The popular demand for Complementary and Alternative Medicine (CAM) therapies was demonstrated by the 1997 National Household Survey which showed the total visits to CAM providers (629 million) exceeded the total number of visits to all primary care physicians (386 million) in the United States in 1997. The Baldwin Archives Internal Medicine 1997 showed that 50% of veterans use some form of CAM. The 2002 Veteran Affairs (VA) CAM report showed that 84% of facilities provide some form of CAM.

U.S. Congress established the Office of Alternative Medicine (OAM) in the Office of the Director of the National Institutes of Health (NIH) in 1992. OAM is presently known as the National Center for Complementary and Alternative Medicine. On March 8, 2000 President Clinton established a White House Commission on Complementary and Alternative Medicine Policy. The commission was to address the education and training of health care practitioners in CAM, coordinate research to increase knowledge about CAM practices and products, provide reliable and useful information about CAM to both health care professionals and the general public, and provide guidance for appropriate access to and delivery of CAM.

On March 13, 2003 the CAM Workgroup Charter was established and tasked to:
- Analyze the VHA 2002 Complementary and Alternative Medicine Report
- Review the March 2002 White House Commission on CAM Policy

- Make recommendations on appropriateness of CAM practices and processes in VHA
- Suggest strategies for providing ongoing national guidance related to CAM for VHA facilities and providers.

The CAM Workgroup had a number of recommendations, one of which was that VHA should establish a CAM advisory group for CAM integration within Veterans HealthCare Administration (VHA). In July of this year, the Veterans Integrated Services Network (VISN) 22 and the VA Employee Education System (EES) offered a one-day conference in Long Beach, California, “Bringing Integrative Medicine to a Veteran Population, Creating a New Paradigm for Healing.” At the conference, Stephen Ezeji-Okoye, MD, Chairperson of VA CAM Advisory Board presented updates within the VA on CAM. I was fortunate enough to be able to present Healing Touch updates within the VA during a panel presentation, as well as, represent Healing Touch with a poster presentation.

My intent was two-fold: to increase the awareness of the CAM Advisory Board on utilizing Healing Touch (HT) as the comple-
mentary energy based modality throughout VHA for national implementation, and to provide HT education and training to VA employees through EES. One recommendation from the CAM Workgroup was to establish a uniform methodology within VA for adoption of CAM modalities, with training, licensure and credentialing of practitioners. Healing Touch already is a standardized credentialed program which utilizes a professional nursing continuing education framework, and principles of nursing practice that is established and well recognized for its professionalism.

My vision is that, as their education and competency in Healing Touch increases, the nursing staff and other healthcare professionals will embrace HT as the energy therapy modality for VHA. This would return nursing to the essence of caring, compassion and self care, as well as, provide veterans access to this modality...for Energy Medicine is an intricate part of the patient’s expectation for healthcare.

Employees of the VA who are pursuing the integration of Healing Touch have done a tremendous amount of work! I would like to share with you some of the outstanding work by VA Healing Touch Certified Practitioners/Instructors, Practitioner Apprentices, and Students:

At the VA Black Hills HealthCare Center in Hot Springs, SD, Julie Jones, MS, RN, CHTP/I established a Healing Touch clinic for patients with chronic pain, substance abuse, and PTSD. She provided 1 hour HT sessions on Monday, Wednesday and Friday afternoons and all day on Tuesday and Thursday.

With the permission of Sr. Rita Jean Dubrey, CSJ, RN, MSN, CHTP/I, Julie utilized her QA model for data collection, measuring the pain, stress, emotional and spiritual health before and after treatments. She presented her QA results at the VA National Pain Management/End of Life Conference over three different years. One of those years, Julie, Terry Sparks and Mari Kelley presented two break-out sessions to the National Leadership Conference: Pain Management and End of Life on Healing Touch: Biofield, Research and Experiential.

Julie has transferred to the Sioux Falls VAMC and has carried on the work of energy therapy. She has provided educational lunch sessions for employees and she was asked to present to the VISN Pain Committee through PM&RS (Physical Medicine and Rehabilitation Service) on Healing Touch in August of this year.

At the Amarillo VA Health Care System, Terry Ann Sparks J.D., M. Div., CHTP/I had a Healing Touch managed Complementary Medicine Pain Clinic for five years. It was 30 hours a week. She received consults from several areas of the hospital, mainly pain patients, but also oncology, substance abuse, and Women's clinic. They received a Best Practices Award from the National Center for Excellence VA Chaplaincy in 2005.

Terry later transferred to Oklahoma City VAMC. She reported that one of the Ambulatory Care physicians at Oklahoma City is awaiting approval of a proposal she has submitted for an integrated Western pain clinic, which would include Healing Touch as a complementary medicine modality.

At Hampton VAMC, in Virginia, Mari Kelley, RN, CNN, CHTP/I was part of the Interdisciplinary Team in the Palliative Care Program as the Healing Touch practitioner, where she provided comfort care to end of life veterans as a collateral duty. Consults from providers for Healing Touch were also received from ICU, OR, Spinal Cord Injury and Nursing Home for veterans.
Mari was also consulted from the Orthopedic service for Healing Touch during an OR procedure at Portsmouth Naval Hospital in Virginia. She has provided Level 1 and Level 2 classes at Hampton, VAMC.

Mari has also presented a number of VA and Nursing National Presentations on HT.

The following reflect some of the presentations:

- VA National Geriatrics and Extended Care (GEC) & GRECC Leadership Conference: Meeting the Challenge Ahead poster presentation on Introduction of Healing Touch into a Hospice Unit.
- AMSUS 107th Annual Conference Federal Nursing Poster Presentation on The Healing Touch Program.
- Department of Veterans Affairs Medical Center, Hampton VA, Pain Management Fair Day Platform Presentation on Strategies for Innovative Energy-Based Nursing Practice: The Healing Touch Program.

Mari Kelley transferred to the Greater Los Angeles VAMC in California where she has provided educational offerings at the VA. She has taught Level 1 to VA staff at the Red Cross Center. A poster presentation and HT material were available to staff during National Nurses Week. Mari is working on a research proposal to submit to the IRB (Institutional Review Board) on HT with Traumatic Brain Injury Patients. Mari is also working with the EES to sponsor Level 1 and Level 2 classes in VISN 22.

Lynne O’Donnell, RN, MSN, ANP-BC, a student of Healing Touch at Jesse Brown VAMC, in Chicago, Illinois taught Introduction to HT classes to over 70 staff employees and volunteers, which were transmitted live through VISN 12. In January a Level 1 class was taught to over 20 VA employees. Information and mini HT sessions were provided during Nurses Week and a Women’s Health Fair with over 30 staff employees. Mini presentations were also provided on a unit basis i.e. Specialty Clinics and Women’s Health Clinic staff.

HT practice rooms, which are available Friday afternoons, have been set up in the Women’s Health Clinic. Executive Leadership has received HT and is supportive of the process. Lynne has added a request for 1 or 2 HT FTE’s (Full Time Equivalents) to the new proposal for the Chronic Pain Clinic. Three of the students will be continuing to Level 4 in September.

At Atlanta VAMC in Georgia, Rosie Shultz RN, CHTP set up educational groups for the pain resource committee and student nurses who rotate through the Outpatient Substance Abuse Clinics. She is waiting for approval to start using Healing Touch with patient pain groups as HT will be a part of the revised Pain Program plan of care. She coordinated several Level 1 and 2
classes for VA staff at the Atlanta VA. Of these students, one RN completed certification, two completed Level 4 and are HT Practitioner Apprentices, and one is a Level 3 student.

Kris Wang, MSN, APRN-BC, CHTP at the Prescott VAMC co-taught Introduction to Healing Touch classes with a CHTP from the community. HT was provided to the patients in the Dementia Special Care Unit and inpatient Hospice Unit. She also had a HT booth at the VA wellness fair, where she showed the new Introduction to Healing Touch video and conducted demonstrations of HT.

As the awareness grows among VA VISNs, provider consults, as well as, patient and staff requests for Healing Touch modalities and education will increase. With an implementation process for Healing Touch within VHA, the more likely it will be for the CAM Advisory Board to take notice of the credentialed program in energy therapy that is accelerating though the VA's to the VISN's and veterans will have access to this service. We here in VHA hold the light during this transformational process in the Department of Veteran Affairs.

Mari's Bio:
Mari has 32 years experience in traditional nursing, outpatient and administrative roles. She is at the Department of Veterans Affairs West LA. She has been an Energy Based Practitioner since 1995. Mari’s private practice offers Healing Touch, Tuning Forks, Continuing Education, Presentations and Hospital consultations. She is a charter member of Healing Touch International, and holds membership in the American Holistic Nurses’ Association (AHNA), the American Nephrology Nurses’ Association (ANNA), and the Association of Military Surgeons of the United States (AMSUS). She has presented the Healing Touch Program at a number of National Conferences and has published. She continues to combine conventional and complementary therapies.