Integrative healthcare: What it means for the practitioner and the client

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Integrative healthcare is becoming more and more prevalent and is now becoming part of mainstream medicine (Sierpina & Dalen, 2013). There are many interpretations of integrative healthcare. The term means different things to different people. The World Health Organization provides the following definition:

‘Integrated care is a concept bringing together inputs, delivery, management and organization of services related to diagnosis, treatment, care, rehabilitation and health promotion. Integration is a means to improve services in relation to access, quality, user satisfaction and efficiency.’

Groene & Garcia-Barbero, 2001

Research demonstrates that the integrative approach can lead to improved treatment outcomes. It can result in more effective care by combining therapies in a way that exceeds the collective effect of individual practices (Boon et al, 2009). As it gains acceptance and recognition, new ways to incorporate integrative medicine into clinical settings to better serve patients are sought after. It is seen as a person-centred, holistic approach that provides the best care possible. As the Academic Consortium for Integrative Medicine & Health states:

‘Integrative medicine and health reaffirms the importance of the relationship between practitioner and patient, focuses on the whole person, is informed by evidence, and makes use of all appropriate therapeutic and lifestyle approaches, healthcare and disciplines to achieve optimal health and healing.’

Academic Consortium for Integrative Medicine & Health, 2015

In the Canadian healthcare system and around the world, the idea of an integrative clinic is more common than the reality of it. There are few truly integrative clinics where practitioners can collaborate and provide their clients with fully integrative holistic healthcare.

In contrast, multidisciplinary clinics are quite common, offering a selection of natural health practices under one roof. At the same time, integrative clinics offering various biomedical services are also common. However, clinics that offer biomedical services alongside a range of natural health practices are few and far between.

I am fortunate to be working in one such clinic, where the integrative approach is central to our philosophy. The Al & Malka Green Artists’ Health Centre (AHC) is an integrative clinic at Toronto Western Hospital, part of the University Health Network. The AHC was established in 1994 to serve the specialised healthcare needs of professional performing and creative artists. Its services include chiropractic care, cranial-sacral therapy, acupuncture, naturopathy, physiotherapy, massage therapy, shiatsu therapy and psychotherapy, alongside biomedical care. A subsidy fund provides assistance in offsetting the costs of fee-for-service treatments, ensuring that all artists can access the care they need, regardless of finances. Education and outreach are also part of the AHC mandate.

In my experience, the benefits of an integrative approach to healthcare are many, both to the client and the practitioner as well as the healthcare system:

• eases burden on the healthcare system — a patient is not going for unnecessary treatments/appointments/tests;
• convenience for the patient — all of their healthcare needs can be addressed in one clinic setting;
• a greater understanding among practitioners regarding roles and perspectives along with scopes of practice;
• greater respect for other practices;
• builds team atmosphere;
• increases practitioner/team satisfaction;
• patient gets the best care possible due to an integrative approach that involves all relevant practices for their healthcare needs;
• patient understands there are options for care and gains an understanding of various natural health practices that can be accessed;
• patient has a voice and can exercise choice in their healthcare and wellness.
As with any complex system, challenges exist. The Artists’ Health Centre has the added challenge that comes with varying schedules. Often practitioners will work on different days or during different hours, meaning the team can have difficulty connecting and communicating. A number of processes have been established to mitigate this challenge. Additionally, collaboration and integration are fostered through a number of processes as well as the core values of the clinic and the hospital itself.

Best practices to facilitate collaborative care:

- promote an atmosphere of respect and openness throughout the team;
- organise regular staff meetings to bring the entire team together;
- mandate overviews of various natural health practices: theory, technique, uses, research;
- hold case reviews by the team to discuss possible treatment approaches;
- establish communication mechanisms that facilitate inter-professional collaboration;
- provide integrative assessments and treatment plans for clients.

The integrative approach recognises that we are all individuals, and as such, we need care that is tailored to suit our individual needs — physical, mental and emotional. Not every person will respond in the same way to a given treatment, a combination of modalities may achieve the best results. As the individual’s healthcare needs change, so should the assessment and treatment plan.

As a clinic moves towards a model of integrative care ‘there is a greater emphasis on the treatment of the whole person in his/her social, environmental and cultural context and a greater recognition of an increased number and variety of determinants of health’ (Boon et al, 2004). This emphasis on the whole person resonates well with shiatsu therapy. The holistic approach that recognises the connectedness of mind and body and the person-centred philosophy that recognises each person as a unique individual are aligned with the theory of shiatsu. As such, it would seem a natural fit for shiatsu to be a part of integrative healthcare.

Many of us do not have the opportunity to work in an integrative clinic, but that does not mean there are no opportunities for fostering collaboration with other healthcare practitioners. If working in a multi-disciplinary clinic there is certainly potential for collaboration. In this instance creating opportunities to discuss cases (with the patient’s permission to do so), sharing information about each other’s modalities, treatment approaches and specialisations, consulting on treatment plans, and coordinating care for those who are seeing more than one practitioner are good steps in this process.

For those working in private practice more effort may be needed to initiate a collaborative approach with other professionals, but once relationships are established it is possible. Providing information about you and your practice is a good introduction to healthcare providers in your area. Meeting with those in your immediate area or those who share similar professional interests can initiate a relationship that can develop into something beneficial for both parties and for your patients. If you are working in a remote area lacking in other health professionals, online networks are a possibility.

An added benefit to collaboration for those in private practice is the opportunity to network with other practitioners. Aside from the benefit of shared knowledge and possible referrals, the value of connecting with other healthcare providers for those who work in what can sometimes be isolating circumstances is significant. Interaction, dialogue and support from other healthcare providers can aid in our professional development and help to prevent burnout. As Kenny (2002) states: ‘Interprofessional collaboration has the potential to be a catalyst for professional development’ (p. 67).

It has been suggested that trailblazing, innovative integrative healthcare includes a multitude of
challenges that require novel ways of thinking, including new practice models that encourage collaboration (Sharf et al, 2012). It may be that the more traditional model of practitioners working in the same clinic will not always be possible. Connecting and collaborating with other practitioners, whether in our own clinics, in our communities or through online communities is invaluable. There is a link between team-working and the well-being and satisfaction of those involved, leading to lower stress levels, and greater effectiveness and innovation (Haward et al, 2003; Proudfoot et al, 2007). However, successful interdisciplinary collaboration necessitates that those involved believe that collaboration results in excellent patient care with notable benefits to patients and practitioners (Yeager, 2005).

The AHC appears to conform to what Hollenberg (2006) refers to as the ideal type of integrative setting in which ‘a non-hierarchical, collaborative relationship between practitioners…forms a trusting, respectful and ‘seamless’ continuum of care illustrated by inter and transdisciplinary practice’ (Hollenberg, 2006). And while we can’t all work in this type of setting, we can build relationships that allow us to collaborate and work with our colleagues, for the betterment of our patients and our own professional gratification.

If we as natural health practitioners wish to be an equal part of our national healthcare systems, we must collaborate and integrate with other natural health practitioners and biomedical health practitioners to achieve the best possible outcomes for our patients. Respect and understanding of each other’s roles, scopes of practice and abilities combined with person-centred collaborative care can raise healthcare to a new level while raising awareness of siatsu and allowing it to take its rightful place in the healthcare system.

Leisa Bellmore has been a licensed shiatsu therapist since 2001, helping clients better manage their health and wellness through treatment and education. She works at the Artists’ Health Centre, an integrative clinic at Toronto Western Hospital. Leisa’s professional interests include stress management, self-care interventions for chronic conditions and CAM research. You can read her article on *Hand self-shiatsu for sleep problems in persons with chronic pain* in Pointers Spring 2014 edition.

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