WHAM
Implementation Manual for Peer Providers

A guide for successfully implementing the Whole Health Action Management (WHAM) program

SAMHSA-HRSA Center for Integrated Health Solutions

2016
Introduction

Whole Health Action Management (WHAM) is a peer-led program to activate self-management to reach a person-centered whole health goal. The SAMHSA-HRSA Center for Integrated Health Solutions (CIHS) developed the WHAM program to encourage increased resiliency, wellness, and self-management of health and behavioral health among people with mental illnesses, substance use disorders, and chronic physical health conditions.

This manual is a guide to help peer providers implement the WHAM program after completing the two-day training. It is highly recommended that two peer providers implement the program as co-facilitators.

Implementation of the program involves four steps:

1. Securing buy-in and support
2. Recruiting peers
3. Providing the WHAM training
4. Facilitating the WHAM support group

Please refer to the implementation chart on the next page for a sample timeline.

What 3-4 major challenges do you expect will be involved in implementing the WHAM program at your agency?
Most peer providers participate in the two-day WHAM training with the permission and support from their agency of employment; however, the agency does not always understand what training requires from the participants. It is important for peer providers to meet with administration, management, and supervisors to explain the WHAM program and the implementation process. The agency needs to understand the time commitment that will be required from the peer providers and the peers that decide to participate.

How much time commitment will it take to implement the WHAM program? The specific time commitment to implement the WHAM program may vary depending on how the program is supported at the agency. The sample timeline below outlines a commitment that spans approximately 13 weeks. Recruitment (Activity 2) and the WHAM training (Activity 3) should take approximately 10-12 hours to facilitate (not including preparation time), implementation of the 8-week WHAM support group and one-to-one peer support meeting (Activity 4) should take 6-8 hours a week, depending on group size and structure.

<table>
<thead>
<tr>
<th>Activity</th>
<th>Timeframe</th>
<th>Content</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Attend WHAM</td>
<td>2 days</td>
<td>Introduction, PCP &amp; the 10 Factors; Five Keys to Success</td>
</tr>
<tr>
<td>Facilitator Training</td>
<td>1-2 weeks</td>
<td>Explanation and promotion of the WHAM content, process and commitment required.</td>
</tr>
<tr>
<td>(2) Recruit participants</td>
<td>No more than 3 weeks</td>
<td>One or two sessions to cover—Introduction and Factors 1-4</td>
</tr>
<tr>
<td></td>
<td>8 weeks</td>
<td>Report accomplishments of action plans from previous week. Declare weekly action plans for next week.</td>
</tr>
<tr>
<td>(3) Provide the WHAM</td>
<td></td>
<td>One or two sessions to cover—Factors 5-10</td>
</tr>
<tr>
<td>Training</td>
<td></td>
<td>One or two sessions to cover—Five Keys to Success</td>
</tr>
<tr>
<td>(4) Facilitate the</td>
<td></td>
<td>Members</td>
</tr>
<tr>
<td>WHAM Support Group</td>
<td></td>
<td>Peer Specialists who can set up and facilitate the WHAM group in their agency.</td>
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</tbody>
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**Group Sessions**

Go over the materials with the group. It takes approximately 6 hours for a group to get through the materials. It is recommended that you take no more than 3 weeks to do this. *(You could do one two-hour session or two one-hour sessions each week.)*

**Individual Meetings**

Make sure the individual understands the material from the previous group meeting and has completed all of the worksheets. *(These meetings average about 30 minutes each.)*

**Group Sessions**

Each person reports on how they did on this week’s action plan and shares next week’s action plan. *(The support group usually lasts 60 – 90 minutes.)*

**Individual Meetings**

Discuss with the individual how their weekly action plan is going and reflect on the last week’s group. *(The individual meetings usually last 15-30 minutes.)*
Additionally, the agency and the peer providers need to partner together to consider resources that can support providing the WHAM-attained skills to individuals in need of whole health self-management. The major need will be funding to cover the hours spent by the peer provider on WHAM implementation. Other costs may include administrative time, materials, meeting room costs, and overhead. There may be established funding sources for the WHAM program (Medicaid, state funding, etc.) or it may be necessary to create new funding opportunities (e.g., working with a public health agency to establish a weekly support session, engaging a local hospital to provide WHAM through its community wellness program).

No matter which potential funding source is explored, the agency and the peer providers must be clear and organized about presenting the content of the WHAM program, the proposed model for delivering the supports (the who, what, where, and when), and the expected outcomes so that potential funders feel confident in financially supporting this work.

In Georgia, Peer Support Whole Health and Wellness is a Medicaid-billable service that agencies apply to the state for approval to provide. This program is delivered by a WHAM-trained peer provider who has access to a nurse. The State Roadmap to Peer Support Whole Health and Resiliency is a guide for supervisors that other states and agencies may find helpful in implementing the program. It is available at: http://nasmhp.org/docs/publications/Roadmap_v6.pdf.

☐ Do you currently have your agency’s support to implement the WHAM program? ______Yes ______No

☐ If yes, who is your contact and support person in your agency?

☐ If no, answer the following questions.

☐ Can you get the agency to support you in implementing the program? ______Yes ______No ______Not sure

☐ If yes, what do you need to do to get that support?

☐ If no, why not?

☐ If not sure, what are you going to need to do to find out? How and when will you do this?
STEP 2  Recruiting Peers

Once agency support is secured, the next step is recruitment. The group needs to be relatively small. Eight to twelve peer participants is ideal. If two to three people dropout, there will still be enough people in the group to continue. It is better to have a small number of committed people than a large number of uncommitted people. The WHAM support group and one-to-one peer support is person-centered, and that means people need to have time to share and support one another. Sample recruitment flyers are available from the WHAM materials link shared after completion of the two-day facilitator training.

Prospective participants need to be ready and willing to work on some aspect of their overall health. This is not a program for people who are not taking actions for a particular health issue and are “assigned” by a clinician or other person in authority. This program is for people who are aware of certain health concerns and who would like peer support in dealing with and effectively managing them.

Recruitment can be done in a variety of ways. Most often peer providers set up an informational meeting to explain how the program works. Here are some ways to find attendees for these informational meetings.

1. Peer providers can hand out flyers and put up posters announcing the meeting

2. Peer providers and other staff can invite individuals they serve to the meeting

3. Peer providers can visit other programs providing services to peers and invite them to the meeting

Peer providers can also explain the WHAM program directly to individuals they serve.

However people are recruited, they need to understand the commitment they are making — that commitment involves three factors:

1. to work on a whole health goal;

2. to engage in peer support to accomplish the goal; and

3. to participate in a WHAM peer support group that meets weekly for at least eight weeks.

Once the recruitment process starts, it is best if it can be completed within two weeks. A longer recruitment process may result in participants’ losing interest, and delays their goal-setting.
What is your recruitment plan?

- Who will be the participants? (Not necessary to know the names, but from where in the agency will you recruit them?)

- How many will you aim to recruit?

- Who will help you?

- When will you start recruiting?

- How long will it take you to recruit them?
Before starting the 8-week WHAM support groups, participants must understand the process of person-centered planning to create the whole health goal they want to achieve. The WHAM training teaches participants how to do weekly action plans, create a daily/weekly personal log, and the importance of the one-to-one peer support and weekly WHAM support group.

The WHAM training is ideally presented to a group in three sections. The material in each section should take two hours or less to present. There is a one-to-one meeting with each individual between each section to make sure they understand the material covered, completed the necessary pages in the workbook, and to remind them of the date and time of the next training session.

The sections are presented as follows:

- **Section I** = Participant Guide Sessions 1 - 3, pages 1 – 20
- **Section II** = Participant Guide Sessions 4 - 6, pages 21 – 34
- **Section III** = Participant Guide Sessions 8 - 10, pages 43 – 59

Note: Session 7 of the WHAM participant guide, *Health Risk, Screening, and Shared Decision-Making*, contains important information, however, this material can be taught anytime, and is not structured into the implementation process as described in this manual.

The following pages outline how each section is presented. Review this outline along with the participant guide and handouts before facilitating each section. At the end of this process, everyone should have set his or her goal and be ready to start the 8-week WHAM support group.

**What is your plan for teaching the material to the participants?**

- Will you teach the material in a group setting, to individuals, or a combination of both?
- Will someone be helping you teach the material? If so, who?
- Where will you meet?
- How many sessions will it take to teach the material?
- When will you start?
Facilitating the WHAM Training

Print the participant guide, the handouts, and the daily weekly log before the training. Each group member will need his or her own set of materials.

SECTION I: PARTICIPANT GUIDE SESSIONS 1-3

Session 1: Welcome and Introduction

Introduce yourself and the co-facilitator. Allow the participants to introduce themselves — who they are and something they are doing or may want to do for their whole health. You and your co-facilitator should also mention what you are doing for your whole health.

Review the materials provided to the group - the participant guide and handouts. Present the Comfort Contract (located in the handouts) to the group and ask for any additions and final approval.

Begin with the participant guide. Regularly ask the group to help with reading. This helps the group retain information by both reading and hearing the information. People are always welcomed to pass and not participate in the reading.

Give the group an overview of page 2.

Have someone read the first three paragraphs on page 3.

Ask the group- what are some things they currently do to self-manage their whole health?

Have someone read the material at the bottom of page 3.

Ask the group- why they chose the entrance they chose? (It is almost always B.)

Review pages 4 & 5.

Have someone from the group read the 10 Factors on page 6. State the definition of a factor is, “something that actively contributes to the production of a result.” Mention that these are ten things that actively promote health and resiliency.

Ask the group if any of the 10 Factors surprised them. Which of these factors would you least expect your general practitioner or doctor to be concerned about?

Explain how the group will be covering the 5 Keys to Success — which ones you will be covering and when.

Have someone read the Self-Management Skills that will be taught in the training.

Page 7 & 8 are simply an overview of the sessions. Spend a few minutes discussing their answers to the question on page 9.
**Session 2: The Science of Stress**

This session begins the person-centered planning process. It involves the most reading and introduces the first of the skills you will be teaching. After having someone read page 10, spend a few minutes discussing the question at the bottom of the page. (Each session has a similar question for the group to discuss.)

Continue reading through page 13. At this point you want to do the first demonstration of the Relaxation Response. If you have Biodots, then distribute them at this time. Biodots can be ordered from Biodot of Indiana, Inc.; P. O. Box 1207; Bedford, IN 47421: (800) 272-2340; www.biodots.net.

Examples of repetitions you can use for the Relaxation Response:

- Focus on breathing
- Repeat to yourself “In – Out”; “Deep – Slow”; “Present – Moment”
- Count down from 10 - 1
- 7-4-7 breathing - Breathe in to a count of 7; hold for a count of 4; breathe out to a count of 7.

Ask group members if they have any processes they would like to share.

Page 14 is the first person-centered planning worksheet. Remember, these worksheets are designed to bring awareness to present patterns, strengths, and possibilities – not ‘bad’ habits. The worksheets can be completed in a group, in pairs, or can be privately filled in by the individual and then shared and discussed. Explain the note at the bottom of page 14 and how the group will be flipping back to pages 46 and 47 throughout the training. Small sticky notes or flags can be helpful in making the pages easier to find.

**Session 3: Improve Your Health**

Page 16 can be read silently or out loud by someone in the group. Take a moment to explain the differences between diet and healthy eating and exercise and physical activity. Spend a moment on the question at the bottom of the page. The questions on page 17 can be answered and discussed by the group. Make sure they answer the questions on page 46.

At this point, have the group look at the Eating Pattern Assessment handout. Give the group five minutes to look it over, and then share the interpretation results with them. Then look at the The YOU Diet Crib Sheet handout. Go through the questions about physical activity. Hand out the pedometers and explain how to use them. Finish this section by having the group complete the worksheet for Restful Sleep. Don’t forget the questions on page 46.

Thank everyone for his or her participation. Be sure you have contact information for group members for a contact prior to the next meeting.
SECTION II: PARTICIPANT GUIDE SESSIONS 4-6

Welcome everyone and begin the group with a Relaxation Response. The Relaxation Response can be led by the facilitator or by a group member. Highlight the two things that elicit the Relaxation Response (repetition and return).

This section covers factors 5-10 (Sessions 4-6 in the participant guide), pages 21-34.

It continues the person-centered planning process, using the readings and worksheets. Except for Cognitive Skills to Avoid Negative Thinking, all of the worksheets follow the same basic format – a few reflective questions, a brainstorm question, and questions on pages 46-47.

**Session 4: The Power of Human Connections**

Have the group read the content on page 22.

Ask the group the question at the bottom of page 22 and discuss.

In a group or individually, have participants answer the questions on Service to Others on page 23. Be sure they also complete the related questions (5a and 5b) on page 46.

Review the questions on Support Network on page 24 and have participants complete this worksheet for themselves, also filling out responses to questions 6a and 6b on page 47.

**Session 5: Maintaining a Positive Attitude**

Read through the material on page 26, and then discuss the question at the bottom of the page as a group.

Have the group fill out responses to the questions on page 27, and remind them to also fill in questions 7A and 7B on page 47.

The Cognitive Skills session can take slightly longer because you will be teaching the “Catch it, Check it, Change it” self-management skill. To introduce the cognitive skills section, read through Carol’s story on page 28 and then lead the reflection on her story to discuss paragraph by paragraph when self-talk shifts from fact to story.

Introduce the “Catch it, Check it, Change it” concept, and go through each discussion question on page 29 to continue reflecting on Carol’s story and how she could have put this concept into action.

Brainstorm some helpful actions to catching, checking, and changing negative self-talk and have participants fill in some strategies and ideas from this discussion on page 29-30 (and also questions 8a and 8b on page 47).
Session 6: Connecting with More than Self

Review the material on page 32 and reflect on the discussion question at the bottom of the page.

Ask participants to complete the questions on spiritual beliefs on page 33, and then the questions on page 34 on a sense of meaning and purpose. Participants can brainstorm strategies as a whole group or in pairs.

After everyone has completed pages 21-34, thank them for their participation. Remind everyone to complete pages 46-47, if they have not done so, so they can be used at the next meeting. Be sure you have contact information for group members for the mid-week one-to-one peer support contact.

In the mid-week contact, make sure each individual understands the materials covered in Section II and has completed the workbook pages for factors 5-10. It is especially important that each person completes the work on pages 46 and 47.

SECTION III: PARTICIPANT GUIDE SESSIONS 8-10

Welcome everyone and begin the group with a Relaxation Response. The Relaxation Response can be led by the facilitator or by a group member. Highlight the two things that elicit the Relaxation Response (repetition and return).

This section covers sessions 8-10, pages 43-59.

Session 8: Key to Success 1

Have the group check off their whole health strengths on pages 44-45. Have a few people share some of their strengths.

Have the group members look over what they wrote on pages 46-47. Ask if they notice any common themes in their answers to the “B” questions regarding benefits.

Explain to the group that on page 48 they will be taking the first shot at setting a whole health goal. Have them write their goal statement using the format:

In order to, (Why) (Reviewing the benefits on pages 46-47 may be helpful in writing this.)

My whole health and resiliency goal is, (What) (They have 8 weeks to accomplish this.)

By (When) (We recommend 8 weeks because that will be the length of the support group.)

After everyone has had the opportunity to write his or her goal statement, have everyone read the statement out loud using the formula. It may take some prompting to get people to state their goal using the formula. You may need to lead them by saying “in order to...” have them fill in the blank, “my whole health and resiliency goal is...” have them fill in the blank.

After everyone has shared his or her goal statement, ask the following questions:

- Did anyone hear statements that were vague or unclear? You are not sure what accomplishing the goal would look like.
- Did you hear any statements that contained multiple goals?
Were any of the statements stated in a negative way — something the person wanted to avoid, eliminate, or change?

Were there any statements that were unclear what the person might do over an 8-week period to accomplish the goal?

Remind the group that writing a good goal statement can be difficult. It is not unusual for initial statements to be vague, contain multiple goals, be negatively stated, or not indicate what needs to be done over a period of time to accomplish the goal. This training includes a tool to help you write a goal statement that is specific, simply stated and motivating. This tool is called the “IMPACT criteria.”

Have someone read *IMPACT Criteria Questions about Goals* at the top of page 49.

Explain the IMPACT criteria on page 49 and why it is important to be able to answer “yes” to each. (Reflect on italics after each statement to explain.)

1. **I Improve** – Does accomplishing the goal improve the quality of my health and resiliently?  
   *(This criterion is usually easy to meet because we have been talking about improving one's health.)*

2. **M Measurable** – Is it objectively measurable in terms of knowing if I have accomplished it? *(For something to be objectively measurable, it usually has to state an amount - how much, how often, or how many one wants.)*

3. **P Positively Stated** – Is it positively stated as something new I want in my life? *(It is more motivating to work toward getting something you want than focusing on something that you want to get rid of, avoid or change.)*

4. **A Achievable** – Is it achievable for me in my present situation and with my current abilities? *(If you do not think your goal is achievable within the given time frame, you can usually remedy that by lowering the amount or changing the time frame.)*

5. **C Calls Forth Actions** – Does it call forth actions that I can do on a regular basis to create healthy habits or a healthier lifestyle? *(The goal needs to be something you work to achieve over a period of time; there are actions you can take to achieve your goal.)*

6. **T Time Limited** – Is it time limited in terms of when I plan to accomplish it? *(The goal needs to be stated so that you know by when you plan to accomplish it.)*

To further illustrate this process, ask if anyone from the group would be willing to see if their goal, as they have written it so far, can meet the IMPACT Criteria.

Begin by writing the person’s goal on a flip chart — In order to... My goal is... By... Ask the person the IMPACT questions. Go through all of the questions. It is likely that the person will be unable to say yes to all six. If he or she can, congratulate him or her and continue to get volunteers until you get one that does not meet all of the criteria.

Have the group turn to page 50. Have someone read the first paragraph under Guidelines for helping you write your goal to meet the IMPACT criteria.
Share and explain the formula **Motivation = Ownership + Benefits**

Ask, **How do you get the goal statement related to the benefits?**

Have someone read the second paragraph on page 49.

Write the following four questions on a flip chart.

- Why do you want this?
- What will be the benefits?
- How will your life be different if you accomplish this?
- If you achieve this goal, what will you be able to do that you can’t or don’t do now?

Highlight how you used the additional questions involved. Have the co-facilitator or a group member read through the role-play on page 51-52.

Ask the person whose goal statement is written on the flip chart if you could help him or her restate the goal by reflecting on the four questions.

Continue to ask the person questions as to how her life will be different, why she wants this, etc. until you hear her state something new she wants to create in her life. You may need to repeat the questions in various forms before she states what she wants to create. Be patient with this process and remember goal setting can sometimes be frustrating and difficult.

Remember – “Motivation = Ownership + Benefits.” Motivation cannot be achieved without both individual ownership and individual benefits. You are listening for what the person wants to able to do and why he or she wants to add that to his or her life.

When you hear her state that “thing,” ask if you can help her restate her goal. Often the person doesn’t hear what she said would be a goal. Rewrite the goal on the flip chart and try the IMPACT questions again. Once the person can say “yes” to those questions, you will notice her excitement level change. Thank the person for her willingness to help the group understand the process.

Give the group 10-15 minutes to rewrite their goal statements to align them with the IMPACT criteria.

Break the group into pairs and let them share their new goal statements with each other. One person will read his or her goal statement and the other will then ask the six IMPACT questions. If there is a “no” to any statement, use the four questions to help the person rewrite it so that the answer is “yes.”

As peer specialist trainers, you need to be available to help anyone who is having difficulty. Once everyone feels comfortable with his or her goal statement, move to the next section.
**Session 9: Keys to Success 2&3**

Have someone read the top of page 54 and ask the group to list some of the actions they could take to move toward their goal. Explain the weekly action plan process at the bottom of the page.

Have someone read the examples on page 55.

Have someone read the paragraph at the top of page 56. Give a couple of examples to explain the confidence scale.

Have everyone create a weekly action plan for week one using the form on page 56.

Have someone read the paragraph at the bottom of page 56. Explain how the group will be using the daily/weekly personal log. Hand out and go over the small WHAM *My Goals and Weekly Action Plans* logbook.

Go around the room, one person at a time, and have the group members share what they would like to do as their first week’s action plan. Remember that as the facilitator, you will also have a weekly action plan. Once they have an action plan that fits the formula and has a confidence level of 7 or more, move to the next person.

Once everyone has created an action plan, remind them to write it in their personal log.

**Session 10: Keys to Success 4&5**

On pages 58-59 explain how the one-to-one peer support and weekly WHAM support group meetings will be used for the next 8 weeks.

Thank everyone for his or her participation. Remind them that next week’s meeting will begin the 8-week WHAM support group. Everyone needs to have a weekly action plan ready to share at that time.
The weekly WHAM support group is foundational to the success of the WHAM process.

By the first meeting, all participants should have gone through the entire participant guide, completed all questions on pages 46-47, and written a whole health goal and weekly action plan. All group participants should be working on a health goal and have agreed to use the 5 Keys to Success.

The group can be facilitated by any one of its members. If it is facilitated by a peer leader, then they must meet the criteria for group participation.

During the first group meeting a “comfort contract” that group members agree on should be created to serve as the group’s rules of conduct (Please note: a sample comfort contract is provided as a training handout).

The meeting follows this format:

a. The leader welcomes everyone, opens with a short Relaxation Response exercise, and leads the discussion for that week.

b. The leader shares his or her weekly action plan and the associated activities from the past week using the personal log as a reference.
   - If the action plan was accomplished, the group celebrates the accomplishment(s) and moves to the next person.
   - If the action plan was not accomplished, a group member asks what the barriers were and what could be done next week to help succeed, and if the person wants suggestions from group members who have struggled with the same situation.
   - After brainstorming suggestions, recommend that the person choose what may be helpful to be used next week.

c. Move to the next person and repeat step b until everyone has had a chance to share.

d. Shift focus to the next week. Starting again with the leader, each person shares his or her action plan for the next week.
   - Using the confidence scale, each person states his or her confidence in relation to accomplishing the actions. If a person’s confidence scale ranking is seven or above, move to the next person. If it is less than seven, the group works with the person to get the confidence scale ranking to a score of seven or higher.
   - Decide who will be the support peer for that person for the next week.

e. After everyone has had a chance to participate, check to see if someone would like to share anything else in closing. Remember that this is a whole health support group and that should be the focus. Other issues and concerns can be dealt with after the group meeting is over.
One-to-One Peer Support

Supporting peers outside of the support group is important. Ideally, this is contact that occurs between the weekly support group meetings. There are two ways this can be done. The first involves the peer who is leading the support group to contact each participant between meetings. The second involves each peer selecting one peer to be the support person for the week to contact each participant before the next meeting. The first way is recommended for the first few weeks of the WHAM support meetings.

However the peer support is structured, the support person makes arrangements to contact peers 2-4 days after the support group meets. This can be in person or by phone. The peer supporter asks how the other person is doing in relation to the action plan and log. If the other person is doing OK, the peer supporter expresses appreciation and encouragement to attend the next support group meeting. If the other person is not doing well, the peer supporter asks how to help.

Remember: This is a whole health support group and that should be the focus. Other issues and concerns can be dealt with after the group is over.