

# HCA Training in Health Coaching and Self-management Support for NSW Health Connecting Care Program

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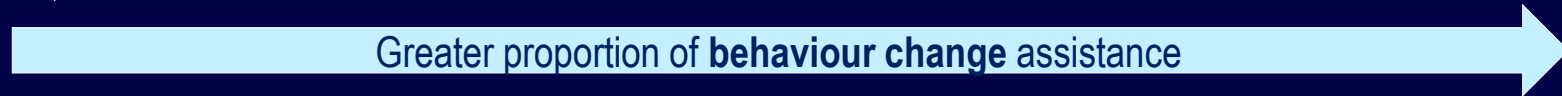
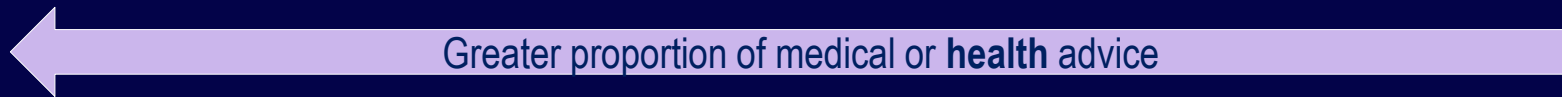
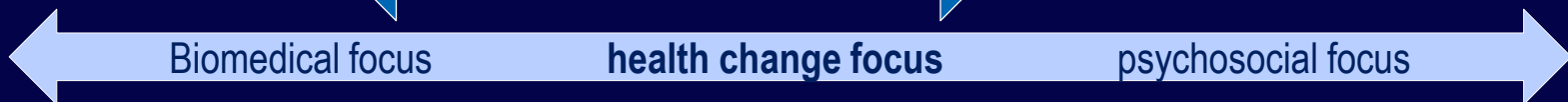


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# The Health Change Spectrum

## Where does Health Coaching Fit?

Traditional medical and allied health clinical consultations	Clinical medical and allied health consultations using health coaching	Health coaching-based chronic disease & lifestyle management programs	Wellness counselling and coaching interventions	General counselling & coaching interventions
Focus on individualised treatment advice and/or education for specific conditions (conducted by health practitioners)	Focus on individualised treatment advice and/or education for specific conditions + health behaviour change assistance (conducted by health practitioners)	Focus on general recommendations and education for disease management and/or lifestyle change for better health outcomes + health behaviour change assistance (conducted by health practitioners)	Focus on recommendations and education for general health and wellbeing + health behaviour change assistance (not necessarily conducted by health practitioners)	Focus on improving general wellbeing and mental health + behaviour change assistance (not necessarily specific to health nor conducted by health practitioners)



# Patient Issues and Evidence-Based Treatment Recommendations



Health Practitioner Facilitates Health Behaviour Change

QA, RICK



Patient Ready, Willing & Able to Follow Recommendations

RICK



Thinking & Planning

Goals, action plans  
Session records



Change Behaviour

Behavioural tracking  
Amount, %, #  
Frequency of change  
Spontaneous change



Adhere to Treatment Recommendations



Achieve Evidence-Based Physiological Targets

$\phi$  Path results etc.  
Exercise, nutrition etc.  
Behaviour change



Patient Better Health Outcomes

$\psi$   $\phi$   
QOL, Bed Days, \$

# What HCA Provides

- **Training and consulting** in health behaviour change and program implementation using the HCA Model of Health Change. Designed and delivered by health clinicians
- **A flexible framework** that guides clinicians to use HBC techniques effectively and efficiently in *any* context to target *any* combination of conditions, risk factors and health goals.
- The Model can be used in **clinical consultations** and **health coaching programs**



# The HCA Model of Health Change

- The HCA Model is a system of *evidence-based principles and techniques* that have been built into a *structure that guides* health professionals in how to *facilitate health behaviour change* in their patients or clients, for better health outcomes
- The processes actively identify and address behavioural, emotional, situational and cognitive *barriers to change* and *build patient skills* in decision making, problem solving and planning



# The HCA Model Attributes

- A **skills-based** approach (integrating different approaches)
- An **individualised** approach for patients (personalised goals and action plans)
- Can be delivered using **telephonic** or **face to face** consultations and in **groups** – tools and techniques need to be adapted
- **Not** a paper-based approach (can be used with or without paper-based tools)
- **Not** a structured program – flexible application to any context. Aims, assessment, education and program goals vary significantly across programs



# Health Change Goals

Chronic Condition Management ~ Disability ~ Rehabilitation ~ Disease Prevention ~ Health/Wellness

## Generic Health Behaviour Change Processes Applicable across the spectrum of health goals and clinical contexts (HCA Model)

6 Knowledge & Skill Sets	Theory Base (Health Behaviour Change)	Guiding Structure (10 Step Process)
<ol style="list-style-type: none"> <li>1. Health Conditions &amp; Health Promotion Knowledge</li> <li>2. Health Behaviour Change Frameworks</li> <li>3. Health Behaviour Change Interviewing Skills</li> <li>4. Behavioural Change Facilitation Skills</li> <li>5. Cognitive Change Facilitation Skills</li> <li>6. Emotion Management Facilitation Skills</li> </ol>	<ul style="list-style-type: none"> <li>• Collaborative Working Alliance (patient-centred)</li> <li>• Biopsychosocial Model</li> <li>• Readiness to Change</li> <li>• Autonomy &amp; Choice</li> <li>• Self-efficacy</li> <li>• Solution Focus</li> <li>• Barriers to Change</li> <li>• Trial &amp; Error, Learning &amp; Reinforcement</li> <li>• Hope theory</li> <li>• Motivation, Volition</li> <li>• Self-regulation</li> <li>• Positive Psychology</li> <li>• Etc.</li> </ul>	<ol style="list-style-type: none"> <li>1. Identify Health Issues, Treatment &amp; Lifestyle Change Options</li> <li>2. Set an Agenda</li> <li>3. Explore Motivation (Ask RICK!)<sup>®</sup></li> <li>4. Client Makes a Decision</li> </ol> <hr/> <ol style="list-style-type: none"> <li>5. Generate Specific Goal Options</li> <li>6. Select &amp; Refine Specific Goal</li> <li>7. Create Action Plan</li> <li>8. Identify &amp; Address Barriers</li> <li>9. Ask RICK! Again</li> <li>10. Review &amp; Referral</li> </ol>

# HCA 10 Steps to Health Change

## Consultation Preliminaries / Assessment Results

↓  
① Identify Health Issues & Treatment & Lifestyle Change Options

↓  
② Set an Agenda & ③ Explore Motivation (Ask RICK!) ®

↓  
④ Client Makes a Decision

Decision  
Line

↓  
⑤ Generate Specific Goal Options

Ready to  
change  
↓

↓  
⑥ Select & Refine Specific Goal & ⑦ Create Action Plan

↓  
⑧ Identify & Address Barriers & ⑨ Ask RICK! Again

↓  
⑩ Review & Referral

Readiness

(to adopt particular behaviours)

Solution-focused Coaching

Motivational Interviewing

RICK = readiness, importance, confidence, knowledge





# What's the Evidence?

- The HCA Model draws on evidence-based health behaviour change principles and techniques
  - Health behaviour change literature
  - Brief motivational interviewing
  - Solution-focused counselling & coaching literature
  - Cognitive behavioural counselling techniques
  - Health coaching literature and CDSM programs
- The HCA Model bridges the gap from theory to practice. It adds guidance and efficiency
- The Model allows HBC processes to be measured within an intervention



# Measurement & Evaluation

## 1. Motivational outcome measures: RICK

- General goals RICK first session changes
- Pre & post measures
- Average change in RICK (motivation and self-efficacy) across clients

## 2. Behavioural outcome measures

- Mean, median, mode specific goals pursued/attained per client & across clients
- Types of specific goals pursued/attained across clients
- Use goal hierarchy concept to group individual goals and report aggregate data, including spontaneous changes

## 3. Physiological outcome measures (as usual)



# Australian Settings & Applications - 1

- **Community Health** (EICD, HARP, CDSM Teams, Chronic & Complex care, Home & Community Care)
- **State-based CD risk reduction & CD prevention programs** (NSW/ACT/Tas Get Healthy, NSW Live Life Well Diabetes Prevention, NSW Severe CD Program, Victoria Workhealth)
- **Corporate health insurers** (pregnancy, CDSM, healthy lifestyle/CD prevention health coaching programs)
- **Disability and Aged Care services** (Anglicare)



# Australian Settings & Applications - 2

- **Rehabilitation programs** (injury, cardiac rehabilitation, workers compensation)
- **Mental health services** (community health)
- **Corporate employee health programs**
- **Pharmaceutical industry** (adherence & healthy lifestyle programs)
- **GPs, PN & Allied health services** (private & public physio, dietetics, exercise phys, OT, Diabetes educators etc.)
- **NHMRC Deakin University/HCA collaboration** (healthy pregnancy research program)



Blue = Primary focus

Black = 2ndary focus

# Training Content

Table 2: Core Skills for the PHC Workforce

DOHA/Flinders University - Supporting Prevention & Chronic Condition Self-management 2009

General Patient Centred Capabilities	Behaviour Change Capabilities	Organisational/Systems Capabilities
<ol style="list-style-type: none"><li>1. Health promotion approaches</li><li>2. Assessment of health risk factors</li><li>3. Communication skills</li><li>4. Assessment of Self-management capacity (understanding strengths and barriers)</li><li>5. Collaborative care planning</li><li>6. Use of peer support</li><li>7. Cultural awareness</li><li>8. Psychosocial assessment and support skills</li></ol>	<ol style="list-style-type: none"><li>9. Models of health behaviour change</li><li>10. Motivational interviewing</li><li>11. Collaborative problem definition</li><li>12. Goal setting and goal achievement</li><li>13. Structured problem solving and action planning</li></ol> <p>HCA also includes:</p> <ul style="list-style-type: none"><li>• Cognitive change skills for behaviour change support</li><li>• Emotional management skills for change support</li></ul>	<ol style="list-style-type: none"><li>14. Working in multidisciplinary teams/interprofessional learning &amp; practice</li><li>15. Information, assessment and communication management systems</li><li>16. Organisational change techniques</li><li>17. Evidence-based knowledge</li><li>18. Conducting practice based research/quality improvement framework</li><li>19. Awareness of community resources</li></ol>

# Participant Evaluation

Rating of 2 Day Workshops 1=Poor...5=Excellent

Attribute	2010 N=945
Overall Rating	4.66
Content & Relevance	4.51
Workshop Facilitation	4.72

- The **overall** rating is an indicator of clinician's acceptance of the material and the format in which it was presented.
- The **content and relevance** rating relates to their current role.
- In 2010 **68%** of attendees gave an overall rating of **5 out of 5**



# Transfer of Training into Practice

- **Transfer of training** into practice in public health services across Victoria showed health coaching training (**78%**) to out perform Flinders (54%), Stanford (66%) and Motivational Interviewing training (71%). (DHS Mapping Survey 2007)



# Potential Benefits to Patients

(it's user friendly)

1. Provides professional assessment, advice and/or education as required and corrects misinformation without creating resistance (**knowledge**)
2. Helps patients to decide to follow health recommendations for personally meaningful reasons (**motivation**), and
3. Develops patient problem solving skills to increase their likelihood of success after deciding to make changes (**self-efficacy**)
4. Helps patients to gain better **health outcomes**





# Potential Benefits to Clinicians

1. Better work **satisfaction**
2. Greater **confidence** in working with 'difficult' patients and those low in readiness
3. Greater **time efficiency** in consultations
4. **Fewer 'fail to show'** patients
5. Fewer "yes buts" and **less resistance** from patients
6. **Less frustration** with review patients that take no action
7. **Transferable skills** to be used in any context



# Potential Benefits to Organisations

1. Building in-house **capacity** and **sustainability** by up-skilling staff in transferable skills
2. **Flexible** application in any program or consultation context and for any health conditions
3. A **consistent** approach that reinforces patient actions and outcomes at every patient contact
4. Greater **time efficiency** in consultations and calls
5. **Measureable** processes to be used for QA and program evaluation

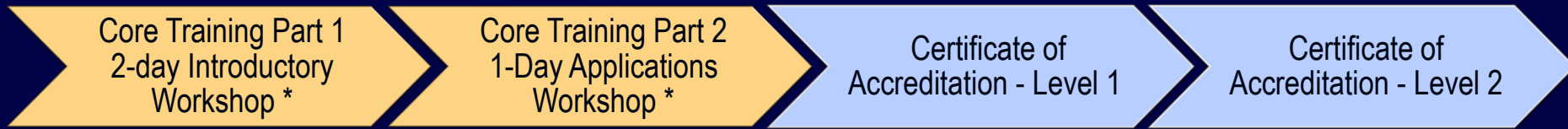


# Potential Benefits to Organisations

6. Flexible **delivery** methods: Face to face, telephone, groups
7. **Fewer 'fail to show'** patients & fewer frequent presenters that take no action
8. Improved **recruitment** into programs
9. Improved program participant **retention**
10. Encourages a **common language** and purpose across program teams
11. Better clinician **work satisfaction**



# Training Pathway for Clinical Staff



# Capacity Building and Implementation Options for Organisations



**Key**



# Training Needs Hierarchy



# Training Formats

- **All workshop options** are available for organisations to run in-house
- **Core Training Part 1 and Part 2** for clinicians are available either:
  - By in-house workshops for up to 24 clinicians at a time
  - By sending individuals to HCA workshops in Sydney, Melbourne or Brisbane (next available Sydney workshop is 23/24 May) - these workshops can be used to provide top up training for new staff
- **Mentoring and Peer Leader support** are by telephone and web-based training



# HCA Consultancy Options

- Support with program design, development, implementation, quality assurance, data collection and reporting
- Adaptation of HCA Core Training to align with specific program systems and needs
- Adaptation of existing program systems to align with the HCA Model of Health Change
- Design and/or provision of program written materials (booklets, worksheets, tools etc.)
- Skills development and mentoring (face to face or telephone and web-based – including Peer Leader mentoring)
- Ad hoc specialised workshops (e.g., adapting existing group-based education programs to include health behaviour change)



# Tips from Community Health Programs

1. Direct HP to follow a **structured approach** (avoid over-education or unproductive chatting)
2. Use simple, clear **systems to integrate** health behaviour change processes into current systems
3. Provide **guidance to HPs**. Don't leave it up to practitioners to figure out how to implement. Ask them what support they require
4. Provide **skills development** support (incl. peer leaders)
5. Implement **quality assurance** processes to verify health behaviour change processes are being applied effectively
6. **Document, measure, report** motivational & behavioural process variables and physiological outcomes. **KPIs** should reflect patient outcomes vs call centre metrics
7. Consider **change management** issues (management support, culture shift). Inform **referring** practitioners/specialists





# Skills Development & Other Resources

- **On-line Practitioner's Study Guide** 6 month access for those who have completed HCA Core Training Part 1
- **Resources downloads** through HCA website (worksheets, practice guides, skills development exercises, case study library, session records, patient resources, measurement and reporting guides etc.)
- **5 DVD set** with demonstration consultations with real clients (purchasable & included some packages)
- **HCA Practitioners Guide** – desktop resource (purchasable)



# Thank You

## Questions?

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