Wellness Coaching Registered Apprenticeship Program

Occupation: Wellness Coach
Training Term: 2000 hours
Type of Training: Hybrid
O*NET-SOC Code: 15-1151.00
RAPIDS Code: 2016HY

OVERVIEW
Wellness Coaches serve as trusted advisors and guides, working in collaboration with clients to help them achieve their personal wellness goals. These goals may fall within any of the major domains of wellness, which include social, physical, mental, environmental, medical and dental, spiritual, nutritional, psychological, occupational, financial, and behavioral wellness.

Wellness Coaches work within a formal wellness coaching model that employs evidence-based strategies and techniques to help individuals define their goals for improved health and wellness, identify personal strengths and barriers, set target milestones, identify and carry out achievable health- and wellness-promoting behaviors, track and monitor progress, problem solve and recover from setbacks, celebrate successes, and serve as role models for those around them.

Wellness Coaches work one-on-one with individuals or in family and group settings in a single session or regularly scheduled meetings.

Wellness Coaches also actively participate in ongoing development of the coaching program via the Wellness Coaching Collaboratory. They compile qualitative and quantitative data from coaching sessions as part of the program’s improvement and research initiatives and participate in ongoing individual and collaborative skill development with other Wellness Coaches.

To qualify for acceptance into the Program, candidates must possess the following personal characteristics: respect and concern for others, kindness, ability to work independently, adaptability, good English verbal and written communication skills, excellent follow-up, and proficiency with and access to a computer.

This outline describes the competencies and related formal structured instruction for 6 domains (specialties of practice). Candidates must complete training in 4 domains. Domain 1 and 2 are required for all participants and cover the fundamentals of Wellness Coaching and basic components of health. Participants must also complete 2 of the 4 electives. In the future, the Wellness Coaching Program will expand to include other specialty areas of competency and practice.

Required: Domain 1: Basic Principles and Skills of Wellness Coaching
Domain 2: Building Blocks of Health

Electives: Domain 3: Family Wellness
Domain 4: Addiction and Substance Use Disorders
Domain 5: Diabetes
Domain 6: Occupational Wellness

In development for 2014: Domain 7: Disabilities
This outline also includes a description of the prerequisite course that must be completed before participants are accepted into the Wellness Coaching Apprenticeship Program.

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**TOTAL INSTRUCTION AND TRAINING, PREREQUISITE** 36 hours
WELLNESS COACHING
ON-THE-JOB LEARNING AND COMPETENCIES
DOMAINS 1 – 6 (OJL) TOTAL OJL HOURS=2000

REQUIRED:
DOMAIN 1: BASIC PRINCIPLES AND SKILLS OF WELLNESS COACHING
DOMAIN 2: BUILDING BLOCKS OF HEALTH
DOMAINS 3–6 (ELECTIVES): CHOICE OF 2

DOMAIN 1 (REQUIRED)
BASIC PRINCIPLES AND SKILLS OF WELLNESS COACHING TOTAL HOURS = 950

NOTE: Competence in the areas that require the coach to discuss, describe, list, and summarize information must be demonstrated at the 5th to 8th grade levels, similar to the simplicity of explanation in the patient education information and tutorials available through the National Library of Medicine and National Diabetes Information Clearing House.

1. COACHING PRINCIPLES AND ETHICS 100
   1. Display and perform duties with professionalism in action and speech
   2. Maintain privacy and confidentiality
   3. Respect the integrity of the established Wellness Coaching model as taught and practiced
   4. Work within the defined scope of practice in terms of strategies, techniques, and resources used in the coaching encounter
   5. Recognize when referral to other professionals or services is needed
   6. Use verbal and nonverbal communication skills to foster a collaborative atmosphere
   7. Adapt personal style and approach to suit individual characteristics of the client, such as disability, gender, culture, ethnicity, age, sexual preference, and health status
   8. Identify appropriate settings in which coaching can take place
   9. Establish a coaching agreement with the client that makes clear the responsibilities of coach and client and delineates the scope of coaching services
   10. Follow prescribed process for introducing new resources into the established Wellness Coaching model
   11. Demonstrate commitment to ongoing skills development and performance improvement

2. WELLNESS DEFINITIONS, DIMENSIONS, AND ATTRIBUTES 100
   1. Describe the multiple models and varied definitions of wellness
   2. Discuss the attributes of each wellness domain within the varied models
   3. Characterize levels of wellness in objective terms based on the degree to which each wellness attribute is present and/or achieved
   4. Describe how attributes of wellness may vary depending on client factors, such as gender, age, and cultural, social, and environmental factors
   5. Provide real-world examples of wellness in each domain
   6. List common challenges and barriers to achieving wellness in each domain
   7. Describe common approaches to achieving wellness in each domain
3. THE PROCESS OF CHANGE: THE TRANSTHEORETICAL MODEL 100
1. Define the 5 stages of change in the transtheoretical model of change
2. Provide examples of how a person may think or behave in each of the stages of change
3. List the tasks and goals associated with each stage
4. Recognize client’s readiness to change
5. Describe coaching interventions that may be undertaken at each stage to help client move to action and maintenance
6. Use decisional balance scale to help clients weigh the pros and cons, and costs and benefits of change

4. SETTING THE STAGE FOR CHANGE: POSITIVE PSYCHOLOGY AND SOLUTION-ORIENTED APPROACHES 100
1. Summarize the models of supportive coaching practice and the evolution of positive psychology theory
2. Contrast problem-based versus solution-based models
3. Describe the principles of approaches that focus on supporting the client’s strengths as a way to reach a preferred future
4. Employ coaching techniques that help clients recognize their strengths, values, interests, and activities that increase their sense of fulfillment and purpose
5. Use strategic questioning to help clients craft a rich conceptualization of a preferred future

5. PROMOTING CHANGE: MOTIVATIONAL INTERVIEWING (MI) 200
A. ADHERENCE TO PRINCIPLES OF MI
1. Style or Spirit
   a. Recognize the differences among directing, guiding, and following
   b. Provide low-key feedback
   c. Roll with resistance
   d. Avoid arguments
   e. Use a supportive, nonjudgmental, warm, collaborative approach
   f. Convey empathy through words, body language, tone of voice, pacing
   g. Demonstrate genuine concern and awareness of client’s experience
   h. Follow the client’s lead in the discussion without imposing an agenda or structure
   i. Use client’s reactions as a guide for choosing strategies and techniques

2. Open-ended Questions
   a. Use open-ended questions that elicit client’s perceptions of problems, motivation, change efforts, plans
   b. Begin with interrogatives (“What,” “How”) or lead with a request (“Tell me,” “Describe”)
   c. Use questions that encourage greater client exploration and recognition of problem areas and motivation for change
   d. Make questions simple and direct, reducing the chance for confusion
   e. Time comments or questions so client has adequate time to reflect and respond

3. Affirmations
   a. Verbally reinforce client’s strengths, abilities, efforts to change behavior
   b. Enhance client confidence by praising small steps taken in the direction of change
   c. Express appreciation of client’s personal qualities that may facilitate successful change efforts
d. Derive wording of affirmations directly from conversation with client, so that affirmations are specific to client, not global or trite

e. Use affirmations to promote effective change rather than just offering general, “feel good” compliments

4. Reflective Listening
   a. Accurately identify essential meaning of what client has said in a way that client easily understands
   b. Repeat client’s actual words
   c. Rephrase by slightly rewording client’s words to clarify what the client means
   d. Paraphrase by slightly amplifying client’s thoughts or feelings, using analogies, making inferences
   e. Make reflective summary statements
   f. Offer reflections that increase the time client spends talking
   g. Reflect on client statements in a way that increases client introspection, conversation, and motivation for change
   h. Recognize resistance (arguing, interrupting, denying, ignoring) and counter it with reflection, reframing, coming alongside

5. Fostering a Collaborative Atmosphere
   a. Convey in words (verbal) and action (nonverbal) that coaching is collaborative, not driven by the coach
   b. Emphasize the importance of the client’s own decisions, confidence, and perceptions
   c. Demonstrate respect of client autonomy and personal choice
   d. Roll with resistance by emphasizing personal choice and autonomy

6. Motivation to Change
   a. Elicit client discussion of change using evocative questions or comments designed to promote greater awareness or concern of the problem, recognition of the advantage of change, increased interest/optimism to change, elaboration on topics related to change
   b. Help client develop a way to assess current perception of importance of change, confidence, readiness, commitment using rating scales
   c. Explore how motivation might be strengthened

7. Developing Discrepancies
   a. Create or heighten the internal conflicts client has relative to their current state
   b. Increase client’s awareness of current life situation compared with desired state
   c. Explore how current state may be inconsistent with client’s goals, values, or self-perceptions
   d. Present discrepancies as legitimate conflicts or mixed experiences

8. Pros, Cons, Ambivalence
   a. Address the negative and positive effects of client’s current state in a nonjudgmental way
   b. Explore potential costs and benefits of change
   c. Conduct decisional balance activities to reveal the cost-benefits or pros and cons of change
   d. Develop and support ambivalence as a normal part of the change process
   e. Reflect back to client the mixed thoughts and feelings underpinning the ambivalence
   f. Accept resistance as a part of the process
   g. Capitalize on change talk (DARN-C; desire, ability, reasons, need, commitment)
9. **DARN-C (Desire, Ability, Reasons, Need, Commitment)**
   a. Define the kinds of talk that lead to change using the DARN-C rubric
   b. Help client recognize the disadvantages of the status quo
   c. Help client explore the advantages of change
   d. Foster a sense of optimism about change
   e. Use strategic questioning to guide client in discussion about intention to change
   f. Respond to statements about change and intentions to change with reinforcing statements

10. **Summarizing**
    a. Present key points of the conversation in a concise statement and use it strategically to reinforce discrepancy and amplify change talk
    b. Move discussion forward to another important topic or into change discussion

11. **Change Planning Discussion**
    a. Assess readiness using measures such as the Readiness Ruler
    b. Facilitate discussion of client self-identified goals
    c. Work collaboratively with client to develop a change plan
    d. Help client establish SMART goals
    e. Help client identify initial potential barriers
    f. Help client identify options to overcome initial barriers
    g. Guide client in discussion of supportive resources available to them, such as family and friends
    h. Explore potential roadblocks on the path of change and ways to address them
    i. Use open-ended questions and reflections along the way to reinforce collaboration and strengthen commitment to change

12. **Providing Input: Informing**
    a. Recognize appropriate situations in which to give information
    b. Describe the uses of informing
    c. Explain how to determine the right pacing, how much information to give, and how to direct with care
    d. Ask permission to offer information
    e. Employ collaborative strategies for informing: chunk, check, chunk; elicit, provide, elicit

13. **Client-centered Discussion and Feedback**
    a. Facilitate discussion of problem areas for which client is requesting coaching
    b. Invite deeper exploration of problems by successively building on what client has already reported
    c. Avoid directing conversation to problems identified by others, not the client
    d. Provide feedback only when solicited by the client or after explicitly requesting client’s permission to offer it

**B. AVOIDANCE OF BEHAVIORS INCONSISTENT WITH PRINCIPLES OF MI**

1. **Judgmental, Closed, Controlling Style**
   a. Avoid using a judgmental or sarcastic tone
   b. Refrain from using verbal and nonverbal language that inhibits client trust and comfort
   c. Refrain from imposing a structure or agenda or using tactics that seek to control the client
2. **Unsolicited Advice, Feedback, or Directions**
   a. Avoid providing unsolicited advice, feedback, or directions
   b. Refrain from giving specific, concrete suggestions for what the client should do, but recognize exceptions when such suggestions may be appropriate
   c. Do not instruct client on how to be successful with their plan for change

3. **Emphasizing a Single Solution**
   a. Avoid emphasizing one solution or goal as the only legitimate way to achieve the client’s goals
   b. Refrain from imposing a particular behavior as a necessary standard for judging progress toward goal or improvement

4. **Direct Confrontation**
   a. Avoid directly confronting client about their failure to recognize problems related to their current state
   b. Refrain from directly confronting client about not taking steps to change identified problem areas

5. **Powerlessness and Loss of Control**
   a. Avoid emphasizing the concept of the powerlessness the client has over the problem or the inevitability of the problem
   b. Refrain from expressing the view that the client’s life is out of control or unmanageable in the current state

6. **Asserting Authority**
   a. Avoid asserting clear conclusions or decisions about what would be best for the client
   b. Refrain from using scare tactics or warning client that certain steps or techniques must be followed
   c. Do not tell client “what works” best or the likelihood of a less optimal outcome if the client chooses one solution over another
   d. Refrain from using the coach’s own experiences, knowledge, and expertise to highlight the points made to the client

7. **Closed-ended Questions**
   a. Avoid asking questions that could be answered with a simple “yes” or “no”
   b. Avoid asking questions that call for very specific answers, details, or information about client’s past behavior or circumstances contributing to their current problems
   c. Refrain from hurrying client or steering or leading with questioning
   d. Avoid hurrying client or requiring answers to multiple questions in close succession

6. **MAKING CHANGE: TINY HABITS**
   1. Describe the principles of Tiny Habits in clear and easy-to-understand ways using the Fogg Behavior Model (behavior = motivation, ability, and triggers)
   2. Identify client motivation according to core motivators (pleasure/pain, hope/fear, social acceptance/rejection)
   3. Help client identify personal abilities and triggers
   4. Help client identify personal target behaviors to be developed
   5. Apply principles of simplicity to help client refine target behaviors
   6. Ensure that ability and triggers are appropriate to achieve behavior-change goal
7. Reinforce client success
8. Help client monitor progress, evaluate outcomes, and problem solve
9. Emphasize use of Tiny Habits as an experiment and learning opportunity
10. Guide client in exploring ways to apply Tiny Habits skill development in new contexts or for new purposes

7. SUPPORTING CHANGE: USE OF SUPPORT TOOLS

A. COACHING SUPPORT TOOLS

1. Paper-based Tools
   a) Employ sample scripts and scenarios to inform and refine practice
   b) Make abundant use of algorithms, tips, and checklists to enhance effectiveness in planning, execution, and assessment
   c) Use graphics and other non-text–based visuals to clarify, amplify, and enhance communication with client

2. Persuasive Technologies (Internet & Text Messaging)
   a) Use email and text messaging to communicate with clients at all stages of change process as requested by client
   b) Use email and text messaging as required by the coaching program for planning, performance assessment, monitoring, reporting, program development, and research

B. CLIENT SUPPORT TOOLS

1. Paper-based Tools
   a) Offer client a variety of informational handouts and tools to foster self-assessment, planning, monitoring, performance, evaluation
   b) Recognize client efforts to use tools in support of change process
   c) Reflect the client’s experience back to client
   d) Affirm client efforts and success

2. Interactive Journaling
   a) Describe the use of interactive journaling and the power of expressive writing in the change process
   b) Explain the power of color and graphics to help enhance the change process
   c) Offer the client opportunities to experiment with the use of interactive journaling
   d) Collaborate with the client to use interactive journaling as a tool for change through all stages of change

3. Persuasive Technologies (Internet, Mobile Technology)
   a) Demonstrate to the client various online and mobile technology tools that the client can use independently of the coach to aid the change process
   b) Help client access chosen digital technologies and tools
   c) Recognize client’s efforts to use digital technologies and tools
   d) Affirm client’s efforts and successes

9. PUTTING COACHING TO WORK: PRACTICAL MODELS AND STANDARDS

A. INTERNATIONAL COACHING FEDERATION CORE COMPETENCIES

1. Setting the foundation
   a) Meet established ethical and professional standards
   b) Establish an appropriate coaching agreement with all clients
2. Co-creating the relationship
   a) Establish intimacy and trust as the foundation of an effective coaching relationship
   b) Establish a coaching presence and style that is open, flexible, and confident, characterized by appropriate risk taking, use of humor, experimentation, and shifts of perspective

3. Communicating effectively
   a) Employ active listening to focus full attention on the client and client’s agenda by supporting client’s full self-expression
   b) Use powerful questioning to elicit discovery, insight, commitment, and/or action
   c) Employ direct communication, characterized by language that has the greatest potential of impact

4. Facilitating learning and results
   a) Integrate and accurately evaluate multiple sources of information to optimize client awareness
   b) Assist client in designing actions that lead to client achievement of stated goals and fulfill purpose of coaching
   c) Develop a coaching plan with results that correlate with SMART goals and can be adjusted over time to accommodate new learning or new situations
   d) Manage progress and accountability so that the client’s autonomy is fully supported and the client is always the locus of control

B. Expanding Horizons of Coaching Practice: Innovation and Tradition
   1. Traditional Coaching Models
      a) Define the theoretical underpinnings of different coaching practices in use today
      b) Examine the scientific literature related to the utility, feasibility, and effectiveness of coaching modalities used in practice in the field today
      c) Evaluate the benefits and risks of current coaching practices as applied to different populations
      d) Describe case scenarios illustrating the benefits and risks of coaching practices in use today

   2. Emerging Currents
      a) Describe initiatives to promote wellness using wellness coaching that expand coaching practice beyond conventional models and settings
      b) Serve as a role model and advocate for wellness in formal and informal settings in public and private sectors
      c) Discuss the use of alternative coaching interventions that complement traditional and evidence-based practice

   NOTE: Competence in the cognitive areas (Competency items 1–7), which require the coach to discuss, describe, list, and summarize information, must be demonstrated at the 5th to 8th grade levels, similar to the simplicity of explanation in the patient education information and tutorials available through the National Library of Medicine and National Diabetes Information Clearing House.
1. **DEFINING HEALTH** 5
   1. Describe the attributes of health
   2. Discuss the roles played by diet, exercise, and stress management on overall health
   3. Explain how values, attitudes, thoughts, and beliefs drive healthy or risky behaviors
   4. Describe the personal skills that foster health
   5. List personal habits that foster health

2. **THE STATE OF OUR NATIONAL HEALTH AND A VISION FOR THE FUTURE** 5
   1. Describe the current state of American public health
   2. Discuss the national goals for health set forth in Healthy People 2020
   3. List barriers and challenges that prevent people from achieving optimum health
   4. Identify characteristics of people who are successful at achieving health goals
   5. Evaluate solutions that have been suggested to improve America’s health

3. **CULTURAL FACTORS & HEALTH** 10
   1. Describe how cultural values and perspectives shape health beliefs and habits
   2. List examples of cultural values that may inhibit or foster healthy habits among people of different cultures
   3. Recognize common cultural assumptions and biases that may come into play when working with people from diverse cultures
   4. Use verbal and nonverbal modes of expression in ways that respect cultural differences
   5. Display comfort and competence in cross-cultural exchanges
   6. List resources for learning about different cultures

4. **INFORMATION RESOURCES ON HEALTH AND FITNESS** 5
   1. Recognize factors that contribute to the validity and credibility of biomedical resources
   2. Describe common study designs and their strengths, weaknesses, and utility
   3. Use credible biomedical data to support work with clients
   4. Critically appraise advice and recommendations offered by popular media
   5. List sources of reliable, credible health data and information

5. **DIET** 20
   1. Describe the role good nutrition plays in physical and mental health
   2. Summarize the roles played by macronutrients (carbohydrates, fat, protein) and micronutrients (vitamins, mineral, phytochemicals) and fluids
   3. Define the components of a healthy diet
   4. Describe the current US national diet recommendations
   5. Discuss the rationale and utility of MyPlate
   6. Describe alternate models for healthy eating and meal planning, including the Harvard School of Public Health's Healthy Eating Plate
   7. List components of a healthy diet
   8. List the most common diet challenges for different populations based on age, environment, culture, socioeconomics
   9. Discuss common tips and techniques to foster healthy nutrition in individuals and families
   10. Summarize evidence-based recommendations for weight loss in overweight and obese individuals
   11. List sources of reliable, credible information on nutrition and healthy eating
6. FITNESS AND EXERCISE  
1. Describe the role fitness and exercise play in physical and mental health  
2. Define the components of physical fitness  
3. Describe the current US national exercise recommendations  
4. List basic exercises and activities to improve cardiorespiratory fitness, muscular strength, endurance, and flexibility; and body composition  
5. List the most common fitness and exercise challenges for different populations based on age, locale, culture, socioeconomics  
6. Discuss common tips and techniques to foster physical fitness in individuals and families  
7. Summarize evidence-based recommendations for exercise in diverse populations  
8. List sources of reliable, credible information on physical fitness and exercise

7. STRESS MANAGEMENT  
1. Define stress and describe its effect on the body  
2. Discuss common causes of stress at home, on the job, and in the community  
3. Describe the physical, mental, and behavioral symptoms of stress  
4. Summarize the importance and benefits of managing stress  
5. List defenses and rationalizations people use to normalize stress  
6. Describe effective personal stress management strategies, including cognitive, physical, behavioral, and environmental strategies  
7. Describe effective stress management strategies that may be used in interpersonal relationships  
8. List the application of stress management practices at home, on the job, and in the community  
9. List sources of reliable, credible information on stress management

8. COACHING PRACTICE  
1. Establish a helping relationship with client characterized by genuine interest, concern, respect, empathy  
2. Promote the individual’s knowledge acquisition, skill development, and change of attitude that may contribute to a positive change in the individual’s health and fitness  
3. Help client set SMART goals using the Tiny Habits model of simplicity  
4. Facilitate client’s recognition of health and fitness improvement and emphasize the value of celebrating success  
5. Assist the client in engaging family members and others in their sphere of influence (e.g., coworkers) in activities that increase health and fitness  
6. Offer Interactive Journaling as an aid to developing greater skills that support specific aspects of health and fitness  
7. Use client journaling and other modes of expression as a springboard for discussion related to health and fitness

DOMAINS TOTAL HOURS = 350

NOTE: Competence in the cognitive areas (Competency items 1–5), which require the coach to discuss, describe, list, and summarize information, must be demonstrated at the 5th to 8th grade levels, similar to the simplicity of explanation in the patient education information and tutorials
available through the National Library of Medicine and National Diabetes Information Clearing House.

1. FAMILY WELLNESS: DEFINITIONS AND CHALLENGES 10
   1. Describe the attributes of family wellness
   2. Describe the challenges that families confront through the continuum of life
   3. List credible resources available to families for education and support

2. HEALTHY DEVELOPMENT FROM BIRTH THROUGH YOUNG ADULTHOOD 10
   1. Describe the developmental tasks and milestones in early childhood (birth through eight years)
   2. Discuss the developmental tasks and milestones of middle childhood (ages eight to twelve)
   3. Discuss the developmental tasks and milestones of adolescents
   4. Describe the developmental tasks and milestones that contribute to successful emergence into adulthood

3. MARRIAGE 10
   1. Describe ways to help clients manage the expectations of marriage
   2. Foster development of positive, effective communication skills
   3. Discuss healthy strategies partners can use to manage conflict
   4. List effective problem-solving strategies

4. PARENTING 30
   1. Promote empathy and help clients develop appropriate expectations of their children
   2. Describe the role parenting skills play in family wellness and help parents consider how to develop and/or enhance their skills in the following areas:
      a. Positive communication
      b. Effective praise
      c. Responsible behavior and discipline
      d. Modeling values
      e. Family decision making
      f. Establishing a safe and nurturing environment for children
      g. Effective problem solving, stress management, anger management, and coping
      h. Balancing family, work, and personal interests
      i. Incorporating healthy behaviors into the family
      j. Preventing problems before they start

5. ELDER CARE 10
   1. Describe issues families must address as family members age, including medical, physical, and emotional challenges, end-of-life issues, living arrangements, and cost of care
   2. Discuss the unique challenges faced by members of the “sandwich generation” who are raising their own children while caring for aging parents
   3. Help families anticipate the challenges of caring for elderly family members with advance planning
   4. Provide compassionate support for families struggling with the challenges of aging family members and end-of-life issues
6. COACHING PRACTICE  
1. Establish a helping relationship with client characterized by genuine interest, concern, respect, empathy  
2. Affirm client’s autonomy and control and expertise about their family  
3. Support client’s exploration of issues related to their family that they want to consider changing  
4. Promote client’s knowledge acquisition, skill development, and change of attitude that contribute to positive changes in the family  
5. Facilitate client’s recognition of change and emphasize the value of celebration of success  
6. Assist the client in engaging family members in activities that increase wellness  
7. Offer Interactive Journaling as an aid to developing greater skills that support wellness within the family  
8. Use client journaling and other modes of expression as a springboard for discussion and client assessment and self-reflection related to family issues and change

[DOMAIN 4 ADDICTION AND SUBSTANCE USE DISORDERS TOTAL HOURS = 350]

NOTE: Competence in the cognitive areas (Competency items 1–3), which require the coach to discuss, describe, list, and summarize information, must be demonstrated at the 5th to 8th grade levels, similar to the simplicity of explanation in the patient education information and tutorials available through the National Library of Medicine and National Diabetes Information Clearing House.

1. ADDICTION AND ITS EFFECTS  
1. Describe the variety of models and theories of addiction and other problems related to substance use  
2. List the social, economic, political, and cultural contexts in which addiction and substance abuse exist  
3. List risk and resiliency factors that affect susceptibility to substance use problems  
4. Discuss the general behavioral, psychological, physical health, and social effects of substance use on the person who uses and on significant others  
5. Recognize the potential for medical and mental health conditions to coexist with substance use and addiction  
6. Recognize that an estimated 22 million Americans struggle with a drug or alcohol problem, and that almost 95 percent of people with substance use problems are considered unaware of their problem  
7. Describe warning signs, symptoms, and the course of substance use disorders

2. PSYCHOACTIVE SUBSTANCES AND THEIR EFFECTS  
1. Describe the general properties of each drug and alcohol classification, including alcohol, depressants, cocaine and other stimulants, opioids, hallucinogens, cannabinoids, and other drugs, such as inhalants, steroids, OTC drugs, and designer drugs  
2. Describe the physiological effects of each drug class  
3. Describe the psychological effects of each drug class  
4. Discuss the withdrawal syndrome and drug interactions
3. TREATMENT
1. Describe the philosophies, policies, and outcomes of the most generally accepted and scientifically supported models of treatment, recovery, relapse prevention, and continuing care
2. Describe the principles and components of treatment
3. Discuss the role of family, social networks, and community in the treatment and recovery process

4. SUPPORTING RECOVERY: COACHING PRACTICE
1. Establish a helping relationship with client characterized by genuine interest, concern, respect, empathy
2. Affirm client’s autonomy and control
3. Support client’s exploration of personal goals and options
4. Foster client’s active engagement in the treatment and recovery process
5. Promote client knowledge, skills, and attitudes that contribute to a positive change in substance use behaviors
6. Encourage and reinforce client actions that promote achievement of established goals
7. Foster client self-reflection to recognize and avoid behaviors inconsistent with progress toward goals
8. Demonstrate willingness to involve client’s significant others as appropriate
9. Introduce other areas of wellness for the client’s consideration, with the intention of fostering the development of behaviors that support recovery
10. Facilitate client’s recognition of change and emphasize the value of celebration of success
11. Assist significant others in adopting strategies and behaviors that support recovery and healthy relationships
12. Offer Interactive Journaling as an aid to recovery
13. Use client journaling and other modes of expression as a springboard for discussion and client assessment and self-reflection

DOMAIN 5
DIABETES

TOTAL HOURS =350

NOTE: Competence in the cognitive areas (Competency items 1–7), which require the coach to discuss, describe, list, and summarize information, must be demonstrated at the 5th to 8th grade levels, similar to the simplicity of explanation in the patient education information and tutorials available through the National Library of Medicine and National Diabetes Information Clearing House.

1. BIOMEDICAL RESOURCES RELATED TO DIABETES
1. Recognize factors that contribute to validity and credibility of biomedical resources
2. Summarize key points of current biomedical data reported in popular media
3. Use credible biomedical data to support work with clients
4. Critically appraise reports and recommendations provided by popular media
5. Identify sources of reliable, credible data and information

2. EPIDEMIOLOGY
1. Recognize prevalence of diabetes
2. List the risk factors for diabetes
3. Identify characteristics of high-risk populations
4. Recognize the severity of the problem of diabetes prevalence
5. Discuss the medical, social, physical, psychological, and economic burden of illness on the individual, family, and community

3. PATHOPHYSIOLOGY
1. Describe normal glucose metabolism
2. Describe the multiple pathophysiologic processes (at least 8 factors) that contribute to the development of diabetes
3. Differentiate between the 3 common types of diabetes mellitus (type 1, type 2, gestational) and prediabetes
4. List common risk factors for the development of diabetes-related complications
5. Describe the micro- and macrovascular complications of diabetes
6. List signs and symptoms of long-term complications of uncontrolled diabetes

4. COMPONENTS OF TREATMENT
1. Describe the building blocks of a treatment plan
2. Discuss the roles played by each member of the diabetes care team within the current medical model of care
3. Describe the emerging model of an expanded care team and the role played by Wellness Coaches

5. TREATMENT (LIFESTYLE MODIFICATION)
1. Describe the critical role of diet and exercise in the treatment of diabetes
2. Discuss fundamental aspects of healthy food choices, portion control, and meal planning
3. Explain basics of carbohydrate counting
4. Make sense of nutrition labels
5. Provide insights into marketing practices associated with unhealthy foods
6. Describe the role of exercise in treatment and the effect of exercise on the disease process

6. TREATMENT (MEDICATION)
1. Discuss the loss of beta cell function and why diet and exercise usually are not adequate in regulating blood sugar
2. Describe how different medications target different disease processes and sites
3. List the drug classes of common medications, how they are administered, their safety profiles, and common side effects
4. Discuss why no single medication can target all processes and why multiple agents are used
5. Describe how combinations of multiple agents, including various insulin regimens, help regulate blood sugar

7. PRINCIPLES OF SELF-MANAGEMENT
1. Describe the fundamental components of self-management
2. List challenges and barriers to good self-management
3. Recognize the personal characteristics of a person with diabetes that contribute to success or failure with self-management
4. Acknowledge that attitudes about health and health management vary across individuals and cultures
8. COACHING PRACTICE
A. COACHING BASICS
1. Establish a helping relationship with client characterized by genuine interest, concern, respect, empathy
2. Promote the individual’s awareness about the benefits of good self-management and the opportunities available for improvement
3. Access a wide variety of tools, techniques, and resources to help support client in the development of good diabetes self-management practices
4. Offer Interactive Journaling as an aid to developing greater skills that support specific aspects of diabetes management
5. Use client journaling and other modes of expression as a springboard for discussion and client assessment and self-reflection related to diabetes management

B. PREPARING FOR SUCCESS
1. Personal Factors that Contribute to Success
   a. Help client identify effective self-management practices they already employ
   b. Help client identify self-care practices that may need change
   c. Help client identify personal resources and strengths
   d. Promote readiness to take action by supporting good planning
   e. Support client in identifying challenges, difficulties, and barriers to success

2. Goal Setting
   a. Provide examples of immediate-, short-term, and longer-term goals the client may want to consider
   b. Help client identify areas needing change
   c. Help client identify SMART goals
   d. Promote successful action by supporting good planning

3. Action Planning
   a. Help client prioritize issues and decide the order in which to tackle them based on the significance of the problem, the resources available to the client to address them, and the significance of barriers
   b. Include the use of the Tiny Habits model in crafting specific behaviors to initiate
   c. Help client identify resources, tools, and a support matrix to assist in achieving specific goals
   d. Help client develop a plan that adheres to the SMART model
   e. Assist client in action planning by including key components of self-management in discussions. These components include medication, diet, exercise, monitoring, making adjustments to maintain good blood sugar control, and addressing psychosocial issues
   f. Help client recognize the importance of good foot, eye, and skin care
   g. Help client experiment with various techniques and tools to establish a reliable system for good self-management

C. LAUNCHING THE PLAN AND STAYING THE COURSE
1. Assessing Outcomes
   a. Use easy tools to help client manage the plan and assess outcomes
   b. Invite client to reflect on progress and outcomes
2. **Affirming Commitment and Resolve**
   a. Review goals with client to identify progress, barriers, ambivalence
   b. Help client refocus and reinforce commitment to goals and methods

3. **Celebrating Success**
   a. Help client identify meaningful ways to reward themselves for achieving goals
   b. Monitor client recognition of achievements, large and small, and “micro” successes
   c. Help reenergize client to work toward intermediate and long-range goals

4. **Making Mid-course Corrections and Adjustments**
   a. Guide client in assessing progress over time
   b. Suggest a variety of tools to use for monitoring, logging, and assessment to help patient maintain gains
   c. Remind client to monitor, assess, and reassess
   d. Support client in making necessary changes to established care regimen, including adjustments to medication, diet, activity level, support structure, and other factors affecting their condition
   e. Help client monitor their condition and stay on top of care, particularly related to blood sugar control and complications
   f. Assist client in anticipating and managing challenges to their self-care routine, such as weekends and holidays, travel, illness, and work

5. **Recovering from Setbacks**
   a. Help client put setbacks in context to help them avoid catastrophizing
   b. Explore with the client the process by which setbacks occurred
   c. Help client identify factors under their control which they can affect
   d. Help client assess goals and to reaffirm SMART goals
   e. Provide support for client’s action planning to reduce the risk of setbacks and avoid repeating the setback
   f. Help client brainstorm a variety of solutions to overcome setbacks and avoid them in the future

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**DOMAIN 6**

**OCCUPATIONAL WELLNESS**

**TOTAL HOURS = 350**

NOTE: Competence in the cognitive areas (Competency items 1–4), which require the coach to discuss, describe, list, and summarize information, must be demonstrated at the 5th to 8th grade levels, similar to the simplicity of explanation in the patient education information and tutorials available through the National Library of Medicine and National Diabetes Information Clearing House.

**1. PRINCIPLES OF OCCUPATIONAL WELLNESS**

1. Define occupational wellness
2. List the components of occupational wellness
3. Describe the factors that contribute to occupational wellness
4. Discuss current theories about the role of work in an individual’s life throughout the lifespan

**2. TAKING STOCK: OCCUPATIONAL WELLNESS ASSESSMENT**

1. List available resources to help individuals assess their skills, strengths, interests, values
2. Discuss ways to help individuals engage in self-reflection and self-assessment related to key components of occupational wellness:
   a. Alignment with interests and values
   b. Work-life balance
   c. Interaction with others
   d. Sense of purpose and achievement
   e. Recognition
   f. Growth and development
   g. Appropriate level of responsibility, control, and autonomy
   h. Healthy, safe, supportive environment
3. Help client identify specific strengths that they possess that can be applied in the workplace

3. PERSONAL ATTRIBUTES THAT INCREASE OCCUPATIONAL WELLNESS
   1. List the personal attributes that contribute to occupational wellness (ie, work quality and productivity, self-management, communication [speaking and listening], healthy boundaries, initiative, teamwork)
   2. Describe how these attributes come into play on the job
   3. Discuss ways to increase the effectiveness of these attributes
   4. Describe strategies for maximizing effective collaboration and cooperation, and minimizing interpersonal conflict at the workplace

4. JOB CRAFTING
   1. Explain the rationale, benefits, and risks of job crafting
   2. Describe the principle of job crafting as a way to redesign work to foster greater job satisfaction, engagement, resilience, and thriving in the workplace
   3. Summarize the key research on job crafting in terms of its practical implications
   4. Provide examples of job crafting motivation, techniques, and outcomes
   5. Describe how job crafting can be used as a coping technique for adversity and challenges in the workplace

5. COACHING PRACTICE
   1. Establish a helping relationship with client characterized by genuine interest, concern, respect, empathy
   2. Promote the individual’s awareness about the benefits of occupational wellness and the opportunities available for improvement
   3. Help client identify areas of occupational wellness that they want to change and improve
   4. Help client establish SMART goals for increasing skills that foster occupational wellness
   5. Provide opportunities for client to explore alternatives and solutions to interpersonal conflicts in the workplace
   6. Facilitate client’s recognition of improvements in occupational wellness and emphasize the value of celebrating success
   7. Offer Interactive Journaling as an aid to developing greater skills that support specific aspects of occupational wellness
   8. Use client journaling and other modes of expression as a springboard for discussion and client assessment and self-reflection related to occupational wellness

IN DEVELOPMENT FOR 2014

| DOMAIN 7 | DISABILITIES COACHING | TOTAL HOURS = 350 |
The complete instructional program will be conducted using a rich variety of distance learning formats, including online modules, and web-and teleconferencing.

Formal training and instruction is offered on an interactive website that features a variety of learning modalities, including:

a) Teach and test  
b) Case scenarios  
c) Problem- and case-based learning  
d) Online forums, structured and open  
e) Live chat  
f) Collaborative learning  
g) Interactive games  
h) Webinars  
i) Published articles and supplementary print-based instructional material

This format offers considerable advantages over typical single-format, time-constrained activities because it allows learners to advance at their own paces and engage in the content in multiple ways. By combining multiple interventions in different formats over time, this programming exemplifies key principles of adult learning:

a) Presenting content in multiple formats to accommodate the unique learning styles of individual learners  
b) Providing multiple educational interventions over time  
c) Offering opportunities for reflection and feedback  
d) Role modeling  
e) Making learning personally relevant by using real-world scenarios  
f) Offering abundant opportunities for practice and skills development
The Wellness Coaching Collaboratory
All participants are required to participate in the Wellness Coaching Collaboratory, a virtual laboratory in which coaches work together in an active learning community to improve and increase their own coaching skills and build and refine the Wellness Coaching program. All coaches are initiated into the culture of shared learning by participating in the prerequisite training course that allows them to use many of the coaching techniques and modalities for their own self-assessment, self-reflection, and program of personal wellness improvement.

Wellness Coaches also actively participate in ongoing development of the coaching program. They compile qualitative and quantitative data from coaching sessions as part of the program’s improvement and research initiatives, and participate in ongoing individual and collaborative skill development with other Wellness Coaches.

One feature of the work that will be conducted at the Collaboratory is the use of practice-based evidence. Practice-based evidence is a term to describe the use of real-time feedback to develop, guide, and evaluate coaching services. Because the power of the Wellness Coaching model is so dependent on the close collaboration between the coach and the individual(s) being coached, we will test the use of practice-based evidence to help guide coaches in practice and to determine its utility in the coaching setting.
Training Module, Domain 1: Required

BASIC PRINCIPLES AND SKILLS OF WELLNESS COACHING

Module 1: Role of the Wellness Coach
- Introduction to and definition of peer counseling, mentoring, coaching
- Privacy and confidentiality
- Responsibilities and limitations/boundaries
- Principles of professional conduct in action and speech
- Challenges and successes
- Scope of practice
  - Issues to address
  - Strategies and techniques that may be employed in the coaching encounter
  - Published and web-based resources that may be used to support coaching efforts
  - Process for introducing new resources into the established coaching program
- Establishing a coaching agreement
- Making referrals to other professionals: why, when, how, to whom
- Fostering a collaborative atmosphere: verbal and nonverbal skills
- Coaching setting: workplace, health clinics, recreation centers, retail locations (e.g., pharmacy, grocery store), community and senior centers, houses of worship, gyms, private offices
- Coaching structure: Individual, family, or group coaching; single session or regularly scheduled meetings

Module 2: The Definition, Dimensions, and Attributes of Wellness
- Multiple Models, Varied Definitions
  - Emotional
  - Environmental
  - Financial
  - Intellectual
  - Mental
  - Multicultural
  - Occupational
  - Physical
  - Social
  - Spiritual
- Total Force Fitness: “a state in which the individual, family and organization can sustain optimal well-being and performance under all conditions”
  - Social (support and cohesion)
  - Psychological (coping, awareness, beliefs, decision making, engagement)
  - Behavioral (hygiene, substance abuse, risk mitigation, peer support)
  - Spiritual (perspectives, core values, identity, ethical foundation, embracing diversity)
Physical (strength, endurance, power, flexibility, mobility)
- Environmental (temperature, altitude, noise, air quality)
- Medical and dental (immunizations, screening, prevention)
- Nutritional (food quality, nutritional requirements, food choices)

**Module 3: Helping Clients Change: Principles**

- Framework for change: focusing on solutions, strengths, and a preferred future
- Solution-oriented strategies
  - Starting with the end in mind
  - Crafting a vision of a preferred future
  - Identifying precursors and resources
  - Defining progress
- Components of positive psychology
  - Happiness
  - Optimism
  - Values
  - Strengths
  - Accomplishments
- Stages of readiness: Transtheoretical Model of Change
- Health belief model
  - Perceived susceptibility, severity, benefits, costs
  - Motivation
  - Enabling or modifying factors
- Motivational interviewing
  - Spirit and practice
  - Expressing empathy
  - Developing discrepancy
  - Rolling with resistance, avoiding argumentation
  - Supporting self-efficacy
- Tiny Habits (Fogg model)
  - Behavior = motivation + ability + triggers
  - Principle: place hot triggers in the path of motivated people
  - Behaviors on a continuum: one time, over a span of time, ongoing
  - Behavior types: new, familiar, increase intensity or duration, decrease intensity or duration, stop
- Interactive Journaling
  - Rationale and outcomes data
  - Application in diverse populations and settings
  - Exploring risks, needs and goals
  - Identifying strengths and resources
  - Managing change one step at a time
  - Use of The Change Companies Interactive Journaling® library of evidence-based products

**Module 4: Transtheoretical Model of Change: Skill Development**

- Recognizing stages of change
- Interventions to achieve goals of each stage
- Use of decisional balance scale to assist client evaluate pros and cons/costs and benefits of change
- Coaching to enhance maintenance

**Module 5: Motivational Interviewing: Skill Development**

- OARS+E: Client-centered counseling skills
  - Open-ended questions
  - Affirmations
  - Reflective listening
  - Summaries
  - Eliciting change talk
- OARS practice
  - Types of reflections: simple, amplified, double-sided
  - Levels of reflection: repeat, rephrase, paraphrase
- Exploring ambivalence
- Rolling with resistance
  - Defining resistance: arguing, interrupting, denying, ignoring
  - Defining rolling with resistance
  - How to roll: reflect, shift focus, reframe, agree with a twist, emphasize personal choice & control, coming alongside
- Readiness
  - Readiness as related to stages of change
  - Assessing and measuring readiness
- Change: DARN-C
  - Significance of DARN-C: desire, ability, reasons, needs, commitment
  - Using a ruler
  - Assessing importance and confidence
  - Pros and cons
  - What next?
  - Using hypotheticals
- Informing
  - Uses of informing
  - Pacing, amount of information, directing with care
  - Asking permission
  - Strategies: chunk, check, chunk; elicit, provide, elicit
- Developing a change plan
  - Role of information and advice
  - Menu of options
  - Use of SMART rubric to formulate goals

**Module 6: Tiny Habits: Skill Development**

- Defining Tiny Habits/target behaviors
  - Cycle behaviors
  - Cue behaviors
- Recognizing core motivators
  - Pain/pleasure
  - Hope/fear
  - Social acceptance/rejection
- Identifying ability
- Designing behaviors to make them simple
- Time
- Money
- Physical effort
- Mental effort
- Social deviance
- Departure from routine

- Identifying and choosing powerful triggers
  - Sparks (for low motivation)
  - Facilitators (for low ability)
  - Signal (cueing)
- Recognizing and celebrating success
- Evaluating outcomes

Module 7: Putting Coaching to Work: Practical Models and Standards 8
- International Coaching Federation core competencies
  - Ethics, standards, agreement
  - Coaching relationship and style
  - Effective communication: listening and questioning
  - Optimizing outcomes: goal setting, planning, responsibility, accountability, achievement
- Expanded coaching practice: innovation and tradition
  - Theoretical underpinnings of coaching practices in use today
  - Evidence of utility, feasibility, and effectiveness of current coaching modalities
  - Benefits and risks of current coaching practices as applied to different populations
  - Expanded coaching practice beyond traditional models and settings
  - Wellness advocacy
  - Alternative and complementary coaching interventions

Module 8: Using the Coaching Kit: Skill Development 8
- Coaching support tools
  - Sample scripts and scenarios
  - Tips, algorithms, checklists
  - Emails and text messaging (for coaching and client support)
  - Collaboratory resources
  - Links to approved websites
- Client handouts and tools
  - Interactive journaling
  - Personal assessment
  - Decision support
  - Monitoring & tracking
  - Logs

Module 9: Biweekly Updates and Practice Sessions 24
- Assessing motivational interview sessions
  - Assessing adherence
  - Assessing competence
- Assessing outcomes and performance one session at a time
  - Gathering and using feedback to inform coaching decision making
  - Assessing the client’s perception of how they are doing
  - Assessing the client’s perception of the coaching session
- Review of key concepts
- Coaching skill development
- Problem solving
- Required and optional participation in the Collaboratory
- Standards and procedures for client data collection and submission
- Standards and procedures for program collection and submission

**TOTAL STRUCTURED INSTRUCTION AND TRAINING, DOMAIN 1** 100 hours

**Training Module, Domain 2: Required**

**BUILDING BLOCKS OF HEALTH**

**Module 1: Defining Health**
- The attributes of health
- The role of diet, exercise, and stress management on overall health
- The effect of values, attitudes, thoughts, and beliefs on behavior
- Personal skills and habits that foster health

**Module 2: The State of Our National Health and a Vision for the Future** 2
- Current state of American public health: epidemiology
- National goals: Health People 2020
- Factors contributing to the current public health problems
- Personal skills and habits of health people
- Policies and practices recommended to address current problems

**Module 3: Cultural Factors and Health** 2
- The role of cultural values in shaping health beliefs and habits
- Cultural values in diverse American populations that foster or inhibit healthy habits
- The effect of cultural assumptions and biases in coaching relationships
- Working with sensitivity and respect with people from diverse cultures
- Resources for learning about different cultures

**Module 4: Information Resources on Health and Fitness** 2
- Overview of research principles in health and fitness
- How to read and interpret biomedical data
- How to use data to support your work
- Sources of reliable and credible data

**Module 5: Diet** 4
- The role of nutrition on mind, body, spirit
- Nutrition defined: The role of macro-and micro-nutrients
- Components of a healthy diet and eating habits
- Current nutritional recommendations and the use of MyPlate
- Challenges to healthy eating in diverse populations
- What the scientific data say about how to lose and sustain weight loss
Module 6: Fitness and Exercise
- The effect of exercise and fitness on mind, body, spirit
- Fitness defined: What constitutes “in good shape?”
- How much and how hard: Current US recommendations for exercise and physical activity
- Basic exercises and activities to improve cardiovascular health; muscular strength, endurance, flexibility; and body composition
- Tips and techniques that foster physical fitness in individuals and groups
- Challenges to healthy eating in diverse populations
- What the scientific data say about how to lose and sustain weight loss
- Sources of reliable and credible information on physical fitness and exercise

Module 7: Stress Management
- The definition and causes of stress at home, on the job, and in the community
- The short- and long-term effects of stress on the body, mind, spirit
- The importance and benefits of managing stress
- Common coping mechanisms for stress: defenses and rationalizations
- Effective stress management techniques and strategies
  - Cognitive
  - Physical
  - Behavioral
  - Environmental
- How techniques and strategies may be applied at home, on the job, and in the community
- Managing stress in interpersonal relationships
- Sources of reliable and credible information on stress management

Module 8: Coaching Practice
- Scope of coaching practice in the area of health and fitness
  - The role of the coach
  - Issues to address
  - Responsibilities and limitations/boundaries
- Core skills applied to health promotion
  - Strategies to enhance positivity, optimism, focus on solutions and a preferred future
  - Stages of change process
  - Motivational interviewing
  - Interactive journaling
  - Tiny Habits
- Assessment
  - Adherence and competence using established coaching models
  - Feedback-informed coaching using results of outcomes and session ratings
  - Problem solving to increase coaching effectiveness based on results of assessment

Sources of reliable and credible information on diet

Sources of reliable and credible information on physical fitness and exercise

Sources of reliable and credible information on stress management

Sources of reliable and credible information on coaching practice
TOTAL STRUCTURED INSTRUCTION AND TRAINING, DOMAIN 2  
50 hours

Training Module, Domain 3: Elective

**FAMILY WELLNESS**

<table>
<thead>
<tr>
<th>Module</th>
<th>Time (hours)</th>
<th>Description</th>
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| Module 1: Defining Family Wellness and Challenges | 2 |  The attributes of family wellness  
  Challenges to families through the continuum of life  
  Resources for families for education and support |
| Module 2: Marriage | 2 |  Appropriate expectations of marriage  
  What science suggests about how healthy marriages function  
  Principles and skill development of effective communication in marriage  
  Problem solving and conflict management |
| Module 3: Human Development Across the Lifespan | 2 |  The developmental tasks from birth through adolescence  
  Stages of adulthood from early adulthood through midlife  
  Aging and end-of-life Issues |
| Module 4: Parenting | 10 |  Parents as leaders and models of behaviors, thoughts, and values  
  Components of healthy family dynamics  
  Factors that contribute to safe, nurturing environments for children  
  Challenges and solutions to competing demands of family and work  
  Managing the stresses of family life  
  - Effective problem solving  
  - Stress management  
  - Anger management  
  - Coping strategies  
  - Enhancing positive feelings: formal and informal practices |
| Module 5: Elder Care | 2 |  The medical, physical, emotional, economic, and social challenges of aging  
  Caring for an elderly family member while maintaining healthy family functioning  
  Options for living arrangements and care  
  Compassionate end-of-life care |
| Module 6: Coaching Practice | 32 |  Scope of coaching practice in the area of family wellness  
  - The role of the coach  
  - Issues to address  
  - Responsibilities and limitations/boundaries  
  Core skills applied to the family coaching setting  
  - Strategies to enhance positivity, optimism, focus on solutions and a preferred future  
  - Stages of change process  
  - Motivational interviewing  
  - Interactive journaling |
Tiny Habits

- Assessment
  - Adherence and competence using established coaching models
  - Feedback-informed coaching using results of outcomes and session ratings
  - Problem solving to increase coaching effectiveness based on results of assessment

TOTAL STRUCTURED INSTRUCTION AND TRAINING, DOMAIN 3 50 hours

Training Module, Domain 4: Elective

ADDICTION AND SUBSTANCE USE DISORDERS

Module 1: Addiction and Its Effect
- Definition of addiction and substance use disorders
- Models and theories of addiction
- The context for addiction and substance use disorders
- Risk and resiliency factors
- Coexistence of medical, mental, and substance use disorders
- Substance use, abuse, and addiction in the US
- How to identify the warning signs, symptoms, and course of substance use disorders
- The effects of substance use disorders on the individual
- The effects of substance use disorders on families and community

Module 2: Psychoactive Agents and Their Effects 6
- Classification of psychoactive agents
- Physiological effects
- Psychological effects
- Withdrawal syndrome and drug interactions

Module 3: Treatment 4
- Review of history of treatment: from myths to evidence-based practice
- Philosophical underpinnings and policies of common models of treatment
- Components of care: treatment, recovery, relapse prevention, continuing care
- The role of the family, social networks, and community in treatment and recovery

Module 4: Coaching Practice 36
- Scope of coaching practice in the area of addiction and substance use disorders
  - The role of the coach
  - Issues to address
  - Responsibilities and limitations/boundaries
- Professional issues: rights of individuals being coached
  - Confidentiality
  - Informed consent
  - Reporting: child/spousal abuse, duty to warn
• Core skills applied to the addiction setting
  o Strategies to enhance positivity, optimism, focus on solutions and a preferred future
  o Stages of change process
  o Motivational interviewing
  o Interactive journaling
  o Tiny Habits

• Assessment
  o Adherence and competence using established coaching models
  o Feedback-informed coaching using results of outcomes and session ratings
  o Problem solving to increase coaching effectiveness based on results of assessment

TOTAL STRUCTURED INSTRUCTION AND TRAINING, DOMAIN 4 50 hours

Training Module, Domain 5: Elective

DIABETES

Module 1: Biomedical Resources
  • Sources of biomedical data
  • How to read and interpret biomedical data
  • How to use data to support coaching practice

Module 2: Epidemiology
  • Definition of diabetes and description of the 3 common types
  • Prevalence
  • Risk factors
  • Burden of illness

Module 3: Pathophysiology
  • Normal glucose metabolism
  • The role of beta cells and the impact of beta cell dysfunction
  • The “ominous octet” that contributes to the development of diabetes (beta cell dysfunction, insulin resistance in muscles and liver, overproduction of free fatty acids, alpha cell overactivity, incretin hormone dysregulation, increased glucose reabsorption, neurotransmitter dysfunction)
  • Signs and symptoms of long-term complications of uncontrolled diabetes

Module 4: Components of Treatment
  • Building blocks of treatment
    o Pharmacologic treatment
    o Non-pharmacologic treatment
    o Self-management
  • Team care in the current model
    o Physicians
    o Nurses
    o Diabetes educators
    o Other medical staff
Emerging models of care
  o The expanded team model
  o The role of Wellness Coaches

Module 5: Treatment (Lifestyle Modification)  4
  • Diet
    o How diet affects diabetes; how diabetes affects diet
    o Basic nutritional guidelines
    o How to read nutritional labels
    o Food choices
    o Environmental factors that challenge healthy eating
    o Meal planning
    o Carbohydrate counting
    o Diet challenges: weekends, holidays, travel
  • Exercise
    o How exercise affects diabetes; how diabetes affects exercise
    o Recommended exercise options
    o Setting up an exercise routine
    o Risks associated with exercise and vigorous activity
    o Exercise safety

Module 6: Treatment (Medication)  4
  • Why diet and exercise often are inadequate to treat diabetes
  • Complexity of the processes contributing to diabetes and the involvement of multiple organs
  • Rationale for multidrug therapy
  • Goals of treatment
    o Improve insulin sensitivity
    o Preserve beta cell function
    o Protect blood vessels and organs
    o Control appetite
  • Non-insulin therapies
  • Insulin therapy
    o Short-acting insulin to control blood sugar in response to food that’s eaten
    o Long-acting insulin to control production of glucose by the liver

Module 7: Principles of Self-Management  4
  • Adherence to prescribed medication regimens
  • Healthy eating
  • Maintaining an active lifestyle that includes regular exercise
  • Blood glucose self-monitoring
  • Effective problem solving
  • Healthy coping
  • Reducing risks of diabetes-related complications

Module 8: Coaching Practice  30
  • Scope of coaching practice in the area of diabetes support
    o The role of the coach
    o Issues to address
    o Responsibilities and limitations/boundaries
• Professional issues: rights of individuals being coached
  o Confidentiality
  o Informed consent
• Core skills applied to the diabetes setting
  o Strategies to enhance positivity, optimism, focus on solutions and a preferred future
  o Stages of change process
  o Motivational interviewing
  o Interactive journaling
  o Tiny Habits
  o Risks associated with exercise and vigorous activity
  o Exercise safety
• Assessment
  o Adherence and competence using established coaching models
  o Feedback-informed coaching using results of outcomes and session ratings
  o Problem solving to increase coaching effectiveness based on results of assessment

TOTAL STRUCTURED INSTRUCTION AND TRAINING, DOMAIN 5 50 hours

Training Module, Domain 6: Elective

OCCUPATIONAL WELLNESS

Module 1: Principles of Occupational Wellness
• Definition of occupational wellness
• Components of occupational wellness
• Factors that contribute to occupational wellness
• The meaning and role of work through the life span

Module 2: Assessing Occupational Wellness
• The need for ongoing reflection and assessment: foundations of lifelong learning
• Assessing personal strengths, skills, interests, and values
• Qualitative and quantitative methods for assessing and measuring occupational wellness
• How to promote self-reflection and self-assessment related to occupational wellness
• Helping clients apply their unique strengths in the workplace

Module 3: Personal Attributes that Increase Occupational Wellness
• Defining and enhancing personal attributes that increase occupational wellness
  o Work quality and productivity
  o Self-management
  o Communication skills (verbal and nonverbal, speaking and listening)
  o Setting and maintaining healthy boundaries (integrity and professionalism)
  o Initiative
Module 4: Job Crafting

- New concepts about the meaning of work and how to thrive on the job
- Principles of job crafting
- Techniques for job crafting to increase job satisfaction, engagement, resilience, and thriving
  - Altering the number, type, or nature of tasks
  - Changing interactions with others
  - Reframing and changing thoughts or beliefs about job
- Job crafting as a way to cope with job challenges and stress

Module 4: Coaching Practice

- Scope of coaching practice in the area of occupational wellness
  - The role of the coach
  - Issues to address
  - Responsibilities and limitations/boundaries
- Professional issues: rights of individuals being coached
  - Confidentiality
  - Informed consent
- Core skills applied to the work setting
  - Strategies to enhance positivity, optimism, focus on solutions and a preferred future
  - Stages of change process
  - Motivational interviewing
  - Interactive journaling
  - Tiny Habits
  - Exercise safety
- Assessment
  - Adherence and competence using established coaching models
  - Feedback-informed coaching using results of outcomes and session ratings
  - Problem solving to increase coaching effectiveness based on results of assessment

TOTAL STRUCTURED INSTRUCTION AND TRAINING, DOMAIN 6

50 hours

IN DEVELOPMENT FOR 2014

Domain 7: Disabilities

Total = 50 hours