## The HOPE Note

## A TOOL FOR ADDING INTEGRATIVE HEALTH CARE TO A ROUTINE OFFICE VISIT



#### What We Know

Physicians and other health care providers strive to keep patients healthy, help them heal when sick or hurt, and improve their quality of life at every stage. People with chronic conditions account for 81% of hospital admissions; 91% of all prescriptions filled; and 76% of all physician visits. More than half of all adults in the United States have at least one chronic condition such as heart disease, diabetes, high blood pressure and arthritis. These conditions are among the most preventable and manageable with lifestyle changes and evidence-based self-care and complementary approaches to healing. If health care is to deliver health and well-being, it must address these underlying causes of ill-health and learn to better facilitate healing.

#### The Challenge

Our health care system is not set up to effectively deliver what patients want and need—health and well-being. Eighty percent of health comes from outside the doctor's office, including social and emotional factors, personal behaviors, mental and spiritual factors, and the physical environment. Most health care encounters deliver treatments that do not address these health determinants.

Chronic disease requires an approach in which all factors of a person's life are considered—where the focus is not just on countering illness, but also on promoting health; where healing is as important as curing.

#### A Solution: Integrative Health

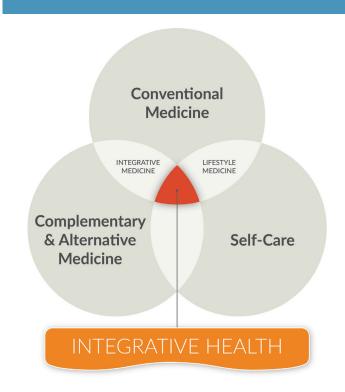
Integrative health is the pursuit of personal health and well-being foremost, while addressing disease as needed, with the support of a health team dedicated to all evidence-based approaches—conventional, complementary and self-care.

It is a partnership between the practitioner and patient that looks to a wider set of offerings with proven approaches—approaches that address the underlying causes of disease. A growing body of evidence shows that when patients are integrally involved in managing their own care, they will be healthier and happier. If

While the constraints in our health care system prohibit rapid, wholesale change to an integrative health approach, physicians can still begin to transform their own practices and incorporate more healing factors into day-to-day practice. Many already include the elements of integrative health care.

#### **MORE THAN HALF OF THE TOP 25**

conditions (hypertension, hyperlipidemia, diabetes, obesity, chronic back pain, anxiety and depression) can be mitigated and treated with health promotion and healing approaches—nutrition and movement, stress management, sleep and social support, and evidence-based complementary medicine such as therapeutic yoga, acupuncture and massage therapy.



#### Sources:

- RWJF/JHU Bloomberg School of Public Health (2010) http://www.rwjf.org/content/dam/farm/reports/reports/2010/rwjf54583
- ii https://www.cdc.gov/chronicdisease/overview/index.htm
- http://www.healthaffairs.org/healthpolicybriefs/brief.php?brief\_id=86

# The HOPE Note | HEALING ORIENTED PRACTICES AND ENVIRONMENTS



The HOPE note is a tool for physicians that can be used to improve a patient's health and well-being, particularly those with chronic conditions. The goal of the HOPE note is to reframe the patient experience from one of disease treatment to one that emphasizes self-healing and integrates evidence-based complementary approaches into conventional medical care.

The HOPE note complements what physicians have already learned in their medical training—the SOAP note—the Subjective Objective Assessment and Plan. This is the way that every medical student learns how to organize their thinking around a patient visit. After a full medical diagnosis and treatment is completed, including a SOAP note, the physician would complete a HOPE note.

The physician begins the HOPE note by asking the patient a series of questions geared to evaluate the areas of life that impact health.

This discussion results in a patient action plan. The plan is mutually agreed upon and goals are set and tracked. Continuing support can come through a health coach, group visits, health apps, or ongoing informational resources.

I developed the HOPE note because as a primary care provider, I've found that the SOAP note is too narrow to effectively grasp the causes of and approaches needed for many of the conditions I see - conditions like chronic pain, obesity, diabetes and hypertension.

- DR. WAYNE JONAS

### **The HOPE Questions**

Together, patient and provider can spark healing beyond the SOAP Note. Let's make asking these questions a routine part of medical care.

#### **Mental and Spiritual Areas**

#### 1. What is your goal for your healing? What's meaningful for you?

This addresses a person's the inner life — their desires, their beliefs, and their needs—why they get up in the morning, their purpose in life—what's meaningful for them. What matters rather than what is the matter.

#### **Social and Emotional Areas**

#### 2. What are your connections and relationships?

So often the reason and process for healing has to do with social relationships — with family, friends, communities and colleagues.

#### **Lifestyle and Behavioral Areas**

#### 3. What do you do during the day? What is your lifestyle like?

Lifestyle and behavior can impact up to 60-70 percent of chronic illnesses; therefore, these behaviors are essential for creating health. But behavior change must be connected to what is meaningful for the person, or it cannot be sustained.

#### **Physical Environment**

#### 4. What is your home like? Your work environment? Do you get out in nature?

The communities, the work sites, the schools and the environment in which patients live, often dictate what they're able to do; what happens to them; how long they live; and how well they flourish and function.