

## Coaching Sessions

### First Coaching Session

**Objective:** The goal of the first meeting is to (1) review the client's health information; (2) set short-term and long-term health goals; and (3) set milestones to indicate ongoing progress towards the goals that have been set. The meeting should be structured within a framework of the Transtheoretical Model. This model, often used in health promotion, offers a structure for understanding what helps and hinders individual health promotion efforts.

**Materials:** Employee's health risk appraisal (HRA) results, if willing to share.

**Process:**

#### Preparation

1. Review available information for the client visit.
  - a. If the client has made his or her health history available, this should be reviewed prior to the visit.
  - b. Clients who have not completed a dietary, exercise, stress assessment, or health history should be encouraged to do so at the time they set their first appointment.

### First Coaching Session

1. Participants should be greeted as in any formal clinical setting. In general, address clients as Ms., Dr., or Mr. Similarly, coaches should provide a formal introduction of themselves.
2. Veterans Health Administration (VHA) is a small and closed environment. After the introduction, participants should be assured that all information they provide is confidential and will be treated the same as their medical records.
3. Explain that the Employee Health Promotion Program is designed to help employees address important health problems and causes of stress. The program is designed to help clients address health issues related to healthy eating, exercise, tobacco cessation, and stress reduction and management.
4. Ask the client if he or she has any general questions about the program.
5. Next, begin the first session by explaining that about 30 minutes are available for the visit and ask the client if he or she has specific health issues he or she would like to address? If yes, the client should spend a few minutes talking about his or her goals.

6. If the client has not set goals or thought about specific goals, encourage him or her to talk for a minute or two about each of the topic areas that will be addressed. For example, has he or she been struggling with tobacco cessation, with losing weight, wanting to exercise more, stress management?
7. Encourage them to be open about their hopes about what might happen during the sessions.
8. Retain a copy of their HRA results.

### **Summary**

1. Briefly summarize the goals with the client.
2. Ask the client to reflect on the summary:
  - a. Is it accurate?
  - b. What would they like to change?
3. Ask them to imagine a reasonable timeline in which to reach these goals.
  - a. Is the timeline realistic?

### **Clarify any participant concerns about reaching their goals**

1. Are there barriers in their environment?
2. Are there personal issue(s) that make it difficult to achieve their goals?
3. What are the pros and cons of changing?
4. Ask the participant to write down two to three ways to overcome the barrier(s) they have identified.

### **Concluding the first session**

1. Provide appropriate materials (e.g., exercise guidelines, dietary guidelines, pedometer, nicotine replacement therapy).
2. Ask if there are any last issues they wish to discuss before the session ends.

### **B. Schedule second coaching session (1 month later)**

1. Walk the client to the door as he or she leaves. The coach should always let the client exit the room first. This leaves clients feeling less hurried.

**Second and Third Coaching Sessions (schedule third session one month after second session):**

1. Briefly review the goals that were set at the first visit.
  - a. Are these still the goals the participant wishes to maintain?
  - b. Are there new goals?
2. Briefly review the participant timelines for these goals.
  - a. Is the timeline still realistic?
  - b. Do they think they need to modify their timeline?
3. Explain the concepts of motivational interviewing (MI): building motivation and commitment to change.
  - a. Express understanding of the participant's perspective.
  - b. Explore the discrepancy between the participant's current behavior and what they want their lives to be like.
  - c. Accept that resistance to change is natural.
  - d. Support the participant's self-efficacy and self-responsibility for change.
  - e. Help set goals and strengthen the commitment to change.
4. Evaluate barriers and motivations for change
  - a. Review each goal and help the participant understand their own mind set.
  - b. Ask the participants open-ended questions, for example:
    - What type of support do you have at home for improving how your family eats?
    - How can your family help with improvements to the family diet?
    - Are there ways to involve your spouse or partner in your exercise program?
  - c. Active listening – the most important aspect of coaching might be how well the coach listens.
  - d. Help the participant summarize their feelings and consolidate their goals.

5. Understand the participant's learning needs. Are knowledge gaps creating a barrier to the participant?
  - a. Examples might include:
    - Does the participant understand how to manage their diabetic diet?
    - Does the participant recognize different portion sizes?
    - Is the participant familiar with different forms of exercise?
  
6. Provide information or appropriate referrals to the participant.
  - a. Examples might include:
    - Referral to a dietician to review nutritional parameters for diabetes.
    - Referral for a stress test if the participant has cardiac disease and is concerned about complications.
    - Written information on portion sizes.

**Sample activities for sessions 2 and 3:**

<b>Activity</b>	<b>Description</b>
<b>Nutrition</b>	
Caloric and exercise needs	Help the participant understand their daily calorie needs. How do these needs vary with an exercise program?
Portion control	Demonstrate different portion sizes using models. Explain how calorie content varies between fats and carbohydrates.
Identification of healthy eating behaviors	Ask participant to track what they eat for several days. Ask them to bring their food log to their next visit.
Reading labels	Demonstrate how to read different food labels. Where is the fat content, sugar content? How do they decide if the food is high in fat content?

<b>Activity</b>	<b>Description</b>
Recipe modification	Ask the participant to bring in a favorite recipe. Ask them to analyze the contents of the recipe and review its positive and negative aspects. Can the negative aspects be changed or can they find a substitute recipe?
Low fat alternatives	Are there alternatives to high fat foods? Can natural oils be used instead of butter? Can a low fat snack be substituted?

Activity	Description
Physical Activity	
Demonstration of physical activities	Demonstrate basic stretching and strengthening exercises.
Comfortable exercise wear	Does the participant have reasonable clothing in which to exercise? It need not be expensive but they should have reasonable shoes for walking or loose clothing for yoga.
Pedometer	Does the participant use their pedometer and log their steps?
Smoking Cessation	
Nicotine replacement medication	Has the participant obtained nicotine replacement medications? Are there barriers to obtaining nicotine replacement therapy?
Nicotine replacement medication education	Many individuals do not understand how to use or have problems with nicotine replacement. Review their chosen therapy and see if they use it appropriately.
Stress Management	
Stress assessment tool	<p>If a tool is available, has the participant completed it?</p> <p>If available, has the participant utilized the meditation room, group yoga sessions, and/or mindfulness-based stress reduction classes?</p>

#### Fourth Coaching Session (at 6 months)

**Objective:** Use motivational interviewing to help the participant re-evaluate their long-term and short-term goals.

**Materials:** Participant survey, participant goals.

**Process:**

## Preparation

1. Review the client's health history and goals.
2. Ask the client to complete an interim survey in order to help assess their progress and barriers to the completion of their goals.

## Coaching visit

1. Participants should be greeted as in any formal clinical setting. In general, address clients as Ms., Dr., or Mr.
2. Ask the client if they have any general questions or concerns that have arisen since their prior visit.
  - a. Review progress:
    - Discuss action steps the client has taken.
    - Discuss participant's perception of progress.
    - Discuss barriers to progress.
    - Clarify participant issues and concerns.
    - Provide information and support to address concerns:
      - o Discuss what can be done to overcome barriers.
      - o Ask the client to list two or three solutions to each problem.
      - o Ask the client to rank the different solutions.
  - b. Develop a revised action plan:
    - Review short-term and long-term goals.
    - Adjust goals as needed.
    - Discuss problem-solving strategies and how to apply them.
    - Ask the client to revise and re-set time-limited goals as needed.
3. Review and distribute appropriate educational content and materials.
4. Schedule the final coaching visit.

## Fifth (Final) Coaching Session (at 1 year)

**Objectives:**

1. Use motivational interviewing to help the client set long and short-term goals for health maintenance activities.
2. Help the client conclude his or her coaching program by:
  - a. Reviewing progress that has taken place to date.
  - b. Sharing measures of progress such as weight loss, change in diet, or increased daily exercise.
3. Allow the client time to reflect on how he or she feels they have done over the past 6 months.

**Materials:** Participant goals, other survey materials completed by the participant.

**Other:** Remember to ask open-ended questions that do not lead the client. Because this is the last visit it is particularly important to help the client consolidate his or her goals. Time should be left at the end of the visit to allow the client to complete final program and participation evaluation materials.

**Coaching visit**

1. Participants should be greeted as in any formal clinical setting. In general, address clients as Ms., Dr., or Mr.
2. Ask the client if they have any general questions or concerns that have arisen since their prior visit.
3. Review progress since the first visit.
  - a. Start by asking the client to summarize the goals that were set. Offer assistance if needed.
  - b. Discuss the client's overall perception of his or her progress. If necessary, remind the client of questions from the first visit:
    - Are there barriers in their environment?
    - Are there personal issue(s) that make achieving their goals difficult?
    - Do they recall having written down two to three ways to overcome the barrier they had identified?
    - Reflecting on this, how do they feel about what has happened?



4. Ask the client to describe several positive events that took place as a result of participation in the program.
5. Ask the client to describe barriers that arose over the last few months.
  - a. Do they think these barriers will be an impediment in the future?
  - b. If yes, ask them to describe several steps to overcome potential barriers.

### **Help the client define the next step in program maintenance**

After reviewing progress and impediments to progress, it is important to allow the client time to set a strategy for his or her long-term health maintenance program.

1. Ask the client to describe and then write down several things that will be done to help assure that they can meet their long-term goals.
2. Ask the client if there is anything else they would like to discuss prior to concluding their participation in the program? Allow at least 10 minutes for this discussion.

### **Conclusion of the session**

1. Be sure to ask the client to complete final surveys. Explain that it is important to have information about the program to assure its sustainability.
2. Ask the client if he or she would like additional information that can be provided.
3. Thank the client for his or her participation.

Walk the client to the door as he or she leaves. Thank him or her again for participating in the Employee Health Promotion Program. Ask him or her to refer coworkers to the program.

