressure control and self-management skills. Less work has examined the impacts of GMVs on systems of care; however, evidence suggests improved primary and secondary prevention strategies and the potential for GMVs to decrease emergency room visits and hospitalizations. Additional work is needed to examine the effect of GMVs on patient reported quality of life, functional health status and cost-savings. Further work is also needed on which patients GMVs work best for and patient barriers to attending GMVs.

This article is part of the Topical Collection on *Health Care Delivery Systems and Implementation in Diabetes*

**Electronic supplementary material** The online version of this article (doi:10.1007/s11892-016-0817-4) contains supplementary material, which is available to authorized users.

✉ Laura M. Housden  
Laura.Housden@telus.net

Sabrina T. Wong  
Sabrina.Wong@nursing.ubc.ca

<sup>1</sup> University of British Columbia School of Nursing, T201 2211 Wesbrook Mall, Vancouver, BC V6T 2B5, Canada

<sup>2</sup> Centre for Health Services and Policy Research, University of British Columbia School of Nursing, T201 2211 Wesbrook Mall, Vancouver, BC V6T 2B5, Canada

**Keywords** Diabetes · Group medical visits · Shared medical appointments · Chronic disease

### Introduction

The global prevalence of diabetes has almost doubled since 1980 [1]. Currently, over 300 million people are known to have type 1 or 2 diabetes worldwide [2, 3]. The number of individuals living with diabetes is expected to rise to over 592 million people by the year 2035 [3]. Contributing to this rising rate are a number of risk factors such as increasing incidence of obesity and an ageing population [2, 4]. While patients may experience diabetes as a single chronic condition, it is also a common co-morbid condition [5, 6], with up to 40 % of patients with diabetes having at least three other chronic conditions [5].

Recent work suggests preventing or managing diabetes using a group format can have positive health system and patient outcomes. The purpose of this review is to examine the association between delivery of group medical visits (GMVs) and physiologic, self-care and system outcomes among those aged 16–80 years old with type 1 or 2 diabetes. Future directions in implementing GMVs among those with diabetes are also discussed.

### Significance

Patients with diabetes need to manage their condition to prevent micro- and macro-vascular complications such as heart disease, chronic kidney disease (CKD), peripheral neuropathy and atherosclerosis [7]. They are also at risk for depression given the additional stressors on their quality of life [8]. Patients often are faced with high out-of-pocket medication



# GV Patient Benefits

- Improved access
- Extra time
- Max packed visit
- Health information
- MD full attention
- Answers to q's
- High patient satisfaction
- Group support
- Excellent option for MA and Medicare patients
- Lower bill for high deductible insurance

-Ed Nofsinger, GV Handbook





# Clinician Benefits of GV

- Teach what you love!
- Use your skills
- Spend more time with patients
- Reduce info repetition
- Increase job satisfaction
- Enroll new patients
- Open closed practices
- Increase revenue
- Increase panel access
- Enhance patient relationships



# GV Benefits for the System

- Increased productivity:  
10-13 patients in 120 min
- Increased access
- Improved outcomes in Accountable Care Organizations and Medical Homes
- Bill out of space not used for patient care –  
meeting rooms or lobby

# GV Types

## Shared Medical Visits



A standard medical visit performed in front of other patients.

## Lifestyle Based GV

Intentional teaching and experience on diet, nutrition, exercise, stress reduction, etc.

## Empowerment Based GV

Participants decide the topics and activities, small successes empower health changes.

Functional Medicine Based GV are a combination of all 3...



# Why Functional Medicine Group Visits (FMGV)?



# Optimize Time to Teach Functional Medicine, Including Lifestyle and Upstream Factors



**FUNCTIONAL MEDICINE MATRIX**

**Retelling the Patient's Story**

- Antecedents**  
(Predisposing Factors—Genetic/Environmental)
- Triggering Events**  
(Activators)
- Mediators/Perpetuators**  
(Contributors)

**Physiology and Function: Organizing the Patient's Clinical Imbalances**

The diagram illustrates the Functional Medicine Matrix, organized into four main quadrants:

- Assimilation** (e.g., Digestion, Absorption, Microbiota/GI, Respiration)
- Defense & Repair** (e.g., Immune, Inflammation, Infection/Microbiota)
- Structural Integrity** (e.g., from Subcellular Membranes to Musculoskeletal Structure)
- Communication** (e.g., Endocrine, Neurotransmitters, Immune messengers)
- Mental** (e.g., cognitive function, perceptual patterns)
- Emotional** (e.g., emotional regulation, grief, sadness, anger, etc.)
- Spiritual** (e.g., meaning & purpose, relationship with something greater)
- Transport** (e.g., Cardiovascular, Lymphatic System)
- Biotransformation & Elimination** (e.g., Toxicity, Detoxification)
- Energy** (e.g., Energy Regulation, Mitochondrial Function)

**Modifiable Personal Lifestyle Factors**

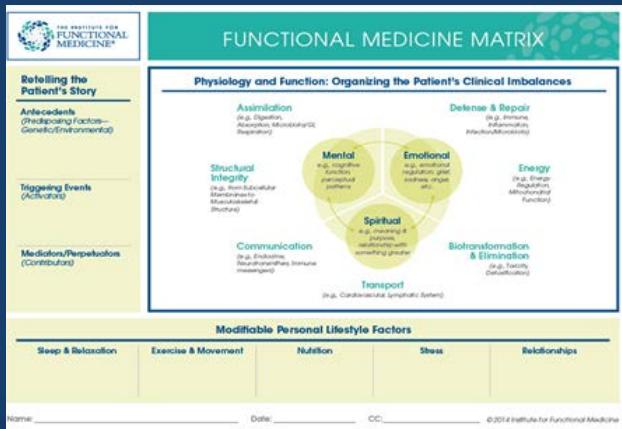
Sleep & Relaxation	Exercise & Movement	Nutrition	Stress	Relationships
--------------------	---------------------	-----------	--------	---------------

Name: \_\_\_\_\_ Date: \_\_\_\_\_ CC: \_\_\_\_\_ ©2014 Institute for Functional Medicine

# FM Matrix Group Visit Topics

Lifestyle:

- Stress Resilience
- Restorative Sleep
- Optimize Nutrition
- Movement for Life
- Connect for Health



- Clinical Imbalances:
- Digest Well
  - Balance Hormones
  - Improve Circulation
  - Strengthen Structure
  - Detox Safely
  - Restore Energy
  - Improve Memory
  - Optimize Genetics

# Isolation Magnifies Health Challenges



# GV Leverage the Power of Social Connections for Health



# FM GV Impact Public Health

“The activities that ensure conditions in which people can be healthy. These activities include community wide efforts to identify, prevent, and combat threats to the health of the public.”

*- Institute of Medicine*



# FM GV Address Public Health Priorities

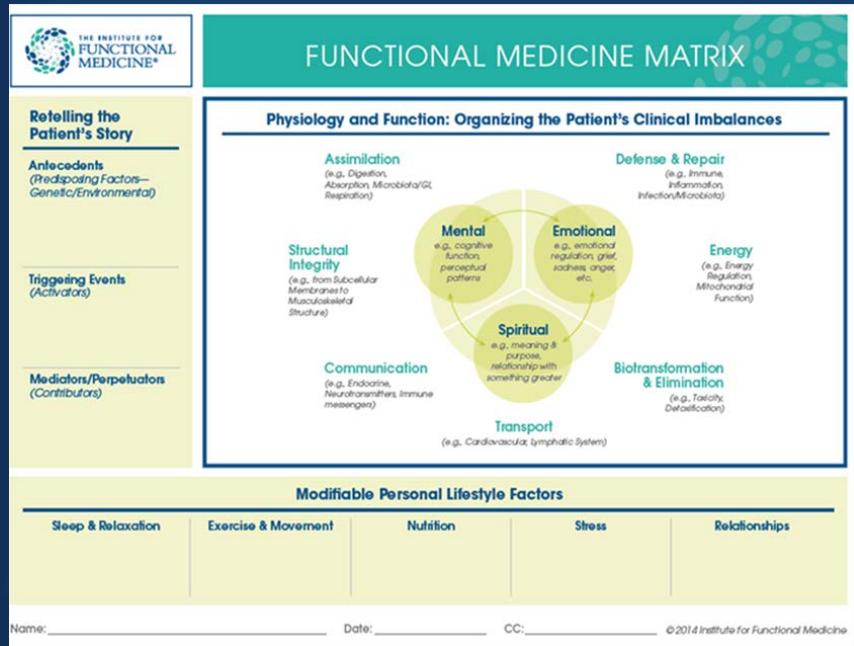
- Obesity
- Cardiovascular disease
- Diabetes
- Poor nutrition
- Lack of exercise
- Environmental health

-Functional Medicine emphasizes an upstream evaluation for root causes.  
-GV allow the time and curriculum for support



# Social Determinants of Health

-cdc.gov

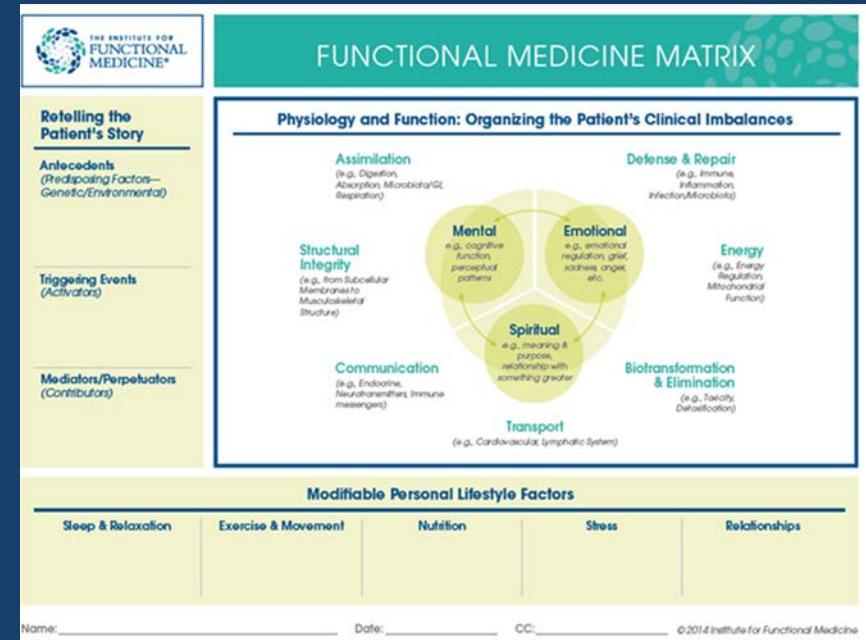


# Add Mindfulness



- Enhance benefits of FM GV by adding mindful practice.
- In the relaxed state patients learn better, make better choices, take clearer action for their health.

# FM GV Empower Patients to Make Pivotal Health Changes



# Practitioner Resilience



# How To Begin FM GV?



# Functional Medicine

## G-O-T-O-I-T of GV

G- Gather

O- Organize

T- Tell

O- Order

I- Initiate

T- Track





# GATHER of FM GV

- **GOTOIT:** Gather yourself to set the tone for the group experience.
- Gather the topics that systematically enhance health.
- Gather mind body exercises and facilitation skills to enhance presence and engagement.
- Gather resources to “max pack” the visits.
- Gather your team.
- Gather the group.

# The Team



# Billing Provider Trained in FM/IM

- Chooses appropriate patients to enroll.
- Creates GV content.
- Addresses each patient's medical concerns.
- Orders labs, refills medications , prescribes nutrients.
- Teaches residents/ students during GV.



# GV Coordinator/Facilitator

- Key to success of group visits is optimal enrollment.
- Adding responsibility to busy receptionists and nurses does not lead to success.
- A disadvantaged population requires additional support to enroll and retain.



# Personnel: Medical Assistant

- Arrives early, and stays for vitals of all pts - 30 mins.
- Resumes duties on team center with another provider.
- Stops by at the end for any needs.





# Personnel - Nurse

- Review charts
- Pend needed labs
- Review medications
- Health care maintenance

We have not been needing a nurse in the FM GV, so funds are diverted to the GV coordinator ROI



# Personnel – Health Coach

- An effective option for enhancing participant education and support
- A Health Coach extends benefits outside the visit
- IFM has a Health Coaching Program



# Personnel: Documentation

- Residents, medical students, or scribes can fulfill this role

Templates are used and completing charts is simple



# Space: Bill from Underutilized Areas of the Clinic







# ORGANIZE of FM GV

## GOTOIT:

- Organize the GV by topics that allow for a complete review of lifestyle, FM clinical imbalances, and public health.
- Organize the mind body experiences, snacks and handouts to support change.
- Organize the flow of each visit with an emphasis on experience and empowerment.



Learn ways to calm the effects of stress. Gain support and connections for taking actions for your health. Experience more energy & joy in your life.

Group Visit Space,  
2<sup>nd</sup> Floor  
Whittier Clinic

For more information and to sign up, call:

Cass  
612 873-8048



**"Rest & Renewal" Shared Medical Group Visits are for those who want to be supported in making desired lifestyle changes.**

In groups of 12-16 participants we will meet once a month to learn about the basics of functional health and mind-body practices.

**Option 1: Rest & Renewal Group Visit Basic 4-Session Curriculum:**

Three groups: 1) HCMC Staff (1<sup>st</sup> Monthly Monday Evenings,  
2) English and 3) Spanish speaking patients

New Group Visits for patients start every 2 months on Wednesday afternoons

- Calming Stress through Resilience
- Restoring Optimal Sleep
- Honoring the Body with Nutrition
- Centering the Mind with Mindfulness and Movement

**Option 2: Rest & Renewal Monthly Group Visits, Monday evenings:**

1) Spanish Speakers every 3<sup>rd</sup> Monday/ English Speakers every 4<sup>th</sup> Monday

Dates and topics for 2017 (January – December):

- Restoring Optimal Digestion
- Brighten Your Mood
- Tame Your Pain
- Increase Your Energy
- Lighten Your Load (Detoxification)
- Sharpen Your Memory
- Balance Your Hormones
- No Session in August
- Protect Your Heart
- Boost Your Metabolism
- Cultivating Gratitude
- Generosity – The Art of Giving and Receiving

*Dr. Kara Parker is a doctor and teacher at Whittier clinic who is trained in Lifestyle and Functional Medicine. She loves to gather groups of patients to discover and share ways to thrive.*





# O: Elements of a FM GV

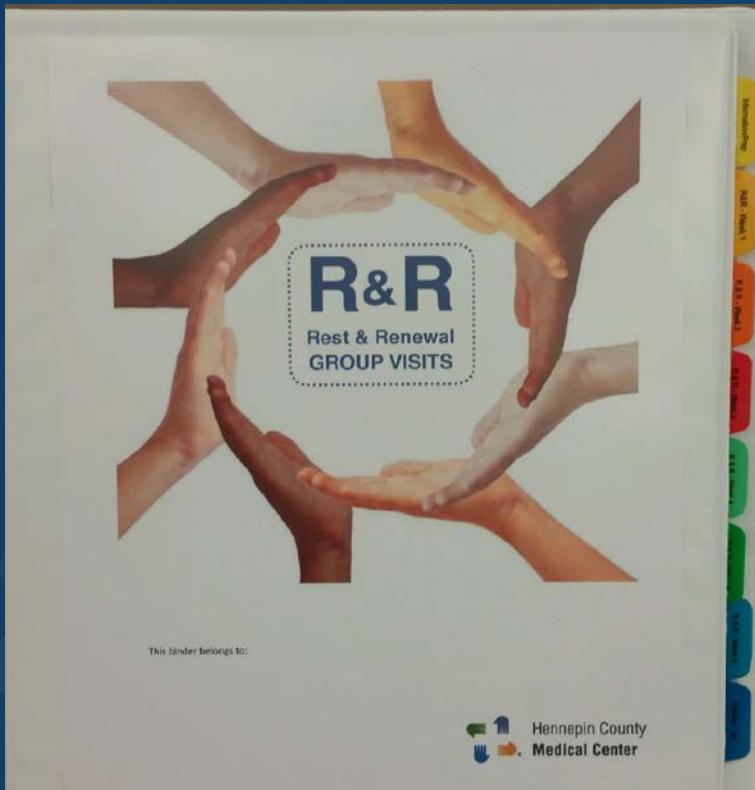
- Vitals, brief MD exam, fill out forms - 20 min
- Settle in with breathing/mindful exercise - 10 min
- Check in - report on how the week went - use engagement activities - 15 min



# O: Elements of a FM GV

- Topic teaching/discussion - 30 min
- Explain handouts - 5 min
- Offer healthy snacks
- Mind body exercise - 20 min
- End with an intention/SMART goal

# Organize Handouts: GV Binder



# Organize: Information Access

- Access to computer?
- Smart phone?
- Health Literacy?



- Recordings
- Website
- Paper
- DVD: records  
exercises
- Conference call –  
access meditations
- Texts
- (HIPPA Compliant if  
group messaging)

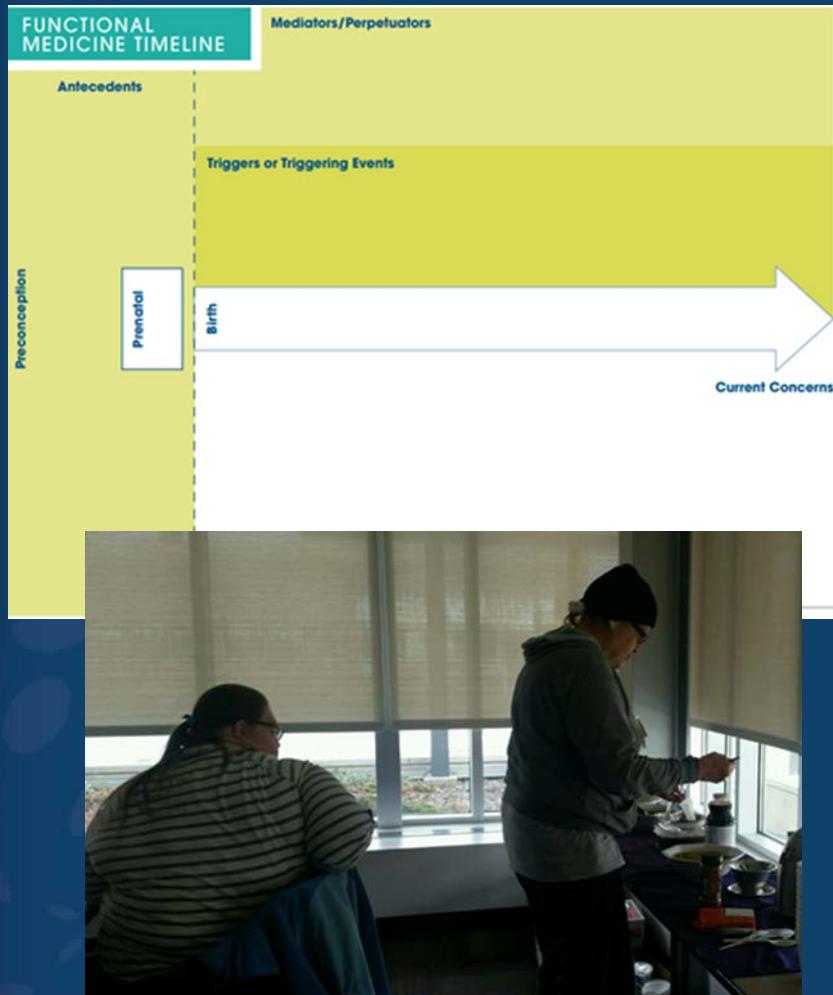


# TELL of FM GV

## GO TO IT:

- Facilitate telling with activities such as pair/share, talking stick, or ball toss.
- Allow each person's story to be told over time.

# Allow Telling of the Story To Evolve As Each Patient is Able



# Tell: Confidentiality



## Confidentiality Agreement—Group Visits

With Dr. Kara Parker

During group medical appointments, you will hear about other participants' health issues and personal information. As a matter of trust, it is your duty to keep everything you hear confidential. Nothing that identifies a participant in any way (including job, ethnicity, religion, etc.) can be shared outside of this group setting.

Like any health appointment, appropriate information about you becomes part of your clinic medical chart. Group data may be used for the purposes of research and/or medical publication, but no individual or identifying information will be disclosed for any reason.

### Confidentiality Commitment

- I will maintain the confidentiality of group members' personal or health information heard during a group medical appointment.
- I am committed to maintaining this confidentiality even if I am no longer participating in group medical appointments.
- I know that I don't have to share any personal information with the group or health care providers unless I choose to do so.

NAME:

Patient's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Spouse's/Support Person's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Each person will be asked to sign  
this commitment before each  
Group Medical Appointment  
Thank You!

- Explain that the visit is confidential.
- Any information shared outside the group needs to be de-identified.



# ORDER of FM GV

## GOTOIT:

- Order food, supplies necessary for the GV.
- Order appropriate FM labs per topic:  
Our phlebotomists will draw blood in  
the group room if we order ahead.



# INITIATE of FM GV

## GOTOIT:

- In FM GV participants are empowered to initiate their own pivotal changes for their health, and for the wellbeing of their families, social networks, and community.

# Initiate: SMART Goals



## Goal Setting for Behavior Change

*"A goal properly set is halfway reached."* —Zig Ziglar

Changing habits to consciously improve your health is no small undertaking, and making the decision to change is just the first step. Actively thinking about and planning for change will help prepare you for the process and motivate you to stay on track.

When you're ready to make a change, it is often helpful to set tangible goals. These goals can be short-term (daily, weekly, monthly) or long-term (6–12 months). When goal setting for behavior change, it's also helpful to set goals that are SMART—specific, measurable, attainable, realistic, and timely. The table below lists some examples of SMART goals.

SMART Goal Component	Example
<b>Specific</b> State the desired outcome as explicitly as possible, and target a specific area for improvement. This is the "who, what, where, when, which, and why" of your goal.	I will walk at least five days per week in the evenings to help me reduce my waist size (in inches).
<b>Measurable</b> Identify the ways in which you will track your progress, and be as specific as possible. This is the "how" of your goal.	I will meditate for 30 minutes a day five times a week in order to lower my stress levels and blood pressure.
<b>Action-oriented</b> Start with small, achievable goals that are easily outlined into specific steps that will enable you to complete the goal. Then, as you meet those smaller goals, work up to intermediate goals and goals that are more difficult to achieve.	I will make an effort to move my body for at least 15 minutes three days a week, increasing my time each week by five minutes until I reach 30 minutes per day. I will add an extra day every two to four weeks until I reach 30–60 minutes for five days a week.
<b>Realistic</b> Create a goal that you are both willing and able to accomplish.	I will begin my bedtime ritual one hour before bedtime, which will help me fall asleep faster each night.
<b>Timely</b> Set a deadline or time for achieving your goal to help keep you motivated.	Over the next month, I will start eating breakfast every day. For the first week, I will make breakfast (or prepare it ahead the night before) twice per week. In the second week, I will make breakfast three times per week. In the third week, I will make breakfast five times per week. In the fourth week, I will make breakfast every day.

To begin setting your own SMART goals, flip the page and fill in the information in the template provided.





# TRACK of FM GV

## GOTOIT:

- Biomarkers (Weight, BP, HR)
- Essential labs
- PHQ-9, GAD-7
- PROMIS-10 (wellbeing scale)
- Qualitative information

# Track: Filling in Assessments



# Track: Vitals

- Vitals can be done in the room with a screen so patients can hear while pulled aside.



# Track: Physical Exam

- Behind a screen, or
- In the room for simple exams
- Offer extra time at the end for private physical or discussion



# Track: Documentation

**Group Visit**

**Subjective:**

Note: Billing is done solely on interaction of MD with this patient.

DF is a 53 y.o. female for a group medical visit for lifestyle. Today's topic is optimal nutrition for health. Basic food rules are discussed and anti-inflammatory diet. Participants share ideas on eating healthy. Current and ongoing problems: Discussed diet throughout her life: blocks to eating healthy, options for eating well on a limited budget, commitment to make steps - 30 minutes.

Patient identified her own eating issues: She has triggers, eats out often and has not been eating well. She has made a commitment to buy Seattle Sutton meals and therefore not eat in restaurants and be motivated to eat the food she has purchased.

She states she had "powerful week" and has been meditating 15 minutes daily every day and notes how improved her mood is and how much less reactive she is.

PMH:  
SH:  
PE: vitals, etc.

**Assessment:**

53 y.o. female with

1. Major depressive disorder, recurrent, in remission (\*\*)
2. Morbid obesity due to excess calories (\*\*)
3. Diabetes mellitus type 2 in obese (\*\*)

Here for a group medical visit focusing on optimal diet related to diabetes and mood as part of a 6 series group medical visit on lifestyle.

**Plan:**

1. "How healthy is your diet" questionnaire given to this patient
2. Meditation on a bite of food, Guided imagery techniques practiced together to improve resilience and reduce stress associated with food addiction/ craving.
3. Information on effects of a high glycemic diet discussed.
4. Recipes for healthy eating are given.
5. Home practices given and information on Mindfulness while eating, Body scan and optimizing digestion.
6. Take home products - bag of walnuts, cinnamon, donated medical food and greens drink powder.
7. Discussion on supplementation with fish oil, vitamin D, magnesium and chromium in diabetes

Follow-up visit in 1 week for next GV.

See orders in Epic Care.

- Billed at a level 3  
99213





# Example of Elements of a FM Lifestyle GV Curriculum

1. Buffering **Stress** through Resilience
2. Restoring through Optimal **Sleep**
3. Honoring the Body through **Nutrition**
4. Centering the Mind with **Movement**



# Lifestyle is a Core of FMGV

Compared with individuals having 0-1 healthy lifestyle behaviors, those with 5- 6 healthy lifestyle behaviors had a 70 % lower prevalence of CV events.

Shi L,et al. Healthy lifestyle factors associated with reduced cardiometabolic risk. Br J Nutr. 2011 Mar;105(5):747-54.

Systematically Improving lifestyle matters.

Lifestyle IS a blockbuster drug!



# Challenges in Lifestyle Change

- 75% of quitters return to smoking in 1 year.
- 50% of dieters regain lost weight in 1 year.

5 factors predict lifestyle change success:

- Beliefs
- Knowledge
- Emotions
- Support
- Transport Costs



Murray J, et al. A qualitative synthesis of factors influencing maintenance of lifestyle behavior change in individuals with high cardiovascular risk. BMC Cardiovasc Disord. 2013 Jul 6;13:48





# Stress Resilience GV

**Assess:** How am I handling stress?

**Settle:** *Relaxation Response.*

**Teach:** What stress is, causes, body and mind effects, resilience practices.

**Practice:** *Shake it out.*

**Eat:** Low glycemic snack – veg & hummus.

**Set Goals:** Stress resilience practice.

**Empower:** Handouts on resilience.

# Settle: Share Time in the *Relaxation Response*



# Assess: Check in on Stress



# Teach: Physiology of the Stress Response



# Teach: Stress is Pervasive and Inadequately Addressed

- 1 in 5 Americans never engages in stress reduction activities.
- Of those who do, two of the top named stress management techniques were >2 hours TV (40%), and surfing the Internet (38%).

American Psychological Association. Stress in America™: Paying With Our Health. 2014; Feb 4

# Teach: Physiology of Stress Reduction - Meditation

- Reduces cortisol and oxidative stress.
- Reduces brain aging.
- Increases expression of genes associated with energy metabolism, mitochondrial function, insulin secretion.
- Reduces expression of genes of inflammatory response and stress.

PLoS One. 2013 May 1;8(5):e62817.

Xiong G et al, Longevity, Regeneration and Optimal Health.

Annal Acad Sciences 2009



©2015 The Institute for Functional Medicine

# Practices: *Shake it Out*

- *4-7-8 breathing*
- *Relaxation Response*
- *Mindfulness Meditation*
- *HeartMath*
- *Yoga*
- What you or your facilitator are trained in
- Pull up YouTube video



# SMART Goals:



## ***Practice Tracking Log for Week 1***

Please Awareness of Breath, Shaking or Straw Breathing (3 – 5 minutes) and the Relaxation Response (5 – 25 minutes) daily. Some people practice first thing when they wake up in the morning before getting out of bed or in the evening in bed before going to sleep. Try them in the morning, pause during the day before or after lunch/dinner, and/or practice in the evening. See when it is the best time for particular practices...like Awareness of Breath (AOB) while riding the bus, before eating, before or after an activity. Formal practice is when you plan when you will practice and informal when it is needed and pausing throughout daily routines, i.e. while riding the bus, while at work, before or after a meeting, etc.

Date	Focused Activity	Time of Day	Time Duration	Comments
Examples:	<ul style="list-style-type: none"><li>• Awareness of Breath (Breathing Space)</li><li>• Relaxation Response</li><li>• List current practices</li></ul>	Morning, Afternoon, Evening at Night	5 minutes 10 minutes 15 minutes 20 minutes	How did it go for you? What did you notice with your thoughts, feelings or sensations before or after your practice?

# Empower With Information:



## Strategies for Transforming Stress

*"The time to relax is when you don't have time for it."* —Sydney J. Harris

Stress is unavoidable. Yet it's also manageable. You can change your responses to stress and have a huge impact on your resilience. You can stop the cycle of chronic stress and worry with small changes. Improving your ability to transform stress will strengthen your energy reserves, improve tissue health, and create a supportive environment for healthy aging. Take deep breaths, and transform stress with confidence and skills.

You are not alone—most Americans report moderate to high daily stress, which can worsen and even cause health conditions.

**Take a few healthy steps every week, and see how it changes your ability to cope with and transform stress. Proven stress management techniques include:**

Daily Suggestions	Weekly Suggestions
Go for a walk	Spend time with supportive friends or family
Listen to music—or dance	Look at something you consider beautiful (i.e., art or nature)
Make & eat a healthy meal	Try yoga, tai chi, or qigong
Breathe deeply and center yourself	Adopt an active hobby like water aerobics, bicycling, or gardening
Journal about positive things for which you are grateful	Write a letter to someone you care about
Scan your body and be aware of how you feel	Get a massage, sit in a sauna, or soak in a hot tub
Be creative (i.e., adult coloring books, watercolors, sketch, crochet, write, draw)	Sleep until you wake naturally
Give yourself a hand or foot massage	Visualize a place you find relaxing, like a beach, a park, a childhood room, etc.





## The Relaxation Response

*"The relaxation response is a physical state of deep rest that changes the physical and emotional responses to stress... and the opposite of the fight or flight response."* —Herbert Benson, MD

The Relaxation Response is a simple, effective, mind/body approach to relieving stress. Discovered by Dr. Benson at Harvard Medical School, it is routinely recommended to treat patients suffering from heart conditions, high blood pressure, chronic pain, insomnia, and many other physical ailments.

### Some qualities of the Relaxation Response include:

- Decreased heart rate
- Decreased oxygen consumption
- Decreased blood pressure
- Decreased muscle tension
- Lower respiratory rate
- Reduction of cortisol
- Lower pulse rate
- Reduction of noradrenaline

### Steps for the Relaxation Response:

1. Sit quietly in a comfortable position.
2. Close your eyes.
3. Deeply relax all your muscles, beginning at your feet and progressing up to your face. Keep them relaxed.
4. Breathe through your nose. Become aware of your breathing. As you breathe out, say the word, "one", silently to yourself.
  - For example, breathe in ... out, "one", breathe in ... out, "one", etc.
  - Breathe easily and naturally.
5. Continue for 10 to 20 minutes.
  - You may open your eyes to check the time, but do not use an alarm.
  - When you finish, sit quietly for several minutes, at first with your eyes closed and later with your eyes opened.
  - Do not stand up for a few minutes.

Do not worry about whether you are successful in achieving a deep level of relaxation. Maintain a passive attitude and permit relaxation to occur at its own pace. When distracting thoughts occur, try to ignore them by not dwelling upon them and return to repeating "one."

With practice, the response should come with little effort. Practice the technique once or twice daily, but not within two hours after any meal, since the digestive processes seem to interfere with the elicitation of the Relaxation Response.

\*Or any soothing, pleasant sound, preferably with no meaning or association, to avoid stimulation of unnecessary thoughts.



# Sleep GV

**Assess:** Sleep questionnaire.

**Settle:** Straw Breathing.

**Teach:** Sleep need and benefits, hygiene, risks of insufficient sleep, supplements.

**Practice:** *MBSR Body Scan.*

**Eat:** Tahini and vegetables, almonds.

**Set Goals:** Restoration/sleep and practice.

**Empower:** Handouts on sleep, websites.

# Assess: Sleep

- IFM Sleep Questionnaire

- IFM Sleep Apnea Screening Questionnaire



## Sleep Questionnaire

Patient Name \_\_\_\_\_ Date \_\_\_\_\_

Sleep is important for healing, immunity, mood, cognition, and many other physiological functions.

Please answer the following questions as accurately and fully as possible. For Yes / No questions, please check the correct answer and provide an explanation if one is requested. The information will help to determine whether you are getting the sleep you need and to identify possible strategies to help you sleep better.

**Sleep Problems:**

1 Do you have a sleep problem that has been diagnosed?  Yes  No  
If yes, what? \_\_\_\_\_

2 Do you feel that you have a sleep problem?  Yes  No  
If yes, how would you describe it? \_\_\_\_\_  
Do you snore loudly or stop breathing while you sleep?  Yes  No  
Have you had a sleep study performed?  Yes  No  
Do you use a CPAP machine?  Yes  No

**Sleepiness Questions:**

3 Do you feel well rested in the morning?  Yes  No  
4 Are there times during the day or evening that you feel sleepy?  Yes  No  
If yes, what times are these? \_\_\_\_\_  
5 What do you do to wake up when you feel sleepy? \_\_\_\_\_  
6 Have you ever had an accident at work, at home or on your job because you were sleepy?  Yes  No  
If yes, please explain \_\_\_\_\_  
7 Do you take naps?  Yes  No  
If yes, for how many minutes and at what time of day? \_\_\_\_\_  
8 Do you feel well rested after a nap?  Yes  No

**Insomnia Questions:**

9 Can you usually fall asleep within 20 minutes of lying in bed?  Yes  No  
If not, how long does it take? \_\_\_\_\_  
10 If it takes longer than 20 minutes, what do you do while trying to fall asleep?  
(e.g., read, watch TV, look at phone, get up, etc.) \_\_\_\_\_  
11 Do you ever feel so wired at night that it is difficult to fall asleep?  Yes  No  
12 Have you had a saliva cortisol test?  Yes  No  
If yes, what was your night time level? \_\_\_\_\_



# Settle: Sleep - Straw Breathing



# Teach: Sleep

Sleep debt is linked to

- Diabetes
- Depression
- CVD
- Obesity

cdc.gov has state specific information



Wulff K, Gatti S, Wettstein JG, Foster RG. Sleep and circadianrhythm disruption in psychiatric and neurodegenerative disease. *Nature Reviews.Neuroscience.* 2010;11(8):589-99.

Briançon-Marjollet A, Weiszenstein M, Henri M, Thomas A, Godin-Ribout D, Polak J. The impact of sleep disorders on glucose metabolism: endocrine and molecular mechanisms. *Diabetology & Metabolic Syndrome.* 2015;7:25. doi:10.1186/s13098-015-0018-3.

# Teach: Sleep

- Most patients with mood disorders experience insomnia.
- Insomnia is an independent risk factor for depression.



- Benca RM, Okawa M, Uchiyama M, Ozaki S, Nakajima T, Shibui K, Obermeyer WH. Sleep and mood disorders. *Sleep Med Rev*. 1997 Nov;1(1):45-56.
- Riemann D. Insomnia and comorbid psychiatric disorders. *Sleep Med*. 2007 Dec;8 Suppl 4:S15-20. doi: 10.1016/S1389-9457(08)70004-2.

# Practice: Sleep – *Body Scan*

- In a trial those in the mindfulness group practicing 20 minutes daily had less:

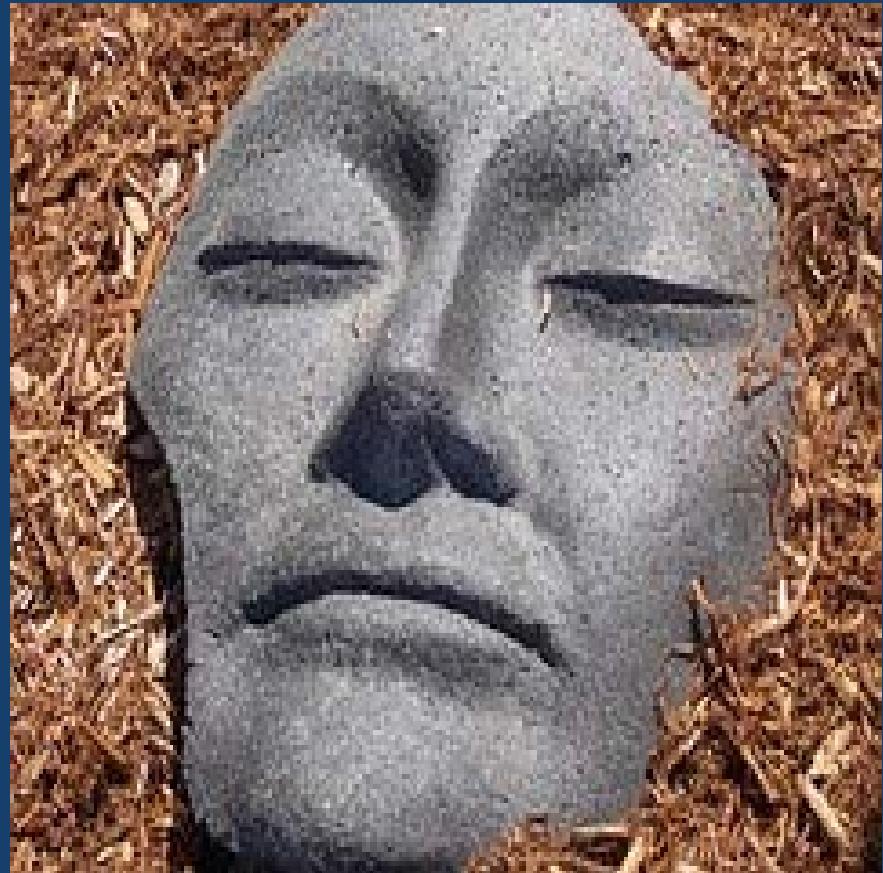
Insomnia, fatigue, and depression at the end of six sessions.



JAMA Intern Med. 2015;175(4):494-501.  
doi:10.1001/jamainternmed.2014.8081

# Set Goals: Optimizing Sleep

- Practice *Body Scan*
- Journal at bedtime
- Improve sleep hygiene
- Get assessed for sleep apnea



# Empower: Sleep



## Suggestions for Better Sleep

Achieving better sleep can lead to many health improvements. This list of suggestions for better sleep is not meant to be implemented in its entirety. Instead, pick three to four changes to implement to improve sleep quality.

### MINIMIZE OR AVOID STIMULANTS

- Avoid alcohol (wine, beer, and hard liquor) within 3 hours of bedtime.
- Avoid caffeine-containing beverages or foods after 2 pm; if sensitive to caffeine, avoid it after 12 noon. (These items include Pepsi, Coke, Mountain Dew; tea, coffee, lattes, and chocolate; coffee- or espresso-
- containing ice creams or desserts). Read the labels of everything you eat and drink!
- Avoid Sudafed or other decongestant cold medicines at night.
- Some medications may have stimulating effects. Consult your pharmacist and doctor to determine whether any of them might be contributing to sleep problems. Do not discontinue them without permission from your doctor.
- Complete any aerobic exercise before 6 pm (or at least 3 hours before bedtime).

### NIGHTTIME TENSION AND ANXIETY

- Avoid anxiety-provoking activities close to bedtime.
- Avoid watching the news before going to bed.
- Avoid reading stimulating, exciting materials in bed.
- Avoid paying bills before bed.
- Avoid checking your financial reports or the stock market before bedtime.
- Avoid arguments before bedtime.
- Try to achieve some action plan or resolution of a discussion or argument before trying to go to sleep.
- Avoid repeated negative judgments about the fact that you are unable to sleep.
- Use positive self-talk phrases regarding your ability to relax and fall asleep: "I can fall asleep." "I can relax."
- Try writing in your journal any disturbing thoughts that are running through your mind.
- Schedule a time within the next few days to deal with whatever is troubling you. If you are having trouble managing your concerns for more than a few weeks, consult your healthcare provider for treatment suggestions or a counseling/therapy referral.
- There are many relaxing yoga or stress reducing mindful breathing CDs or DVDs available to help you find a relaxing bedtime ritual that works for you.

 IFM<sup>®</sup>

©2015 The Institute for Functional Medicine



# Nutrition GV

**Assess:** How healthy is your diet?

**Settle:** *Loving Kindness Meditation.*

**Teach:** *Food Rules*, anti-inflammatory, low glycemic diet, eat a rainbow.

**Practice:** *Meditation on a Raisin.*

**Eat:** Nuts, chia pudding, green drink.

**Set Goals:** SMART goals for 1 diet shift.

**Empower:** IFM handouts, *ewg.org*.

# Assess: Nutrition

 Registro de estilo de vida, alimentación y nutrición – 1 día			
Nombre del paciente _____ Fecha _____ Tipo de plan alimenticio: _____			
<b>Día 1</b>			
<b>Actividades del día</b>	<b>Ingesta de alimentos y bebidas</b> (Incluya tipo, cantidad, marca)	<b>Macronutrientes (PGC) y fitonutrientes</b>	
Hora de levantarse		P _____ G _____ C _____ <input type="checkbox"/> R <input type="checkbox"/> N <input type="checkbox"/> A <input type="checkbox"/> V <input type="checkbox"/> A/P/N <input type="checkbox"/> B/T/M	
Desayuno <b>Hora</b>		P _____ G _____ C _____ <input type="checkbox"/> R <input type="checkbox"/> N <input type="checkbox"/> A <input type="checkbox"/> V <input type="checkbox"/> A/P/N <input type="checkbox"/> B/T/M	
Tentempié de media mañana <b>Hora</b>		P _____ G _____ C _____ <input type="checkbox"/> R <input type="checkbox"/> N <input type="checkbox"/> A <input type="checkbox"/> V <input type="checkbox"/> A/P/N <input type="checkbox"/> B/T/M	
Almuerzo <b>Hora</b>		P _____ G _____ C _____ <input type="checkbox"/> R <input type="checkbox"/> N <input type="checkbox"/> A <input type="checkbox"/> V <input type="checkbox"/> A/P/N <input type="checkbox"/> B/T/M	
Tentempié de media tarde <b>Hora</b>		P _____ G _____ C _____ <input type="checkbox"/> R <input type="checkbox"/> N <input type="checkbox"/> A <input type="checkbox"/> V <input type="checkbox"/> A/P/N <input type="checkbox"/> B/T/M	
Cena <b>Hora</b>		P _____ G _____ C _____ <input type="checkbox"/> R <input type="checkbox"/> N <input type="checkbox"/> A <input type="checkbox"/> V <input type="checkbox"/> A/P/N <input type="checkbox"/> B/T/M	
Tentempié de la noche <b>Hora</b>			
Hora de ir a dormir			
<b>P:</b> proteínas; <b>G:</b> grasas; <b>C:</b> carbohidratos; <b>R:</b> rojo; <b>N:</b> naranja; <b>A:</b> amarillo; <b>V:</b> verde; <b>A/P/N:</b> azul/púrpura/negro; <b>B/T/M:</b> blanco/tostado/marrón			
<b>Sueño y relajación</b>	<b>Ejercicio y movimiento</b>	<b>Estrés</b>	<b>Relaciones</b>
<b>Sueño</b> Cantidad: _____ (horas) Calidad: <input type="checkbox"/> Mala <input type="checkbox"/> Regular <input type="checkbox"/> Buena <b>Relajación</b> <input type="checkbox"/> Sí <input type="checkbox"/> No Tipo/cantidad:	Tipo, duración e intensidad <input type="checkbox"/> Aeróbico;  <input type="checkbox"/> Resistencia;  <input type="checkbox"/> Flexibilidad;	Prácticas para reducir el estrés:  Factores que causan estrés:	Que dan apoyo:  Que no dan apoyo:
<b>Mental</b>	<b>Emocional</b>	<b>Espiritual</b>	



# Settle: Nutrition



# Teach: Nutrition

- Michael Pollan's *Food Rules*
- Real vs. processed food
- Shop the perimeter
- Eat a rainbow weekly
- *Eating Well on a Budget* by [ewg.org](http://ewg.org)



# Practice: Nutrition

## Mindful Eating



# Practice: Eating - Mindfully

Studies show MBSR increases gray matter concentration in brain regions involved in learning and memory, emotional regulation, and perspective taking.

- “Mindfulness places a wedge between addiction and action, allowing choice.”

Britta, H., et al. (2011). Psychiatry Research, volume 191, issue 1, pages 36-43.

# Practice: Healthy Snacks



# Empower: Nutrition

- IFM information on specific diets
- Anti-inflammatory diet
- Recipes
- Eating well on a budget
- Food Elimination Diet
- Cooking classes





UNIVERSITY OF MINNESOTA | EXTENSION

COOKING IS A SNAP-ED NUTRITIONAL PROGRAM AT HCMC

## "Eat Healthy, Be Active" Shared Medical Group Visits

### MAKE HEALTHY FOOD CHOICES

Learn how to eat healthy your way in fun, 6-week interactive program with Dr. Kara Parker, Cass McLaughlin and SNAP-Educator Deanna Beaulieu.

#### Six Healthy "Cooking & Tasting" Sessions:

**When:** Wednesday's, May 17 – June 21, 2017  
**Time:** 12:30-3:00 p.m. (Check in at 12:15 pm)  
**Where:** Whittier Clinic, HCMC  
2810 Nicollet Ave., Minneapolis, MN 55408

#### Learn how to:

- Enjoy healthy food that tastes great
- Make quick, healthy meals and snacks
- Eat healthy on a budget
- Shop with a grocery store tour
- Lose weight and keep it off
- Make healthy eating part of your total lifestyle
- Be physically active and live well



### TAKE HOME IDEAS

During *Eat Healthy, Be Active* sessions, you will get handouts and recipes to help you make small or big changes to live a healthier life and a more active lifestyle.

### IS THIS MEDICAL GROUP VISIT FOR YOU?

Are you an HCMC patient on MA, Medicare, Medicaid or Hennepin Health insurance? Then this program is FREE (Some co-pays may apply.)

### Space is limited. Register NOW!

Contact: Cass McLaughlin, Coordinator/Facilitator  
Phone: 612-873-8048  
Email: catherine.mclaughlin@hcmed.org



Hennepin County  
Medical Center

# Cooking Classes



# Grocery Store Tour



# Herbal Garden Tour





# Movement GV

**Assess:** Exercise questionnaire.

**Settle:** Tai Chi, restorative yoga.

**Teach:** Health benefits of movement.

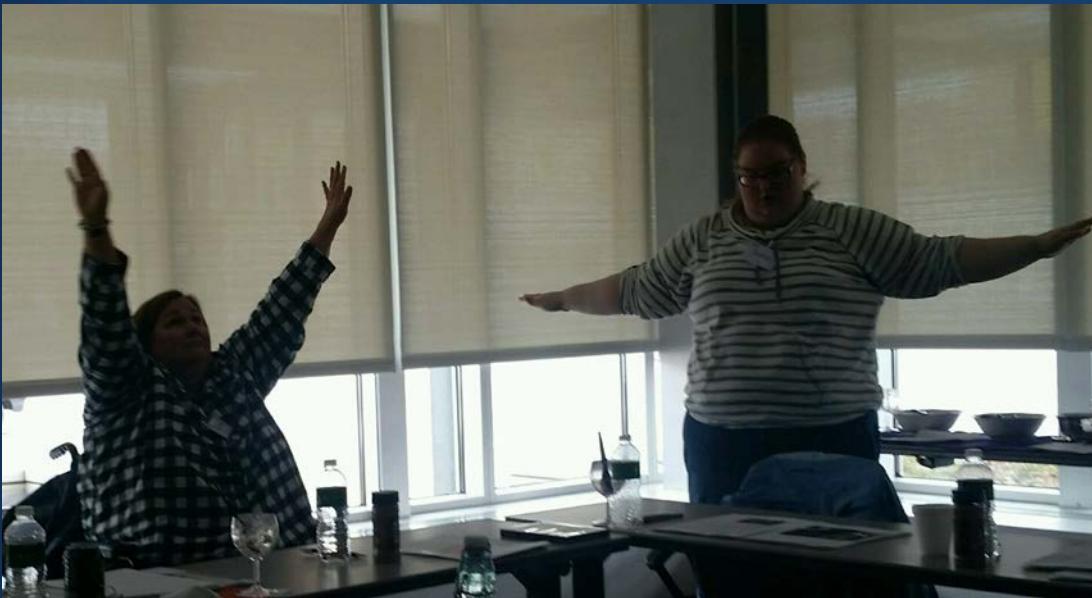
**Practice:** *Walking Meditation.*

**Eat:** Green tea, chia pudding, smoothie.

**Set Goals:** Movement and exercise.

**Empower:** Exercise Prescription.

# Settle: Restorative Yoga



# Check In: “I’ve been walking my dog, my BS are much better.”



# Teach: Movement

- Less than 1/2 of patients receive clinical counseling on physical activity.
- Inactivity accounts for 5% of global mortality and is a greater health risk than being overweight or obese.
- 70% of most adult's days are sedentary.
- The remaining 30% is only light activity.

Global Health Risks: Mortality and Burden of Disease Attributable to Selected Major Risks.

Geneva, World Health Organization, 2009

Owen N, P.H.D., Sparling PB, E.D.D., Healy GN, P.H.D., Dunstan DW, P.H.D., Matthews CE, P.H.D.

Sedentary behavior: Emerging evidence for a new health risk. Mayo Clin Proc. 2010;85(12):1138-41.



# Teach: Movement

- Daily movement extends ones life by years.
- Mortality is reduced proportionally as sitting time is replaced with standing, walking, physical activity or sleeping.
- Janssen I et al. Years of Life Gained Due to Leisure-Time Physical Activity in the United States. American journal of preventive medicine. 2013;44(1):23-29
- Stamatakis E, , et al. All-cause mortality effects of replacing sedentary time with physical activity and sleeping using an isotemporal substitution model: a prospective study of 201,129 mid-aged and older adults. Intl J of Behavioral Nutrition and Physical Activity. 2015;12:121.

# Teach: “Sitting = Smoking”

- Each additional hour of television watched per day translated to an 11% increase in all-cause mortality.

Circulation. 2010 Jan 26;121(3):384-91.



# Teach: High Intensity Interval Training (HIIT)

- Change in vascular function CRF, oxidative stress, inflammation, and insulin.
- HIIT induced positive effects on CRF,CVD risk factors, oxidative stress, inflammation.

Ramos JS, et al. The impact of high-intensity interval training versus moderate-intensity continuous training on vascular function: a systematic review and meta-analysis. Sports Med. 2015 May;45(5):679-92.

# Practice: Walking Meditation



# Empower: Movement

 THE INSTITUTE FOR  
FUNCTIONAL MEDICINE®

## Exercise Prescription

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Goals \_\_\_\_\_

Risk Assessment

<input type="checkbox"/> PAR-Q:	<input checked="" type="checkbox"/> Cleared	<input type="checkbox"/> Not Cleared	
<input type="checkbox"/> Risk Factors:	<input type="checkbox"/> Low Risk	<input type="checkbox"/> Moderate Risk	<input type="checkbox"/> High Risk
<input type="checkbox"/> Exercise Stress Test:	<input type="checkbox"/> Pass	<input type="checkbox"/> Fail	

Comments \_\_\_\_\_

**Intensity** (Check desired measure type and intensity level):

Measure	Intensity		
	Low	Moderate	Vigorous
<input type="checkbox"/> "Talk Test"	<input type="checkbox"/> Able to talk and/or sing	<input type="checkbox"/> Able to talk but not sing	<input type="checkbox"/> Difficult or unable to talk
<input type="checkbox"/> Perceived Exertion (10 Point Scale)	<input type="checkbox"/> <3	<input type="checkbox"/> 3-4	<input type="checkbox"/> ≥5
<input type="checkbox"/> Maximal Heart Rate ( $HR_{max}$ ) = _____ Calculating $HR_{max} = 206.9 - (0.67 \times \text{age})$	<input type="checkbox"/> <64% = _____	<input type="checkbox"/> 64-76% = _____	<input type="checkbox"/> >76% = _____

Comments \_\_\_\_\_

**FITT Plan**

Exercise Prescription:	Cardio/Aerobic	Strength/ Resistance	Flexibility/ Stretching	Balance
<b>F = Frequency</b> times per week				
<b>I = Intensity</b> (e.g., low, moderate, vigorous)				
<b>T = Time/duration</b> minutes each day				
<b>T = Type</b> (e.g., walking, jogging, swimming)				

Comments \_\_\_\_\_

Recommended by \_\_\_\_\_ Date \_\_\_\_\_

Reassessment Appointment \_\_\_\_\_



# Practitioner Lifestyle



- Clinicians who exercise are more likely to address exercise with patients.
- Clinicians who do aerobics counsel on aerobics, those that do strength training counsel on it.
- The main barriers to counseling on exercise are: inadequate time and lack of knowledge and experience.
- Abramson S, et al .Personal exercise habits and counseling practices of primary care physicians: a national survey. Clinical Journal of Sports Medicine. 2000;10(1):40-8.

# Monthly Ongoing FM GV

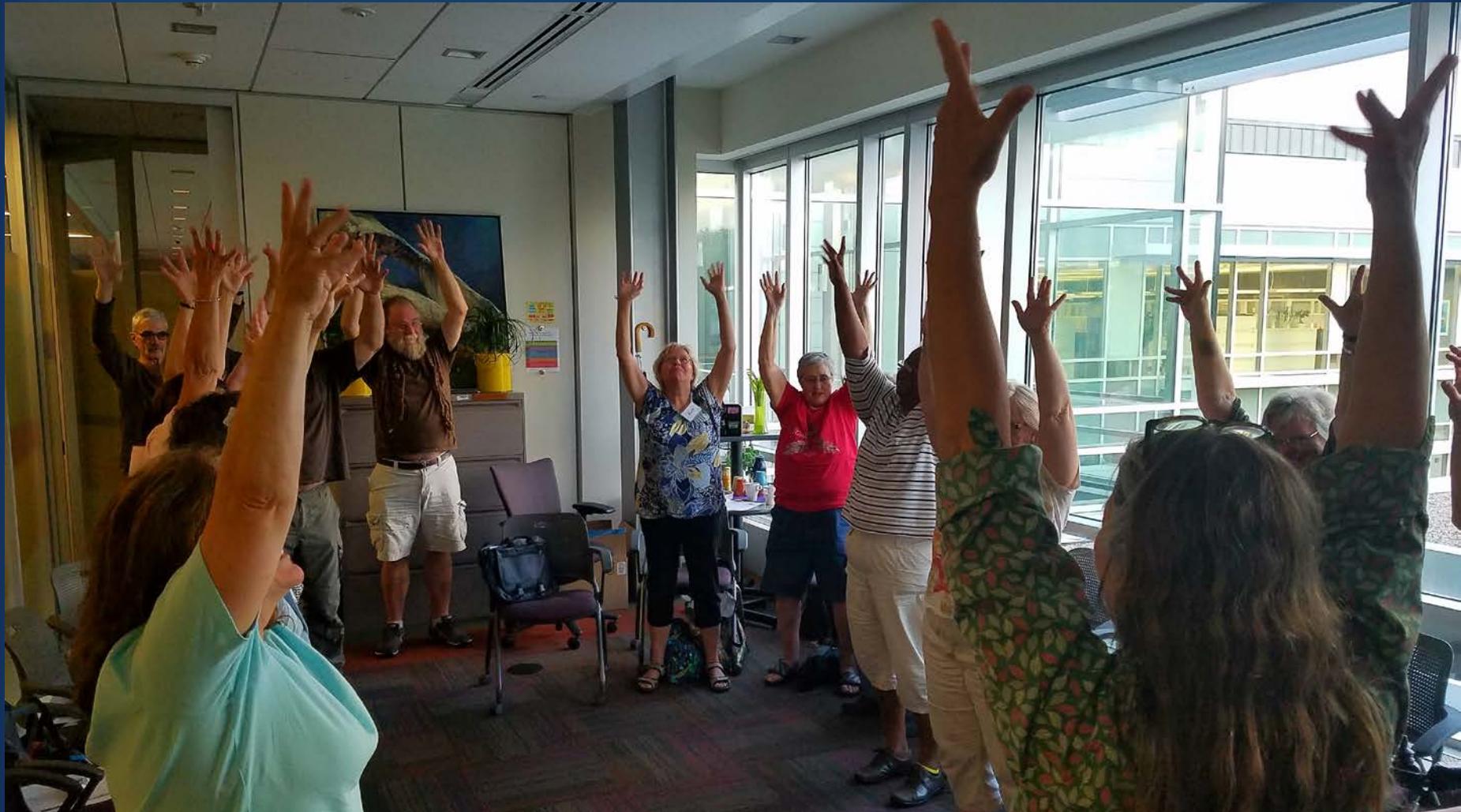


- Digest Well
- Balance Hormones
- Improve Mood
- Strengthen Structure
- Detox Safely
- Restore Energy
- Protect Memory
- Heal the Heart
- Optimize Genetics
- Manage Mitochondria
- Tame Your Pain

# Optimize Genetics



# Shake it Out

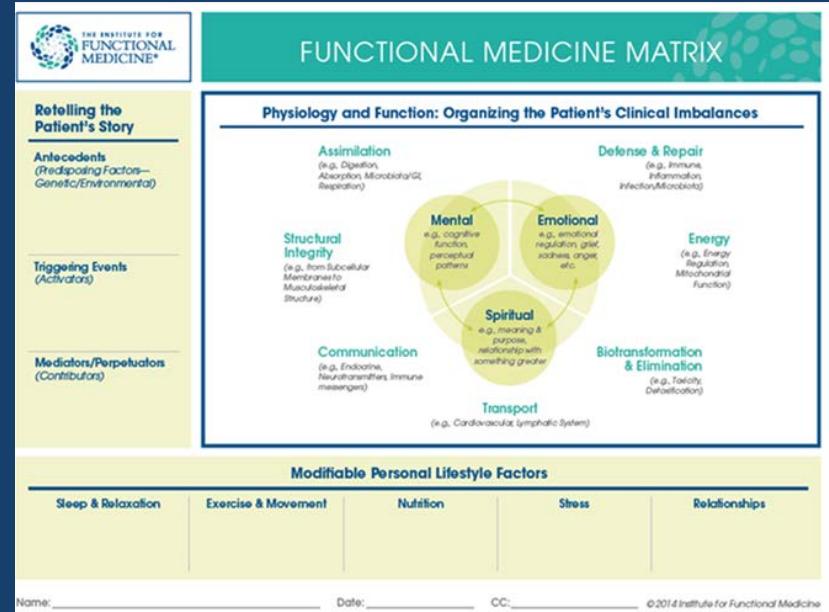


# Set Intentions for Action



# Public Health Issues Are Personal and Global

- Processed Food
- Air, water, light Pollution
- EMF Radiation
- CO<sub>2</sub> Production
- Heavy Metals
- Pesticides
- Plastics



# Sharing GV Benefits with the Community

The screenshot shows a Meetup group page for "Food Wise Support Group For Healthy Lifestyles". The page has a purple header with the group's name. Below the header, there's a navigation bar with links for Home, Members (which is highlighted), Photos, Discussions, and More. A red "Join us!" button is visible. On the left, there's a sidebar with information about the group: "Minneapolis, MN" (Founded Mar 29, 2016), "Upcoming Meetups" (2), "Our calendar" (with a calendar icon), and a "Help support your Meetup" section with a "Chip in" button. At the bottom of the sidebar, it says "Organizer: Sunderta" and shows a small profile picture of Sunderta.

**Food Wise Support Group For Healthy Lifestyles**

Home Members Photos Discussions More Join us!

**Minneapolis, MN**  
Founded Mar 29, 2016

About us...  
Upcoming Meetups 2  
Our calendar  
Help support your Meetup Chip in  
Organizer: Sunderta

**Sunderta**  
Organizer

**Location:** Minneapolis, MN   **Organizer since:** March 29, 2016

**Introduction**  
In 2012 I was diagnosed with Type II Diabetes and have since been managing my blood sugars with diet and exercise. I recently participated in a support group at Whittier Integrative Health Clinic. I started this group for continued inspiration.

**Member of**  
This member chose not to make their Meetup membership information public.



# Our Qualitative Research



# Mental Health Improvements

- “I’ve been thinking a lot about calming down and am able to now.”
- “Relaxing more, dealing with daily stress.”
- “Better rested, no depression, less anxiety.”
- “I don’t take things that are stressful on a personal level as I did before.”



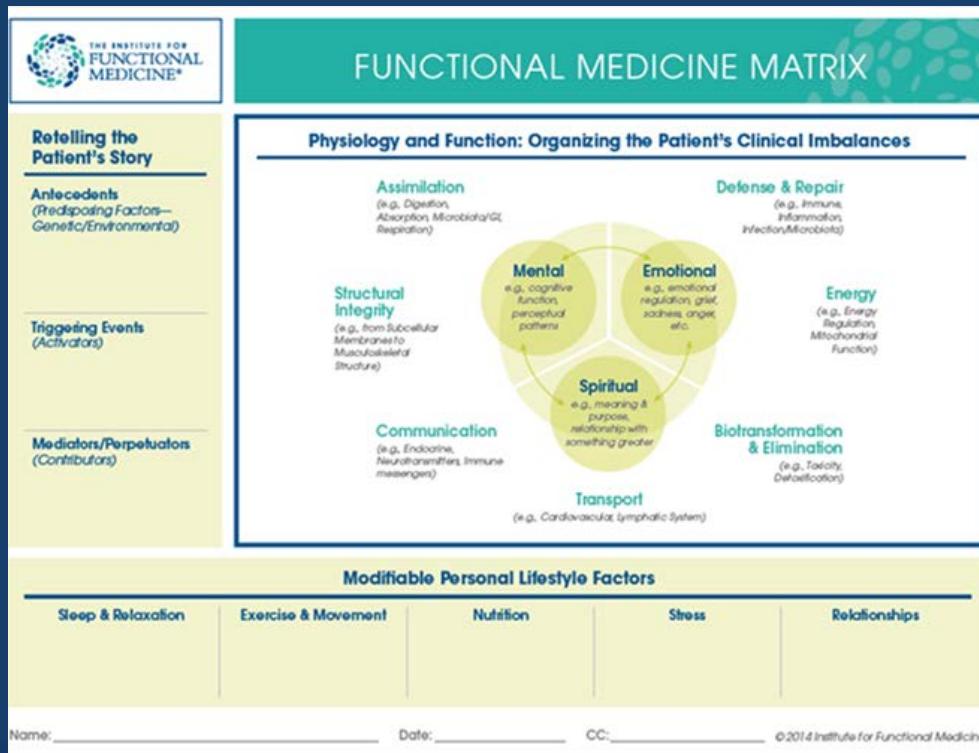
# Health Changes

- “I’m moving more, eating better, feeling more positive.”
- “My blood pressure and sugars have come down significantly.”
- “ I have lost a total of 20 lbs and learned to relax more. I also have used meditation to think and reply differently to stressful matters.”



# Public Health Aims to...

“Provide maximum benefit for the largest number of people.” — WHO



# Functional Medicine Based GV are a forum to inform and empower the health of the individual and impact the health of the public



# GV Resources

- GV Handbook – Ed Nofsinger
- Dr. Shilpa Saxena's GV Toolkit
- IM4US (Integrative Medicine for the Underserved) archived pre-conferences
- Integrative Medicine Group Visits: A new Model of Care for Managing Health and Wellbeing" Katherine Gergen Barnett, MD
- Boston Medical Center GV Programs
- Cleveland Clinic GV Facilitators Handbook
- Martinez, CA GV Facilitators Course

