

 **Whole Health Coaching** 

Welcome to Day 2

**Today's Invitation:
Change Seats!**

VETERANS HEALTH ADMINISTRATION

 **VIDEO** 

Patrick Crehan – Mindfulness Meditation
STAR Well-Kit

<https://youtu.be/ufbdtF5jbBs>

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Office of Patient-Centered Care and
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**Whole Health Coaching Process Model:
Stage I, Phase 2**

Values and Value Conflicts

 **Activity: What Are Your Values?** 

- What are your values?
- Which of these are priorities in your life right now?
- Which of these could you use more of?

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 **Two Kinds of Values** 

- **Ideal Values** - What is important to us in the ideal or long term
 - Examples: “God, Honor, Country”, Health, Family, Commitment
- **Operational Values** – What is important to us in the moment
 - Examples: Pleasurable experiences, food, drink, comfort
- Many times these are in conflict



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 **Example of Value Conflicts** 

- How many of you value your health?
- How many of you have done a behavior that is inconsistent with your value of health in the last 24 hours?
- What values were in conflict? (either ideal or operational)

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 **Value Conflicts for Veterans We Serve** 

- Choose a Veteran behavior that you have a hard time understanding:
 - Examples:
 - Don't take their meds
 - Refuse to stop drinking/smoking
 - Not interested in losing weight
 - Others?
- What might be going on for them in terms of value conflicts?

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 **Strategies for Dealing with Values Conflicts** 

- Choose one value over the other
- Compromise between/among the values
- Live with the values conflict
 - Live with values conflict in a stressful way
 - Live with the values conflict by simply observing
 - Wait to make a future decision

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 **Instructions for Small Group** 

1. Each speaker shares either a recent decision they made or are currently in the process of making. (2 minutes)
2. At the end of the two minutes each listener shares a value (or values) they heard that underlies the decision.
3. Rotate the speaker until everyone has had a chance to speak.

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Whole Health Life 

Whole Health Coaching

**Communication Skills:
Reflection and Inquiry**

 **Listening** 

Listening is a core coaching quality that allows us to do other skills well . . .

Reflecting

Questioning

 **Listening** 

“People are generally better persuaded by the reasons which they have themselves discovered than by those which have come into the mind of others.”

Blaise Pascal

 **Communication Skill: Reflection** 

Giving the client back his/her words, thoughts, feelings . . .

- Serves to let the client know that you have heard them
- Serves to clarify
- Builds rapport

 **Communication Skill: Reflection** 

Allows client to hear what he/she has said . . .

- Pause on important values and values-conflicts
- Deepens understanding and insight

 **Communication Skill: Reflection** 

Two types of reflections

- Simple
- Complex

 **Simple Reflections** 

Three Types of Simple Reflections

- Parroting
- Paraphrasing
- Summarizing

 **Simple Reflections: Parroting** 

- Using the client's same words
- Not a question
- Can be powerful

 **Simple Reflections: Parroting** 

Example

Client: "I need to make some changes but I don't know where to begin."

Coach: "You don't know where to begin."

 **Simple Reflections: Parroting** 

Example
Client: "I don't want to be here."
Coach: "You don't want to be here."

 **Simple Reflections: Parroting** 

Example
Client: "I'm afraid to try doing things differently."
Coach: "You're afraid...."

 **Simple Reflections: Paraphrasing** 

Restate what the client has said using other words



 **Simple Reflections: Paraphrasing** 

Example

Client: "I'm afraid to try doing things differently."

Coach: "You're not sure about trying something new."

 **Simple Reflections: Paraphrasing** 

Example

Client: "I have tried this, this, and this and haven't been successful."

Coach: "You've learned what doesn't work for you."

 **Simple Reflections: Summarizing** 

- Brings several key points from client together in one statement
- Can be parroted, paraphrased, or a combination
- Can be used as a transition or to end a session
- Remember Bottom-lining

 **Simple Reflections: Summarizing** 

Example

Client: "I'm afraid to try doing things differently."

Coach: "You're afraid to try something new and you're not sure where to begin."

 **Simple Reflections: Summarizing** 

Example

Coach: "You have brought a lot of thoughts, ideas, challenges to our conversation today. Which one is most important to address today?"

 **Practice: Reflecting Content** 

- Speaker: Discuss your 'role' in the workplace.
- Listener: As you listen, bring attention to the **content** of what is said.
 - You will have 30 seconds to reflect what you heard, using **their words** as much as possible.

 **Reflections — Nonverbal Cues** 

- 60-90% of communication is nonverbal



- Tone of voice, rate of speech, silences
- Facial expressions, eye contact, posture, gestures, energy, etc.

 **Practice: Reflecting Nonverbal Cues** 

- Speaker: Discuss your 'role' at home or within your family.
- Listener: As you listen, bring attention to **nonverbal** cues (facial expressions, gestures, energy, etc).
- You will have 30 seconds to reflect what you noticed, reflecting only the **nonverbal** cues

 **Complex Reflections** 

- Goes beyond what the client has said
- A guess or hunch at deeper meaning, inferred value, or emotion

 **Complex Reflections** 

Example
Client: "I'm not getting the service I think I deserve..."
Coach: "You have higher expectations of . . ."

 **Complex Reflections** 

Example
Client: "I'm not getting the service I think I deserve..."
Coach: "You're frustrated."

 **Complex Reflections** 

Double-sided Reflection

- Used when clients present two sides of an issue, having ambivalence, and/or value-conflicts
- Intent is to explore and honor both sides, pros & cons, benefits & costs
- End with the side toward change

 **Double-Sided Reflections** 

Example

Client: "I know exercise is important for me. But I just don't seem to be able to get off the couch."

Coach: "On the one hand spending time on the couch has appeal, and on the other hand exercise is important for you."

 **Practice: Complex Reflections** 

- **Speaker:** Talk about an area of your life where you're considering making a change.
- **Listener:** Bring attention to both verbal content and nonverbal cues.
 - You will have 30 seconds to reflect

 **Communication Skill: Inquiry** 

This important skill in Coaching comes from **other-focused listening** and involves two main types of questions . . .

- Closed-ended Questions
- Open-ended Questions

 **Closed-Ended Questions** 

- Easily answered with either Yes / No
- Generally do not lead to new insight / understanding
- Can be useful as a transition, e.g., “Are you ready to set a goal?”
- When asking permission, e.g., “May I offer you some resources?”

 **Open-Ended Questions** 

- Usually requires more than a yes / no, or one-word response
- Explore what is important or valued, often encourages person to talk and volunteer new information
- Generally leads to deeper insight and gets at what is not immediately obvious, i.e. “What?” “How?” “Tell me more about...”

 **Open-Ended Questions** 

- Comes out of other-focused listening and is present or future focused
- Reflects curiosity for the sake of the other (vs. for the sake of the coach)
- What about “Why” Questions?
- Examples?

 **Open-Ended Questions** 

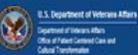
- Ask the question – remember to **“Bottom-line”**
- Wait for the answer - this may mean a moment of silence. Remember the **“Pause.”** You do not have to fill the space
- **Listen** to what is said

 **Demo #1 – Stage 1** 

Watch for Coaching Qualities and Communication Skills:

- **Listening**
- **Reflections** – Parroting, Paraphrase, Summary
- **Inquiry** – Open and Closed-ended questions
- Bottom-lining and the Pause

Notice how MAP, vision, values, and value conflicts are elicited by the Coach

Whole Health Coaching

Introduction to the Triad Practice

 **COACH ROLE** 

- Each person in the triad will have an opportunity to coach another member of the triad.
- Practice the coaching skills taught in the training
- Take risks, try something new, make mistakes, and learn from them.

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 **CLIENT ROLE** 

- Provide an authentic coaching opportunity for the coach and to experience the coaching process.
- Select an area that is personally relevant and that s/he is willing to share in triad practice.
- Bring an issue to coaching that is important to his/her personal mission and that can be discussed openly and honestly.

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 **OBSERVER ROLE** 

- Monitors time and when time is up.
- Takes detailed notes and provides feedback based on their observations.
- The focus of the feedback is on the coach's skills observed/not observed and the perceived effect of that particular skill use.

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 **Change** 

How do you understand resistance to change?

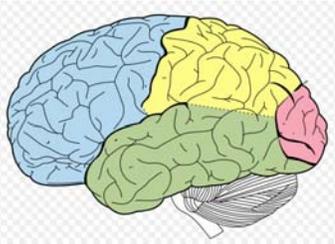
Habits are hardwired

There's a "right way" (or "usual way") to do things

One change has a ripple effect

 **Change** 

Habits are hard wired



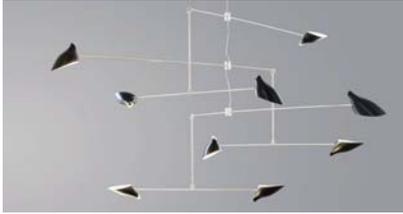
 **Change** 

There's a **right way** or *usual way* to do things . . .



Change Whole Health Life

- One change has a ripple effect



Stages of Change Whole Health Life

Pre-contemplation	Contemplation	Determination/Preparation	Action	Maintenance	Relapse/Recycle
	 Fence				
No; Denial	Maybe; Ambivalence	0-3 Months Yes, Let's Go; Motivated	3-6 Months Doing It; Go	Over 6 months Living It	Start Over; Ugh!!



WHICH STEP HAVE YOU REACHED TODAY?

 **References** 

Changing For Good (1994)
Prochaska, Norcross, DiClemente

Changing To Thrive (2016)
Prochaska & Prochaska

 **Stages of Change** 

Why are they important?

- Consider where someone is to know best how to help them
- Consider where someone is in stages of change when conducting the various stages

 **Stages of Change** 

What needs to happen for change to occur?

Small steps

- One manageable step at a time
- Build on successes (and minimize perceived failures)

 **Stages of Change** 

What needs to happen for change to occur?

Repetition

- Repeat as often as possible
- Establish new patterns / new neural pathways

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Whole Health Coaching

“I CAN’T! I WON’T!”

Working with People in Pre-contemplation

 **Background: “I Can’t, I Won’t”** 

These people are generally in pre-contemplation. They are not considering or entertaining change.

“I can’t” may be a matter of confidence or ability.

“I won’t” may be a matter of importance or desire. Generally, it is a combination of both.

 **Example: Clients Who Don't . . .** 

- Stop drinking alcohol
- Take their meds
- Engage in weight loss plan
- Fill in yours:
My client doesn't _____ .

 **Considerations** 

Perspective on Client:

- ✓ Client is 'non-compliant'
- ✓ Client 'makes excuses' or is lazy
- ✓ Client is operating under a different set of values or priorities than . . .
- ✓ Other perspectives? Think of your own. . .

 **Considerations** 

Perspective of Provider:

- ✓ Its my job to get them to comply or have the 'right' values
- ✓ If only I had the right tools and skills. . .
- ✓ "Dismiss" them . . .move on to someone else who is more willing to change
- ✓ How can I assist them in exploring their behaviors and values?
- ✓ Other perspectives. . .What is your own?

 **Strategies for Addressing “I Can’t, I Won’t”** Whole Health Life

Use a directive style. . .

- ✓ Tell them what they need to do.
- ✓ Tell them what will happen if they don’t.
- ✓ Educate them on the advantages of having the ‘right’ values and behaviors.

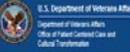
 **Strategies for Addressing “I Can’t, I Won’t”** Whole Health Life

Use a guiding style . . .

- ✓ Be curious with them.
- ✓ Explore with them, “Is this a matter of *can’t* or *won’t*?”

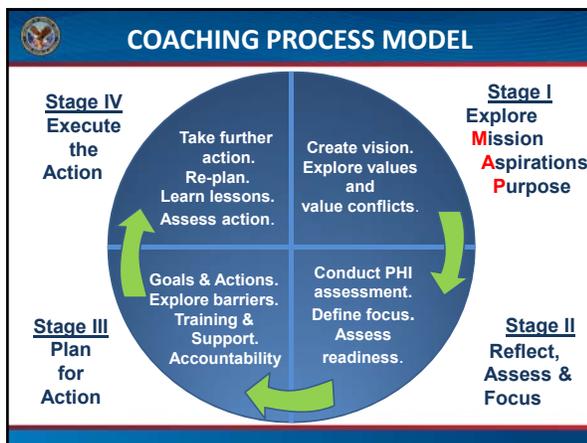
If “I can’t,” is it a matter of . . . ?	Use Importance Scaling Question: On a scale of . . .
Resources	Find out what may be needed in terms of resources and exploring/brainstorming how to get them.
Support	Exploring getting support alternatives
Confidence	Breaking the tasks down into smaller pieces.
Past Experience	Exploring what can be learned from past experiences.
Perspective	Exploring future self with and without changing behaviors. Listening for limiting perspectives.
Time & Energy	Reprioritizing time and energy.
Taking it all on at once	Contextualizing behavior in terms of Mission, Aspiration or Purpose (MAP) May be other strategies as well . . .

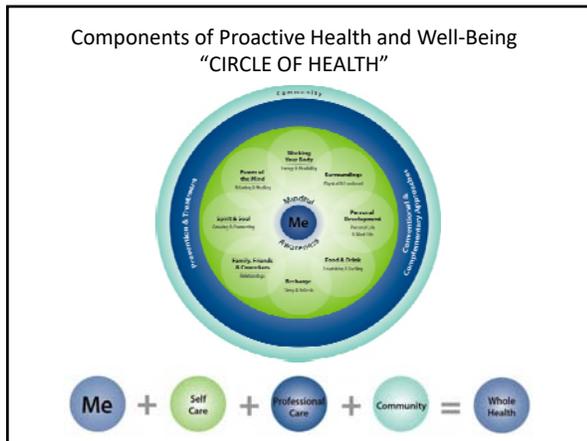
If "I won't," is it a matter of . . . ?	Use Importance Scaling Question: On a scale of . . .
It's not a priority	Exploration of values and what is important to the individual; Allow person to hear themselves by vocalizing their priorities
Long term vs. short term values	Explore future self with and without behavior change
"You can't make me."	Explore what they want to do in light of what others want them to do; Explore what would have to happen before they might want to change. Explore behavior in terms of MAP.
Other strategies?	


Whole Health Coaching Process:
Stage II, Phases 1-3

Assess, Focus & Readiness





VIDEO Whole Health Life

An Overview of the Circle of Health

<https://youtu.be/3Nf4yYoqNe0>

Complete the PHI Whole Health Life

- MyStory PHI pages 6-9
 - Where You Are and Where You'd Like to Be
 - Professional Care
 - Reflections
- The more you reflect, the more useful the experience
- You will have 15 minutes

MyStory Personal Health Inventory
Office of Patient-Centered Care and Cultural Transformation

Working with the Circle – 3 Steps Whole Health Life

1. Reflect and Assess (PHI)

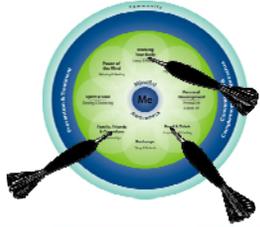
- Where are you?
- Why that number?
- Why not lower number?
- Where do you want to be?
- Why that number?

2. Define Focus

- Pick one area
- What would look different?
- How might you start?

3. Assess Readiness

- Importance
- Confidence



Step 1: Reflect and Assess Whole Health Life

- What was your experience filling out the PHI? What stood out?
- Start with the positive, strengths
 - What area are you doing well in?
 - How does this area reflect your strengths? Values?
- What's an area you're not doing as well?
 - What does # mean? Why not lower number? Where would you like it to be?
- If time, use additional exploration questions in manual

Step 2: Define Focus Whole Health Life

Define Focus

- What area would you like to focus/work on?
- What ideas do you have about where to start?

Step 3: Assess Readiness Whole Health Life

Importance RULER

"On a scale of 0-10, how important do you think it is to . . . ?"

0	1	2	3	4	5	6	7	8	9	10
Not at All Important		A Little		Somewhat		Very		Extremely Important		

On a scale from 0 to 10, how **important** is it for you to make a change in this area?

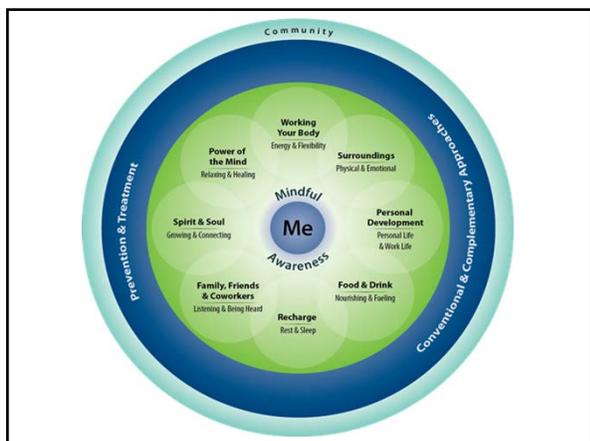
Step 3: Assess Readiness Whole Health Life

Confidence RULER

"On a scale of 0-10, how confident are you that you will be able to . . . ?"

0	1	2	3	4	5	6	7	8	9	10
Not at All Confident		A Little		Somewhat		Very		Extremely Confident		

On a scale from 0 to 10, how **confident** are you that you can make changes in this area?



 **Define Focus** 

Define Focus (PHI p.9)

- After Where You Are/Like to Be
- Out of all the areas on the circle we've discussed, and those we haven't, what area would you like to focus/work on? Where might you start?

 **Demo #2: Stage II** 

PHI Assessment

- Where you are / like to be?

Define Focus

- What area of Self-care?

Assess Readiness

- Importance?
- Confidence?
