

National Board for Health & Wellness Coaching

Continuing Education Course Approval Requirements



Prepared by the
National Board for Health & Wellness Coaching
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NBHC Continuing Education Summary

A photograph of three people sitting on a paved surface outdoors. A woman with long blonde hair and glasses is in the center, holding a smartphone and looking at it. To her left, a man with glasses is looking towards her. To her right, another woman with long brown hair is looking towards the woman with the phone. The background shows a building with a slatted facade.

Thank you for your interest in NBHC Continuing Education Course Approval! This guidebook outlines the requirements and standards for the NBHC Continuing Education Course Approval process. This process is intended for third-party training organizations interested in having course(s) or conferences approved by the National Board for Health & Wellness Coaching (NBHC) for the continuing education of National Board Certified Health and Wellness Coaches (NBC-HWCs).

Quality Continuing Education Courses are critical to the ongoing development of NBC-HWCs, for furthering professional practice as well as staying on top of current trends. NBHC Approved Continuing Education Courses are utilized by NBC-HWCs to review and enhance knowledge, practice, and skill in the professional practice of coaching with clients and patients. NBHC Approved Continuing Education Courses are considered supplemental and advanced education for those wishing to acquire new learning and for those renewing their NBC-HWC credential.

*NBHC Approved Continuing Education Courses do **not** meet eligibility requirements for individuals wishing to sit for the National Board Exam.*

Continuing Education Course Approval Process

1. Create an application account
2. Click **“Programs”** to select CE Course Approval application
3. Open application
4. Complete application for **each** course or conference, as applicable*
5. Submit application with review fee
6. Await review completion, typically 14-30 days
7. Receive notice of approval decision
8. Submit Approved Course fees**
9. Course listing information sent once payment received

**Selection of a conference application is appropriate when offering a formal event organized for the specific purpose of experts sharing knowledge on a specific topic. Conferences are typically multi-day and offer keynote speakers in addition to a subset of topics or seminars held under an umbrella theme.*

***Approved Course fees will be invoiced after approval notice is provided. Courses that are denied will not advance to this stage.*

Key Components of Continuing Education Course Approval

1. NBHWC reviews and approves **all** Continuing Education courses.
2. An application is required for **all** Continuing Education courses, including conferences. Up to 5 courses may be submitted on a single application.
3. Application fees (\$149 per application) must be paid prior to a review being conducted.
4. Application fees do not guarantee approval; application fees are not applied to annual Course Approval fees.
5. If a course is approved, including conferences, each course is assessed an annual Course Approval fee based on the value of CE for that course. CE values are verified during the review process.
6. Course Approval fees are due upon receipt of invoice after approval and must be paid prior to advertising approval.
7. Course Approval fees are assessed annually on the first day of the month approval was awarded. If an organization wishes to maintain approval of a course, Course Approval fees must be paid annually. Fees not paid on time are subject to a late fee. Fees that are not paid within 30 days of notice will be expired and removed from active Approved Course listings.
8. Conferences are not renewed annually as most are one-time offerings. You will need to reach out to the NBHWC office if your conference has an asynchronous option that you wish to renew after the initial year of approval. Renewals are subject to the annual Course Approval fee based on the CE value of the conference.

Application Fee	\$149/application (up to 5 courses per application)	
Course Approval Fee <i>per course</i>	1 CE Course	\$150/year
	2-11 CE Course	\$200/year
	12-24 CE Course	\$400/year
	25-36 CE Course	\$600/year
	37-48 CE Course	\$800/year
	49-60 CE Course	\$1000/year
	61+ CE Course	\$1500/year



NBHWC Continuing Education Course Requirements

Each course, submitted for NBHWC Course Approval must be able to demonstrate the following:

- The entirety of course content is within the NBHWC Scope of Practice (Appendix B) for NBC-HWCs.
- Course content is relevant to one or more of the following areas:

1. One or more of the core competency areas required for the practice of health and wellness coaching (Appendix A):

- a. Content Area 1: Coaching Structure
- b. Content Area 2: Coaching Process
- c. Content Area 3: Health and Wellness knowledge
- d. Content Area 4: Ethics and Legal considerations

2. Business development for a health and wellness coaching business, including:

- a. Health and Wellness Coach business development and design
- b. Health and Wellness Coach marketing
- c. Health and Wellness business systems (accounting, etc)

3. Health and wellness coaching subspecialties, including:

- a. Group coaching skills
- b. Digital coaching skills
- c. Coaching in healthcare
- d. Corporate coaching for wellness

4. Diversity, equity, and inclusion knowledge and practice topics in the field of health and wellness coaching

Each course submitted for NBHWC Course Approval must include the following:

1. Course Description

- a. May focus on theory, practice, or a combination of both.
- b. Must demonstrate that the course is instructor-facilitated or instructor-led.

2. Measurable Course Objectives

- a. Must have at least 2 objectives that align with the practice of health and wellness coaching.
- b. Must describe measurable behaviors the student will demonstrate or achieve upon completion.
 - i. Example: “Upon completion of this program, the coach will be able to:
 - a. Describe the latest coaching techniques to help clients with brainstorming;
 - b. Explore with clients their preferred means for monitoring progress;
 - c. Evaluate behavioral risk factors.”
 - ii. Note: Instructor goals are not course objectives.
 - iii. An application will be denied if measurable objectives are not provided.
- c. Must be included in brochures and marketing materials.

3. Description of the Course Relevance

- a. Must be applicable to the allowed areas of content within the NBC-HWC Scope of Practice (Appendix B).
- b. Must outline how the course benefits or enhances an NBC-HWC’s practice of health and wellness coaching.

4. Course Delivery

- a. Must describe the delivery and teaching method(s). Courses may be one of the following or a combination of both:
 - i. Synchronous:
 - a. Synchronous instruction is the delivery of instruction by a qualified faculty/instructor in a live format, including in-person, remote, virtual and telephonic delivery methods.
 - b. CE hours for synchronous instruction are calculated based on minute

per minute instruction; courses must be a minimum of 60 minutes. Courses above 60 minutes may reflect CEs accordingly (i.e. 90 minutes of instruction = 1.5 CE).

- c. Assessments of learning (i.e. test or quiz) are required in order for a participant to receive a certificate of completion. Assessments of learning must be well-documented and verifiable. Participants must pass the course, and assessment, in order to receive CE.
 - d. Student learning activities conducted outside of synchronous instruction (including independent reading, writing responses, reflection papers, etc.) do **not** count toward CEs for the course.
- ii. Asynchronous courses:
- a. Asynchronous instruction is instructor-facilitated delivery by a qualified faculty/instructor in a non-live format, including but not limited to pre-recorded lectures, recorded webinars, narrated PowerPoints, facilitated reviews of coaching demonstrations, etc.
 - b. CE hours for asynchronous instruction are calculated based on minute per minute instructor-facilitated delivery; courses must be a minimum of 60 minutes. Courses above 60 minutes may reflect CEs accordingly (i.e. 90 minutes of instruction = 1.5 CE).
 - c. Assessments of learning (i.e. test or quiz) are required in order for a participant to receive a certificate of completion. Assessments of learning must be well-documented and verifiable. Participants must pass the course, and assessment, in order to receive CE.
 - d. Student learning activities conducted outside of instructor-facilitated instruction (including independent reading, writing response, reflection papers, etc.) do **not** count toward CEs for the course.
- b. Must outline language, target audience, attendance policy, and location/date of training (as applicable).

5. Method of Evaluation

- a. Must describe method of assessing or evaluating the achievement of course objectives, including but not limited to: assessments, quizzes, tests, etc.
- b. Non-measurable items, including surveys of a course, will not be accepted as methods of evaluation.

6. Proposed CE hours

- a. Courses must be a minimum of 1 hour in length. Applications for courses that are **less than 1 hour** will be denied.
- b. Credit for partial completion of a course may **not** be provided.
- c. Courses must follow the NBHWC guidelines for CE calculation:
 - i. One instructional hour of 60 minutes is equal to 1 CE.
 - ii. One academic quarter credit is equal to 12.5 CE.
 - iii. One academic semester credit is equal to 15 CE.

7. Instructor Credentials and Qualifications

- a. Must submit a resume/CV that includes education and training background.
- b. Must describe coaching credentials and experience as applicable to the course. Descriptions should emphasize subject-matter expertise.
- c. If applying to deliver a course that requires specific training to be a designated trainer, evidence of the official training completion must be submitted.
- d. Instructor guidelines:
 - i. **Health and Wellness Coach Instructors** need to be knowledgeable, current and skillful in the subject matter as demonstrated by a baccalaureate or higher degree from an accredited college or university and/or validated experience in the subject matter, or experience in teaching similar subject material within the past two years.
 - ii. **Non-coach Instructors** must be currently licensed, degreed or certified in the area of expertise if appropriate and show evidence of specialized training in the subject area and have at least one year's experience within the past two years in the practice of teaching of the specialized area to be taught.

8. Certificate of Completion

- a. Must include:
 - i. NBC-HWC name
 - ii. Course title
 - iii. Issuing organization with signature of provider
 - iv. CE credits awarded
 - v. NBHWC Approved Course CE number
 - vi. Date issued



NBHWC Continuing Education Conference Requirements

Each conference submitted for NBHWC Course Approval must be able to demonstrate the following:

- **The conference content is within the NBHWC Scope of Practice (Appendix B) for NBC-HWCs.**
- **Conference content is relevant to one or more of the following areas:**
 1. One or more of the core competency areas required for the practice of health and wellness coaching (Appendix A):
 - a. Content Area 1: Coaching Structure
 - b. Content Area 2: Coaching Process
 - c. Content Area 3: Health and Wellness knowledge
 - d. Content Area 4: Ethics and Legal considerations
 2. Business development for a health and wellness coaching business, including:
 - a. Health and Wellness Coach business development and design
 - b. Health and Wellness Coach marketing
 - c. Health and Wellness business systems (accounting, etc)
 3. Health and wellness coaching subspecialties, including:
 - a. Group coaching skills
 - b. Digital coaching skills
 - c. Coaching in healthcare
 - d. Corporate coaching for wellness
 4. Diversity, equity, and inclusion knowledge and practice topics in the field of health and wellness coaching

Each conference submitted for NBHWC Course Approval must include the following:

1. Conference Description

- a. May focus on theory, practice, or a combination of both.
- b. Must demonstrate that the conference is instructor-facilitated or instructor-led.

2. Measurable Conference Objectives

- a. Must have at least 2 objectives that align with the practice of health and wellness coaching.
- b. Must describe measurable behaviors the student will demonstrate or achieve upon completion.
 - i. Example: “Upon completion of this program, the coach will be able to:
 - a. Describe the latest coaching techniques to help clients with brainstorming;
 - b. Explore with clients their preferred means for monitoring progress;
 - c. Evaluate behavioral risk factors.”
 - ii. Note: Instructor goals are not course objectives.
 - iii. An application will be denied if measurable objectives are not provided.
- c. Must be included in brochures and marketing materials.

3. Description of the Conference Relevance

- a. Must be applicable to the allowed areas of content within the NBC-HWC Scope of Practice (Appendix B).
- b. Must outline how the conference benefits or enhances an NBC-HWC’s practice of health and wellness coaching.

4. Conference Delivery

- a. Must describe the delivery and teaching method(s). Conferences may be one of the following or a combination of both:
 - i. Synchronous:
 - a. Synchronous instruction is the delivery of instruction by a qualified faculty/instructor in a live format, including in-person, remote, virtual and telephonic delivery methods.

- b. Student learning activities conducted outside of synchronous instruction (including independent reading, writing responses, reflection papers, etc.) do **not** count toward CEs for the course.
- ii. Asynchronous courses:
 - a. Asynchronous instruction is instructor-facilitated delivery by a qualified faculty/instructor in a non-live format, including but not limited to pre-recorded lectures, recorded webinars, narrated PowerPoints, facilitated reviews of coaching demonstrations, etc.
 - b. Student learning activities conducted outside of instructor-facilitated instruction (including independent reading, writing response, reflection papers, etc.) do **not** count toward CEs for the course.
- b. Must outline language, target audience, attendance policy, and location/date of training (as applicable).

5. Proposed CE hours

- a. CE hours for synchronous instruction are calculated based on minute per minute instruction.
- b. CE hours for asynchronous instruction are calculated based on minute per minute instructor-facilitated delivery using asynchronous methods.
- c. Multiple-day conferences may break the Approved Course into segments and issue CE for each segment completed. Segments should be a minimum of one hour in length and attendance must be tracked per segment.
- d. Alternatively, a multiple-day conferences may submit the application as one Approved Course provided that full, complete attendance is tracked and CE is awarded only on the successful completion of the entire conference.

7. Instructor Credentials and Qualifications

- a. Must submit resumes, CV's or bios (accepted for conferences only) that include education and training background.
- b. Must describe coaching credentials and experience as applicable to the conference. Descriptions should emphasize subject-matter expertise.

- c. Instructor guidelines:
 - i. **Health and Wellness Coach Instructors** need to be knowledgeable, current and skillful in the subject matter as demonstrated by a baccalaureate or higher degree from an accredited college or university and/or validated experience in the subject matter, or experience in teaching similar subject material within the past two years.
 - ii. **Non-coach Instructors** must be currently licensed, degreed or certified in the area of expertise if appropriate and show evidence of specialized training in the subject area and have at least one year's experience within the past two years in the practice of teaching of the specialized area to be taught.

8. Certificate of Completion

- a. Must include:
 - i. NBC-HWC name
 - ii. Course title
 - iii. Issuing organization with signature of provider
 - iv. CE credits awarded
 - v. NBHWC Approved Course CE number
 - vi. Date issued



NBHWC Continuing Education Code of Conduct

1. Continuing Education Course Content

- a. Approved Courses, including conferences, are considered supplemental and advanced education for the acquisition of new skills and learning as well as for renewing an NBC-HWC credential.
 - i. Approved Course content must be related to the practice of health and wellness coaching.
 - ii. The content of an Approved Course must be within the NBHWC Scope of Practice (Appendix B) for NBC-HWCs and related to one of the approved areas for the advancement of coaching skills.
 - iii. Approved Courses may be related to business development and growth of a health and wellness coaching business. However, general courses in business or business development not specific to the development and growth of a health and wellness coaching business are not considered acceptable course content for continuing education.
- b. Approved Courses, including conferences may **not** be utilized for eligibility to the NBHWC Board Exam.

2. Continuing Education Course Operations

- a. Application and Fees
 - i. Applications for Course Approval may remain open for completion for up to 6 months. Applications not completed within 6 months will be closed and deleted. A new application will be needed to complete the Course Approval process.
 - ii. Applications submitted with missing information or documentation will be denied. If denied, a new application may be submitted with the required documentation.
 - iii. Application fees for Course Approval are non-refundable and do not guarantee approval.
 - iv. Course Approval fees must be paid annually. Approved Courses may roll over from one year to the next without a new application provided that the course continues to be delivered as approved.

b. Operation Agreements

- i. By agreeing to provide an Approved Course, the applicant understands and agrees to comply with the NBHWC Continuing Education Code of Conduct.
- ii. By agreeing to provide an Approved Course, the applicant understands and agrees that all instruction will occur in accordance with NBHWC Scope of Practice (Appendix B) and the NBHWC Code of Ethics (Appendix C).
- iii. By agreeing to provide an Approved Course, the applicant understands and agrees to comply with all conditions, updates, and amendments made to Continuing Education requirements by NBHWC.
- iv. By agreeing to provide an Approved Course, the applicant understands and agrees to comply with all branding, logo, and [seal of approval guidelines](#) for NBHWC Approved Courses.
- v. By agreeing to provide an Approved Course, the applicant understands that an audit of Approved Course materials, including faculty and content, may be conducted at any time to ensure continued compliance with NBHWC Continuing Education requirements.
- vi. By agreeing to provide an Approved Course, the applicant agrees to cooperate with audits and inquiries from NBHWC regarding compliance with NBHWC Continuing Education requirements, including but not limited to review of files, course(s) content, faculty, student records, and interviews of students, faculty and staff.

c. Record Keeping

- i. By agreeing to provide an Approved Course, the applicant understands that documented student records are required to be maintained, including evaluations and attendance/participation for each Approved Course.
- ii. By agreeing to provide an Approved Course, the applicant agrees to notify NBHWC of all changes to the Approved Course(s) and/or the individual provider, organization, or owner(s) of the Approved Course(s), including but not limited to:
 1. New ownership or new organizational partner for the course(s)
 2. New contact person or contact information
 3. New delivery method or change in proposed CE
 4. New/updated course(s) name

NBHC Continuing Education Agreement

I (we) understand and agree that the application fees for NBHC Continuing Education Course Review are review fees and do not guarantee course approval. I (we) further understand that all fees for NBHC Continuing Education Course Approval are non-refundable.

I (we) understand that NBHC retains the right to increase fees without prior notice.

I (we) understand that all decisions and recommendations by NBHC are final. I (we) further agree to defend, indemnify and hold harmless NBHC in the event of any claim made against NBHC related to the possible approval of our course(s).

I (we) acknowledge that approval, if granted, will apply only to the course(s) listed in this application that are approved. It will not apply to any other program, course(s) or other educational opportunity operated by the organization or individual.

I (we) acknowledge that approval, if granted, will apply only to the course(s) operated and delivered by the individual, organization, or owner(s) listed in this application. It will not apply to and cannot be used by any franchisee, licensee, or secondary distributor of any kind or by any entity outside the individual, organization or owner(s) described in the application. Any such program, described above, will be considered a separate individual, organization, or owner(s) and must file separate applications for course approval.

I (we) agree to maintain compliance with all applicable copyright laws for course materials and content used for any and all locations in which the course(s) is delivered or provided.*

**If the course material and content is not uniquely developed by you as an individual provider, organization or owner, you must have evidence of authorization, i.e., licensing, etc. to use the materials/content. Documentation should include the signed statement below regarding compliance with copyright laws and ownership. If utilizing licensed content, upload a copy of the license agreement or statement from your licensor stating that you have a license to use the material.*

I (we) agree to honor and uphold the guidelines and agreements for NBHC Continuing Education and the NBHC Course Approval process. I (we) further agree that the NBHC has sole discretion to issue, amend or revoke the rules and regulations governing NBHC Course Approval. I (we) agree to abide by any decision of NBHC regarding the matters of approval, including changes in the guidelines and the revocation of approvals.

Appendix A: Health & Wellness Coach Competencies

1

Coaching Structure



1.1. Coach preparation prior to session

Overview

Prior to a coaching session, the coach reviews materials, eliminates distractions, and takes time to become mindful and present. The coach's state helps the client become calm and receptive, which fosters self-awareness and self-discovery.

Competencies

- 1.1.1. Coach is calm, present, and emotionally available
- 1.1.2. Review available client materials
- 1.1.3. Logistics (meeting location, conference call arrangements, etc.)

1.2. First session or before

Overview

The coach's aims for the initial session, or intake session, are to describe the coaching process, review information and assessments provided by the client, and determine if the client is an appropriate candidate for coaching. The coach clarifies roles and expectations; e.g., the coach will not diagnose or prescribe, nor give unsolicited advice; the client will self-determine his/her vision, goals, and action steps; and the client will be actively engaged in trying new behaviors as planned with the coach. Logistics and responsibilities (client vs. coach) are confirmed in a written Coaching Agreement.

Competencies

- 1.2.1. Set the climate/stage
 - 1.2.1.1. Establish rapport
 - 1.2.1.2. Gauge client's intentions for coaching/obtain information why coaching is sought
- 1.2.2. Determine if the individual is a candidate for health and wellness coaching and is an appropriate candidate for you specifically
- 1.2.3. Explain the coaching process
- 1.2.4. Establish the Coaching Agreement
 - 1.2.4.1. Guidelines and specific parameters of the coaching relationship (e.g., roles, logistics, fees, scheduling, inclusion of others if appropriate, confidentiality)
 - 1.2.4.2. Client vs. coach responsibilities, setting appropriate expectations
 - 1.2.4.3. Understand type of coaching relationship (i.e., short laser coaching session vs. long-term coaching relationship, telephonic, coaching apps, face-to-face, incentivized coaching)
- 1.2.5. Review assessments, if any used, and other data sources
- 1.2.6. Ensure appropriate time management of this and all sessions

1.3. Early (typically in the first, second or other early session)

Overview

In the initial stages of coaching, time is spent exploring the client's values, vision, purpose, and priorities. The coach refers to these in subsequent sessions to elicit motivation. During early sessions, the coach also spends adequate time exploring the client's understanding of his/her health and wellness, so goals are not set prematurely. Note that when choosing a focus (Competency 1.3.4), the coach is not the "expert" deciding what is most appropriate; instead, the client is empowered to select an area that feels important, motivating, or timely.

Competencies

- 1.3.1. Have client assess current state of his/her health and/or wellbeing
- 1.3.2. Explore the client's vision of his/her optimal health and/or wellbeing
- 1.3.3. Identify gaps between current state and client's desired lifestyle/outcomes
- 1.3.4. Explore and clarify client preference for priority areas of focus
- 1.3.5. Establish or refine client's specific long-term goals that lead toward desired outcomes
- 1.3.6. Establish or refine client's short-term SMART goals or action steps for what will be accomplished between sessions
- 1.3.7. Support the client in achieving the SMART goals or action steps including back-up plans
- 1.3.8. Establish client's preferences for learning and maintaining accountability

1.4. Routine Ongoing Sessions

Overview

A coaching program starts with an initial phase, followed by routine (ongoing) coaching sessions for a pre-determined period of weeks or months. At the opening of each session, the coach asks about the client's current state (e.g., energy, mood); throughout the session, the coach refers to shifts in the client's state. The coach facilitates review of previous action steps, uses other processes as appropriate (Content Area 2: Coaching Process), and supports the client in defining new action steps. The coach reflects the client's understanding, perspectives, and learning. At the end of each session, the client articulates new personal discoveries.

Competencies

- 1.4.1. Connect, have client self-assess state at beginning of each session
- 1.4.2. Check-in on prior session commitments/action steps
- 1.4.3. Invite client to select focus for session
- 1.4.4. Establish or refine client's short-term SMART goals or action steps for what will be accomplished between sessions
- 1.4.5. Articulate new action steps and adjust plan if needed, with self-monitoring
- 1.4.6. Discover and reflect client's learning, including "take-aways" from session
- 1.4.7. Communicate appreciation of client's work
- 1.4.8. Invite the client to provide feedback to the coach on the coaching provided

1.5. Coaching Program Termination

Overview

In the final coaching session, the coach's focus is on recognition of progress, learning, and closure. The client articulates successes and looks back at what s/he has learned. The coach helps the client to establish a plan for how s/he will maintain or continue progressing toward goals, with an emphasis on support and resources.

Competencies

- 1.5.1. Invite the client to reflect on, assess, and to articulate progress made, challenges experienced, lessons learned, and growth attained
- 1.5.2. Assist in developing sustainable pathway forward and/or maintenance/relapse prevention plan including available support and resources

Coaching Process

Coaching Relationship/ Communication/Techniques

2.1. Client-centered relationship

Overview

A coach facilitates behavior change by empowering the client to self-discover values, resources, and strategies that are individualized and meaningful. The client is the expert in navigating his/her own life, based upon personal preferences and past experiences. The coach provides the structure of the session and serves as a facilitative partner. The coach's primary role is NOT that of a content expert or educator who diagnoses, advises, or instructs the client on what to do.

Competencies

- 2.1.1. Client's agenda, needs, interests, and preferences (vs. coach's) drives the coaching relationship
- 2.1.2. Share coach's personal information/experience only when appropriate
- 2.1.3. Share information or recommendations only when specifically asked or given permission to do so or as otherwise required within scope of practice
- 2.1.4. Observe, name, and refer to client's beliefs and values
- 2.1.5. Convey the belief that client is resourceful, expert in own experience
- 2.1.6. Adjust approach according to client's health literacy

2.2. Trust & rapport

Overview

The coach establishes a positive and safe environment where the client feels accepted and supported. The client is better able to clarify values and access motivation when s/he feels safe to be honest and vulnerable. Importantly, the coach's confidence in the client's ability to learn, grow, and change supports the client's self-efficacy (Competency 2.12). The coach builds trust by attending to the client's emotions as well as words and behaviors; for example, when the coach senses conflict, discomfort or confusion, the coach acknowledges what is happening with curious interest.

Competencies

- 2.2.1. Demonstrate benevolence, honesty, sincerity, and authenticity
- 2.2.2. Convey unconditional positive regard
- 2.2.3. Follow through on commitments made to the client
- 2.2.4. Openly name and address discord/conflict between coach & client as it occurs and resolve in a timely manner

2.3. Active listening and presence

Overview

In addition to listening to verbal information shared by the client, the coach is attuned to nonverbal cues: expression, tone, emotions, and energy. The coach also notices relevant behaviors (or lack thereof). The coach uses mindful awareness to notice with curiosity and non judgment what is happening with the client, as well as what is happening within him/herself during coaching. Coach self-management is required when the coach finds him/herself "knowing" what the client needs. Finally, active listening involves using silence appropriately to "hold the space" and allowing clients time to reflect, process, and identify what emerges.

Competencies

- 2.3.1. Be attentive and mindful
- 2.3.2. Be open-minded
- 2.3.3. Be curious without assumptions
- 2.3.4. Pace communication to fit client's needs
- 2.3.5. Listen for what is not being said
- 2.3.6. Nonverbal communication
 - 2.3.6.1. Use silence appropriately
 - 2.3.6.2. Attend to and address nonverbal communication

2.4. Client emotions and energy

Overview

Emotions can generate insight and impact the brain's capacity for learning and change. The coach calls attention to positive shifts in the client's energy or emotion that may support healthy behavior change. The coach encourages the client to foster self-compassion and acceptance of emotions, since these qualities allow a more honest appraisal of one's behaviors and better self-care. Harsh self-criticism, on the other hand, tends to lead to avoidance and undermines insight.

Competencies

- 2.4.1. Attend to the client's state of being (mood/affect/presence)
- 2.4.2. Acknowledge client's emotions
- 2.4.3. Ask client to describe emotions when appropriate
- 2.4.4. Show empathy (resonance with)
- 2.4.5. Foster self-compassion

2.5. Reflections

Overview

Reflections convey active listening ("I'm hearing...") and give clients the powerful opportunity to witness the sound of their own words, perspectives, and beliefs. Nonjudgmental reflections engage the client and inspire learning. When the coach notices a discrepancy in the client's words, emotions, or behavior, a double-sided reflection may raise the client's awareness of the discrepancy. Similarly, when the coach uses an amplified reflection, the client may reconsider aspects of resistance when s/he hears the exaggerated reflection.

Competencies

- 2.5.1. Simple content reflections, paraphrasing
- 2.5.2. Double-sided & other types of reflections as indicated in Motivational Interviewing (e.g., amplified, feeling & meaning reflections)
- 2.5.3. Summaries
- 2.5.4. Recall previous information and experiences of client

2.6. Expand the conversation

Overview

The coach helps the client expand possibilities by asking curious questions that evoke deeper thinking and self-reflection. Open-ended questions (starting with “what” or “how”) encourage exploration, as well as highlight strengths, values, and opportunities for learning. The coach helps expand the client’s perspective and explores interconnections in the client’s life.

Competencies

- 2.6.1. Open-ended questions
- 2.6.2. Evocative (powerful) questions
- 2.6.3. Use of metaphors based on client language and interests
- 2.6.4. Brainstorm
- 2.6.5. Connect the focus to multiple dimensions of client’s life
- 2.6.6. Explore broader perspectives and inspire interest in new possibilities
- 2.6.7. Incorporate coach’s intuition

2.7. Focus and refocus the conversation

Overview

The coach facilitates a conversation that balances a client’s exploratory thinking (Competency 2.6) with action-oriented focus. After engaging the client in an exploration process, the techniques listed below help narrow the conversation toward decisions, goal-setting, and commitment – all of which support action.

Competencies

- 2.7.1. Closed-ended questions
- 2.7.2. Interrupt and re-direct
- 2.7.3. Bottom-lining
- 2.7.4. Scaling questions (using a scale of 0-10)
- 2.7.5. Ask the client to summarize the topic

Notes

The coach may be familiar with different terminology for Scaling questions (Competency 2.7.4), including “rulers” for readiness, importance, confidence, commitment, motivation, etc.

2.8. Assist client to evaluate and integrate health information

Overview

An objective of coaching is for the client to be well-informed of the status of his/her health and well-being. This process begins with identifying what the client understands. The coach then assists the client in finding and utilizing health and wellness resources, as well as accurately evaluating and integrating multiple sources of health information. These sources may include health care provider input, health & wellness assessments (including self-assessments), health risk assessments, basic biometrics, and appropriate referrals.

2.9. Goals and implementing action

Overview

The coach supports the client in choosing goals and action steps carefully, since small, gradual successes predict long-term engagement. The coach recognizes the client's readiness to change (Competency 2.9.1) and supports the client in designing appropriate action steps that move the client toward self-determined goals. Tracking progress over time is strongly linked to long-term success, so clients learn to track their own behavior, problem-solve, and observe the impact of their actions. When reviewing progress, the coach does not focus on the outcome, but rather emphasizes the client's effort and what is learned during both successes and setbacks.

Competencies

- 2.9.1. Transtheoretical Model (stages of change)
- 2.9.2. Specific, measurable, achievable/attainable, realistic/relevant, timely (SMART) goals
- 2.9.3. Patient activation and engagement models
- 2.9.4. Facilitate visualizing to elicit intrinsic motivation and goal direction
- 2.9.5. Commitment to action
- 2.9.6. Encourage behavioral stretches but also set a comfortable pace of learning and implementation of client's goal
- 2.9.7. Anticipate, plan for, and help client navigate challenges
- 2.9.8. Behavior tracking
- 2.9.9. Develop and manage accountability plan
- 2.9.10. Behavioral goals (also known as process goals or learning goals) vs. outcome goals

Notes

For 2.9.1, the coach applies the Transtheoretical Model by recognizing the client's stage of change based upon what s/he says. The coach should also know which techniques to apply in which stage.

For 2.9.10, the coach should recognize different types of goals, e.g., behavioral vs. outcome goals. Research suggests behavioral goals (also known as process goals or learning goals) may be more effective for complex lifestyle behaviors. For interested coaches, the following articles examine research on learning goals.

2.10. Client awareness, perspective shifts and insights

Overview

The coach reflects the client's views (Competency 2.5) and asks open-ended questions (Competency 2.6.1) to enhance the client's self-awareness and foster new perspectives. The coach may offer positive reframing—i.e., looking at things in an alternative, more positive way—to shift perspectives, since positive conversations are more likely to inspire motivation and forward progress. The coach also listens carefully for the client's self-talk—i.e., the way s/he talks to and about him/herself and judges his/her own behavior—and helps the client consider more positive self-talk.

Competencies

2.10.1. Reframe

2.10.2. Address self-defeating perceptions

2.10.3. Explore patterns related to client behaviors and decision tendencies (e.g., triggers, thoughts, emotions, physical sensations, and environment)

2.10.4. Awareness of self-talk and adjustment as appropriate

2.11. Client's freedom of choice, autonomy, and intrinsic motivation

Overview

Coaching psychology involves eliciting the client's intrinsic motivation, which is based upon the client's purpose, meaning, values, and preferences, and not external sources. The knowledge and experience of the client—not the coach—are the raw materials for coaching conversations that facilitate lasting change.

Competencies

- 2.11.1. Elicit the client's perspectives (including reasons for change, solutions, ideas, experiments, desires, reactions, desired outcomes, rewards/incentives)
- 2.11.2. Help client explore and articulate values, sense of meaning, and purpose
- 2.11.3. Help client envision his/her optimal health and/or wellbeing
- 2.11.4. Discuss and honor client's preferences for self-monitoring (without judgment), accountability, mode of connecting (email, text, phone call)
- 2.11.5. Self-determination theory
- 2.11.6. Motivational interviewing concepts

Notes (Competency 2.11 cont'd)

Self-determination theory (Competency 2.11.5) posits several universal needs for psychological health and well-being: autonomy (not feeling persuaded or controlled), competence (seeking confidence and mastery), and relatedness (being connected to others). The coach does not need to memorize minute details of the theory, such as how qualities interact, but should recognize how the qualities may be fostered during coaching.

2.12. Client self-efficacy

Overview

The coach helps the client develop self-efficacy, which is the client's belief in his/her ability to initiate change and achieve goals. The coaching process cultivates self-efficacy as the client better understands his/her needs, gains self-awareness and insight that supports behavior change, learns from setbacks, develops new resources, and finds new ways to navigate his/her environment.

Competencies

- 2.12.1. Explore ways to improve self-efficacy
- 2.12.2. Engage client in problem-solving
- 2.12.3. Engage client to evaluate options, considering both short and long-term benefits and consequences
- 2.12.4. Use client's awareness, learning, and tools to support the client to improve confidence in making informed decisions
- 2.12.5. Social Cognitive Theory (Social Learning Theory and Self-Efficacy Theory, including role models, mastery)

2.13. Improve support

Overview

In addition to providing support during client sessions, the coach assists the client in developing supportive relationships and identifying community resources. The coach helps the client to build a support system—relationships, tools, resources, environments—that enable ongoing success after the coaching program ends.

Competencies

- 2.13.1. Social
- 2.13.2. Structural/environmental

2.14. Client active experimentation and self-discovery

Overview

The coach establishes a trusting environment where the client feels safe to experiment with new ideas and new behaviors. The coach helps the client develop a growth mindset (Competency 2.14.1), the belief that the client's abilities are not fixed and can be improved continuously through experimentation and persistent efforts. Decisional balance (Competency 2.14.2) helps the client evaluate pros and cons of changing behavior, as well as pros and cons of not changing behavior.

Competencies

- 2.14.1. Growth mindset
- 2.14.2. Decisional balance

2.15. Increase positive psychological resources

Overview

The coach helps the client develop positive psychological resources by cultivating meaning, reflecting positive emotions, applying strengths, and affirming self-worth and efforts. Positive psychology has demonstrated the value of positive resources in improving creativity, open-mindedness, strategic thinking, resilience, connection, and health.

Competencies

Increase positive psychological resources by identifying, exploring, cultivating, and affirming:

- 2.15.1. Skills and abilities
- 2.15.2. Efforts, progress, successes, insights, and learning
- 2.15.3. Strengths
- 2.15.4. Client's being (value, qualities, and self-worth)
- 2.15.5. Positive emotions, gratitude, acceptance, and compassion
- 2.15.6. Optimism and resilience

Health & Wellness



By definition, health and wellness coaches are not content experts in health or disease; they do not diagnose or prescribe, unless a coach has credentials in another profession that allow expert advice to be given. However, it is important for coaches to have a solid working familiarity of current evidence-based recommendations provided by public health groups such as the Center for Disease Control and National Institutes of Health. Relevant guidelines and recommendations fall in the areas of health promotion, disease prevention, and lifestyle medicine.

The coach should be able to identify risk factors for chronic disease, commonly used biometric measures, and current lifestyle recommendations for optimizing health. An important focus for the coach is to recognize potential imminent danger and medical red flags, and to know when and how to refer to another health care professional.

Healthy lifestyle ideals, as in most areas of health care, are continually evolving. Recommendations change frequently for everything from interpretation of biometric markers (e.g., cholesterol, blood pressure) to evidence-based suggestions in lifestyle areas like nutrition and physical activity. Moreover, guidelines vary by organization. The coach stays abreast of trends, controversies, and evolutions in the lifestyle fields, since these will impact client choices and the resources they need.

Since the coaching relationship is client-centered, the coach's focus is determining what the client already knows, needs, and wishes to learn about. The coach then supports the client in obtaining credible health and wellness information. General knowledge about healthy living is required for the coach to facilitate the various Competencys that arise in a coaching conversation.

The [Centers for Disease Control](#) (CDC) has a robust, evidence-based website that offers useful information for the coach and the client. Another valuable resource is [Healthy People 2020](#), a program of nationwide health-promotion and disease-prevention goals set by the U.S. Department of Health and Human Services (HHS). Finally, the [American College of Lifestyle Medicine](#) provides peer-reviewed resources.

3.1. Health, health promotion and disease prevention, applying a whole person perspective

Overview

Health and wellness involve more than the absence of disease. Wellness, as a concept, includes all aspects of physical, psychological, spiritual and social well-being; it is multi-dimensional and holistic. Wellness also involves a self-directed and evolving process to achieve full potential. Many coach training programs emphasize this whole-person perspective using a “wheel” or other framework that recognizes multiple dimensions of one’s health.

3.1.1. Wellness and well-being concepts (including the Travis Illness-Wellness Continuum)

Topics for review:

- Health-related quality of life & well-being
- Well-being concepts
- Travis Illness-Wellness Continuum

3.2. Chronic Disease

Coach competencies include enhancing client self-management, identifying risk factors, understanding measurement standards and screening procedures, knowing basic information regarding prevention and behavioral treatment, and recognizing imminent danger (medical red flags).

The coach often works with clients living with chronic medical conditions, as well those who are not yet ill, but are increasing their risk through unhealthy behavior. The coach should have a basic understanding of common chronic diseases and conditions including hypertension, diabetes, obesity, cardiovascular disease, high cholesterol, and a constellation of symptoms known as metabolic syndrome, which together place individuals at higher risk for heart disease, diabetes, stroke, and some cancers. Inflammation is one of the key pathophysiological processes that underlie most chronic diseases, and a rudimentary understanding of the role of inflammation in disease should also be recognized.

- **Hypertension/prehypertension, blood pressure**

Topics for review:

- Blood pressure basics
 - » High blood pressure signs and symptoms
 - » Effects of high blood pressure
 - » Measuring blood pressure
 - » Controlling blood pressure
- Risk factors for hypertension, including:
 - » Medical conditions
 - » Behaviors
 - » Family history and other characteristics

- **Diabetes/pre-diabetes, fasting glucose, hemoglobin A1c**

Topics for review:

- About diabetes
- Who's at risk
- Symptoms
- Prediabetes
- Type 2 diabetes
- Getting tested

- **Overweight & obesity, BMI, waist circumference**

Topics for review:

- Obesity causes and consequences
- Assessing Body Mass Index (BMI) and Waist Circumference
- Abdominal obesity and your health

- **Cardiovascular disease (mainly heart disease and stroke)**

Topics for review:

- Heart disease
 - » Coronary artery disease basics
 - » Heart attack signs and symptoms
 - » Risk factors for heart disease, including:
 - * Medical conditions
 - * Behavior
 - * Family history and other characteristics

- Stroke
 - » Stroke basics
 - » Stroke signs and symptoms
 - » Risk factors for stroke, including:
 - * Medical conditions
 - * Behavior
 - * Family history and other characteristics

- **Metabolic syndrome, arthritis and inflammation**

Topics for review:

- Metabolic syndrome
- Arthritis
 - » Osteoarthritis
 - » Rheumatoid arthritis
 - » Risk factors for arthritis
 - » Fibromyalgia

- **Inflammation**

- The coach recognizes that chronic inflammation is a common factor in most chronic diseases. Whereas acute inflammation is a healthy response to injury, chronic inflammation causes problems over time. Common and well-studied conditions associated with chronic inflammation include coronary artery disease, diabetes, obesity, arthritis, cancer, and Alzheimer Disease. Dietary interventions (see anti-inflammatory diet in Competency 3.3), moderate exercise, and effective stress management are thought to be central in preventing inflammatory disease.
- Inflammation and heart disease

- **Lipid abnormalities, lipid panels**

Topics for review:

- LDL and HDL Cholesterol
- Getting your cholesterol checked
- Knowing your risk
 - » Health conditions, Behaviors, Family History, Familial Hypercholesterolemia, Age & Gender

3.3. Health behaviors, social and behavioral risk factors

3.3.1. Healthy weight and 3.3.2. Optimal nutrition & hydration

Guidelines around healthy weight, nutrition, and hydration are among the most controversial topics in lifestyle medicine. Thus, in this area, it is particularly important for the coach to follow a client-centered approach, beginning with what the client understands, needs, and wants, and engaging in a partnership that allows the client to access new information and ultimately create new habits.

The coach should be familiar with recommendations and resources currently offered by leading government and health agencies. There are differing professional opinions, and many controversies exist that are not always readily apparent within conventional expertise. For example, the CDC recommendation for dietary guidelines (MyPlate) has been contested by some experts in nutrition, and alternative recommendations have been put forth, such as Harvard's Healthy Eating Plate. In this circumstance, the coach should be familiar with both popular resources, even though they may be contradictory.

It is widely agreed that there is no "one size fits all" diet, and everything from ethnicity, family history, lifestyle, age, sex, body habitus, overall health, and environment needs to be considered by and for any given individual. How these individual considerations are made varies widely between experts. The coach and client have the unique opportunity to explore together what works best for the client.

The coach understands the basics of a healthy diet, which include knowledge of unprocessed (or minimally processed) whole foods, lean proteins, adequate fiber, healthy fats, and the recommended intake of fruits and vegetables. Regarding water intake, the coach recognizes the role of hydration in health, and weight balance in particular, since people sometimes confuse the body's signals for hunger and thirst.

Topics for review:

- Nutrition and weight status
- MyPlate
- Healthy eating plate
- Common evidence-based nutritional interventions for prevalent medical conditions
 - » The coach recognizes that professional organizations recommend nutrition guidelines for specific medical conditions, and may choose to refer clients to these links. The coach has a conceptual understanding of the diet (e.g., DASH diet for hypertension, reduced sodium intake); however, the coach is not required to memorize specifics of each diet.

- * Hypertension - DASH
- * Diabetes
- * Anti-inflammatory diets
 - Arthritis
 - Foods that fight inflammation
- * Weight loss
 - Because there is no “one size fits all” approach to weight-loss, the coach utilizes coaching skills that engage the client to choose a strategy that fits his/her preferences and lifestyle.
- Hydration
 - » Water and nutrition

3.3.3. Physical activity, sedentary lifestyle

Regular physical activity reduces the risk of many chronic diseases, including heart disease, high blood pressure, diabetes, cancer, and depression. The coach must be familiar with current recommendations for healthy adult exercise according to HHS guidelines. Given the prevalence of mobile devices and wearable technologies that track physical activity, the coach should also be able to support the client with an awareness of evidence-based methods used to track physical activity.

Topics for review:

- Overview and benefits of physical activity
- Physical activity guidelines
 - » Note: the coach should know Key Guidelines for 1) Adults, 2) Older Adults, 3) Women During Pregnancy and the Postpartum Period, and 4) Adults with Chronic Health Conditions and Adults with Disabilities (not Preschool-Aged Children or Adolescents).
- U.S. Department of Human Services (HHS) physical activity guidelines for Americans
- ACSM position stand on individual exercise programs
 - » Note: The ACSM position stand is a compendium of findings and provides a rich resource; however, the details of the position stand are beyond the scope of what the coach is expected to know.
- Physical activity tracking: mobile devices and wearable technology
 - » With the rise of wearable technology and mobile devices that track physical activity, the coach should be familiar with the use of tracking devices and mobile apps.

3.3.4. Sleep

According to the CDC, insufficient sleep is a public health epidemic. Like nutrition and physical activity, sleep is a critical determinant of health and well-being. Adequate sleep is necessary for proper immune, endocrine, and neurological functioning. Lack of sleep is also linked to traffic accidents, work errors, and decreased productivity. The coach should have a basic understanding of sleep and the important role it plays in overall health and well-being, as well as familiarity with common recommendations for healthy sleep hygiene.

Topics for review:

- Overview of sleep health
- Common sleep disorders
- Sleep and chronic disease
- Sleep hygiene

3.3.5. Stress & emotional wellness

In addition to understanding major biological risk factors associated with chronic conditions, the coach should understand the most common psychosocial risk factors for chronic disease, including unmanaged stress, depression, and social isolation. The coach should recognize symptoms of depression and know how to refer for treatment. The coach also appreciates the impact of social and environmental stressors. Social determinants for health-related issues include socioeconomic status, transportation, housing, access to services, discrimination by social grouping (e.g., race, gender, or class), and social or work-related stressors.

Stress management is an inevitable topic for coaching. Stress can be both positive and negative; the coach recognizes negative stress and leverages positive stress. It is important to understand the basics of the physiology of stress, the relaxation response, and common techniques for stress management. Most importantly, the coach understands the wide variance in coping mechanisms that work for individual clients.

The coach should also be comfortable supporting the client's resilience, positive mental health, well-being, and flourishing. Being emotionally well involves more than just managing stress. It also requires being attentive to thoughts, feelings, and behaviors, whether they are positive or negative. The knowledgeable coach recognizes the crucial role of self-awareness in growth and maturation and has tools to support personal development. In addition, the coach should understand the role of healthy relationships with self and others. Finally, the coach understands that a sense of meaning or purpose is linked to positive health outcomes and emphasizes the importance of relating health issues to life purpose and values.

Topics for review:

- Mental health
 - » What is mental health?
 - » Depression
 - » Anxiety disorders
- Social determinants of health
- Social isolation
- How stress affects the body
- Coping with stress
- Relaxation and meditation
 - » Relaxation techniques for health
 - » Meditation

3.3.6. Avoiding tobacco use

Tobacco use is one of the largest preventable lifestyle habits associated with death and chronic disease. It is linked to multiple cancers, cardiovascular disease, reproductive issues, and chronic illnesses like type 2 diabetes and rheumatoid arthritis. The product landscape of tobacco use is constantly changing, and the coach recognizes trends such as the recent popularity of e-cigarettes. The coach should be familiar with the support services available for clients who wish to stop smoking or using tobacco.

Topics for review:

- Overview of tobacco use
- Smoking health effects
- Quitting Smoking

3.3.7. Moderate or no alcohol use, substance abuse

Substance abuse refers to the consumption of mind- and behavior-altering substances that have negative behavioral and health outcomes. It is important to note that counseling on substance abuse is beyond the scope of practice for the coach. However, self-medicating behaviors are common in clients, particularly those with chronic pain, so the coach should recognize red flags. It is important to know when and how to make appropriate professional referrals for clients whose active risk behaviors exceed the scope and practice of coaching, such as alcohol abuse, prescription painkiller abuse, and other substance abuse.

Topics for review:

- Overview of substance abuse
- Alcohol (CDC.gov)
- Prescription opioids (CDC.gov)

Ethics/Legal

4.1. Professional Conduct

Overview

Health and wellness coaches commit to the same level of professionalism as all health care providers. This includes ongoing development of skills, staying up-to-date with relevant research, and following recertification procedures established by NBHWC. In addition, coaches aim to “walk the talk” and model healthy behavior skills, particularly prioritizing self-care.

Competencies

- 4.1.1. Continue ongoing training and development as a health coach including emerging research
- 4.1.2. Engage in personal health and well-being, including physical and emotional health and potential burnout
- 4.1.3. Engage in self-awareness practices, including emotional self-regulation

4.2. Ethics

Overview

The NBHWC Code of Ethics provides guidelines, accountability, and standards for health and wellness coaches. The coach maintains and promotes excellence in the field of coaching by ensuring ethical treatment of each individual client. The NBHWC Code of Ethics also notes the importance of ongoing professional development as well as “walking the talk” of health through lifestyle behaviors, self-care, and self-awareness, including self-monitoring of emotions and triggers. The NBHWC Health & Wellness Coach Scope of Practice describes the role of the coach and clarifies the handling of dual professional roles (Competency 4.2.7)

Competencies (Competency 4.2 cont'd)

- 4.2.1. Confidentiality
- 4.2.2. Working within an organization; serving sponsor and client
- 4.2.3. Conflicts of interest
- 4.2.4. Demonstrate dignity and respect for all people, honor diversity, cultural sensitivity
- 4.2.5. True and accurate representation of your training, experience, expertise, credentials
- 4.2.6. Provide attribution for contributions of others, including copyrighted material
- 4.2.7. Scope of practice and refer when necessary
 - 4.2.7.1. Balancing multiple roles (nurse/coach, physician/coach, therapist/coach, etc.) and dual relationships
 - 4.2.7.2. Maintaining professional boundaries
 - 4.2.7.3. Consent and approval from relevant parties
- 4.2.8. Self-monitoring and management of triggers and boundaries
- 4.2.9. Seek consultation or supervision as needed

4.3. Legal

Overview

The coach ensures that client records are protected (Competency 4.3.1) as part of maintaining confidentiality. The coach also remains aware of the pertinent regulations given their practice setting. For example, all who practice in health care settings must abide by HIPAA; therefore, at a minimum, the coach must be well-versed in basic HIPAA requirements. Other legal requirements will vary depending on the state in which the coach practices and other credentials the coach holds (e.g., licensure in health or allied health professions).

Competencies

- 4.3.1. Maintain security and privacy of client records
- 4.3.2. Awareness of relevant federal and state regulations that affect health coaching

Appendix B: NBHWC Scope Of Practice

Health and wellness coaches engage individuals and groups in evidence-based, client-centered processes that facilitate and empower clients to develop and achieve self-determined, health and wellness goals. Coaches assist clients to use their own insight, personal strengths, and resources to set goals, commit to action steps, and establish accountability in building an envisioned healthy lifestyle. In this way, coaches empower clients through encouragement, exploration, the mobilization of internal strengths, the identification and utilization of external resources, and through the support and development of self-management strategies for executing sustainable, healthy lifestyle changes.

The coach's role is one of accountability partner, not director, in navigating behavioral change and exploring opportunities for growth and development. As facilitators of the behavior change process, health and wellness coaches support clients to achieve self-directed goals and behavioral changes consistent with the client's vision for health and wellbeing, informed by any treatment plans prescribed by the client's professional healthcare team. When appropriate, health and wellness coaches may offer evidence-based resources or information from nationally recognized authorities. Additionally, when working under the license of a qualified medical or allied health professional (e.g., physician, psychologist, physical therapist), health and wellness coaches may support the implementation of those professionals' treatment plans. On their own, however, coaches themselves do not diagnose, interpret medical data, prescribe or de-prescribe, recommend supplements, provide nutrition consultation or create meal plans, provide exercise prescription or instruction, consult and advise, or provide psychological therapeutic interventions* or treatment.

Health and wellness coaches who hold additional, active, national or state-recognized credentials may provide expert support and guidance within their professional scope for that credential; however, disclosure of the professional role and potential conflicts of interest must be discussed with the client and documented from the onset of a professional relationship. Health and wellness coaches should only function in dual roles with conscious intention and by clearly outlining both professional capacities, through discussion and documentation, as well as defining the boundaries of each. Further, health and wellness coaches must be well-versed in the professional capacity of each role, including the limits of knowledge and skills respective to each role, understand and demonstrate how to work within the limits of each professional role,

and comply with all guiding ethical principles to ensure client interests and needs are at the forefront of the coach-client partnership.

**Therapeutic interventions are methods by which relevant, qualified professionals attempt remediation of a diagnosed medical or mental health condition, guided by the indications and contraindications noted for the intervention itself. Examples of therapeutic interventions provided in the context of treatment include, but are not limited to: Cognitive Behavioral Therapy (CBT), Eye Movement Desensitization and Reprocessing (EMDR), Solution Focused Therapy, Dialectical Behavioral Therapy (DBT), Internal Family Systems Therapy, and other such therapies and treatments relevant to the treatment of diagnosed medical and mental health conditions.*

Approved 12.13.2022

Appendix C: NBHWC Code of Ethics

The National Board for Health & Wellness Coaching (NBHWC) is committed to maintaining and promoting excellence in coaching. Therefore, NBHWC expects all National Board Certified Health & Wellness Coaches to adhere to the elements and principles of ethical conduct and to integrate NBHWC Health and Wellness Coach Competencies effectively in their work.

The NBHWC Code of Ethics is designed to provide appropriate guidelines, accountability and enforceable standards of conduct for all NBC-HWC credential holders. In line with the NBHWC definition of coaching, all NBC-HWC credential holders commit to abiding by the following Code of Ethics.

Part One: Definitions

- **Health and Wellness Coaching:** Health and Wellness Coaches partner with clients seeking self-directed, lasting changes, aligned with their values, which promote health and wellness and, thereby, enhance well-being. In the course of their work, health and wellness coaches display unconditional positive regard for their clients and a belief in their capacity for change, honoring that each client is an expert on his or her life, while ensuring that all interactions are respectful and non-judgmental.
- **NBHWC Coach:** A health and wellness coach who has passed the Health & Wellness Coach Certifying Examination and is board-certified by NBHWC; and who thereby agrees to practice within the NBHWC Health and Wellness Coach Scope of Practice and Competencies and who pledges accountability to the NBHWC Code of Ethics.
- **Professional Coaching Relationship:** A professional coaching relationship exists when coaching includes an agreement (including contracts) that defines the rights, roles and responsibilities of each party.
- **Roles within Coaching Relationships:** In order to clarify roles in the coaching relationship, it is often necessary to distinguish between the client and the sponsor. In most cases, the client and sponsor are the same person and are therefore jointly referred to as the client. For purposes of identification, however, NBHWC defines these roles as follows:
 - **Client:** The “client” is the person(s) being coached. (May also be referred to as “coachee,” “patient,” or “member” in some settings.)
 - **Sponsor:** The “sponsor” is the entity (including its representatives) paying for and/or arranging for coaching services to be provided. In all cases, coaching agreements should

clearly establish the rights, roles and responsibilities for both the client and sponsor if the client and sponsor are different people.

- **Student:** The “student” is someone enrolled in an NBHWC-approved coach training program or working with an NBHWC-approved faculty member or coach mentor, in order to learn the coaching process or to develop and enhance coaching skills.
- **Faculty:** An individual who provides primary instruction/training to students enrolled in an NBHWC-approved coach training program.
- **Mentor:** An individual who conducts coaching skills performance audits and provides feedback to coaching students/coaches for the purpose of developing and enhancing health and wellness coaching skills.
- **Conflict of Interest:** A situation in which a coach has a private or personal interest sufficient to appear to influence the objective of his or her professional role or responsibilities as a coach, faculty, or mentor.

Part Two: The NBHWC Standards of Ethical Conduct

Section 1: Professional Conduct at Large

– As a health and wellness coach, I:

- Conduct myself in accordance with the NBHWC Code of Ethics in all health and wellness coaching interactions, including coach training and coach mentoring activities.
- Commit to take the appropriate action with the coach, faculty member, or coach mentor and/or will contact NBHWC to address any ethics violation or possible breach as soon as I become aware of such a situation, whether it involves me or others.
- Communicate and create awareness in others, including organizations, employees, sponsors, coaches, clients, potential clients, and others who might need to be informed of the responsibilities established by this Code of Ethics.
- Refrain from unlawful discrimination in occupational activities, including age, race, gender orientation, ethnicity, sexual orientation, religion, national origin or disability; and consistently demonstrate dignity and respect in all professional relationships.
- Make verbal and written statements that are true and accurate about what I offer as a health and wellness coach, the coaching profession, and NBHWC.
- Accurately identify my coaching qualifications, expertise, experience, training, certifications and NBHWC credentials.
- Recognize and honor the efforts and contributions of others and only claim ownership of my own material. I understand that violating this standard may leave me subject to legal remedy by a third party.
- Strive at all times to recognize any personal issues that may impair, conflict with or interfere with my coaching performance or my professional coaching relationships. I will promptly seek the relevant professional assistance and determine the action to be taken, including

whether it is appropriate to suspend or terminate my coaching relationship(s), whenever the facts and circumstances necessitate.

- Recognize that the Code of Ethics applies to my relationship with coaching clients, students, mentees, sponsors, and other coaches.
- Conduct and report research with competence, honesty and within recognized scientific standards and applicable subject guidelines. Research I participate in will be carried out with the informed consent of those participating and the approval of all regulatory bodies as indicated. Such research efforts will be performed in a manner that complies with the applicable laws and regulations of the jurisdictions involved.
- Maintain, store and dispose of any records, including electronic files and communications, created during my coaching engagements in a manner that promotes confidentiality, security and privacy and complies with any applicable laws, regulations and agreements.
- Use NBC-HWC credentialed coach contact information, such as email addresses and telephone numbers, only in the manner and to the extent authorized by the NBHWC.

Section 2: Conflicts of Interest

- As a health and wellness coach, I

- Seek to be conscious of any conflict or potential conflict of interest, openly disclose any such conflict to all stakeholders involved, and offer to remove myself when a conflict arises.
- Clarify roles for health and wellness coaches, set boundaries and review with sponsors and stakeholders conflicts of interest that may emerge between coaching and other role functions. Disclose to all clients the exact nature of the coach's role within the company or organization, and the limitations and expectations thereof.
- Disclose to my client and the sponsor(s) all anticipated compensation from third parties that I may receive for referrals of clients or pay to receive clients. Compensation from the sale of products or non-coaching services to clients must be disclosed fully before coaching begins. The quality of coaching services and the quantity of coaching sessions as defined in the coaching agreement must not be dependent in any way upon the purchase of any additional products or services by the client.
- Honor an equitable coach/client relationship, regardless of the form of compensation.

Section 3: Professional Conduct with Clients

- As a health and wellness coach, I

- Ethically speak what I know to be true to clients, prospective clients or sponsors about the potential value of the coaching process or of me as a coach.
- Make clear to any employer/sponsor and to the client what activities fall within the scope of practice for an NBC-HWC, as well as the outcomes that can be reasonably expected.
- Adhere to all ethical standards of practice for respective health care licensures and credentials.

- Carefully explain and strive to ensure that, prior to or at the initial meeting, my coaching client and sponsor(s) understand the nature of health and wellness coaching, the nature and limits of confidentiality, financial arrangements, and any other terms of the coaching agreement.
- Have a clear coaching service agreement with my clients and sponsor(s) before beginning the coaching relationship and honor this agreement. The agreement shall include the roles, responsibilities and rights of all parties involved.
- Uphold responsibility for being aware of and setting clear, appropriate and culturally sensitive boundaries that govern interactions, physical or otherwise, I may have with my clients or sponsor(s).
- Avoid any sexual or romantic relationship with current clients, sponsor(s), students, mentees or supervisees. Further, I will be alert to the possibility of any potential sexual intimacy among the parties, including my support staff and/or assistants and will take the appropriate action to address the issue or cancel the engagement in order to provide a safe environment overall.
- Respect the client's right to terminate the coaching relationship at any point during the process, subject to the provisions of the agreement. I shall remain alert to indications that there is a shift in the value received from the coaching relationship.
- Strive to protect the health, safety, and welfare of the client. I will encourage the client or sponsor to make a change if I believe the client or sponsor would be better served by another coach or by another resource, and I will support my client seeking the services of other professionals when deemed necessary or appropriate.

Section 4: Confidentiality/Privacy

– As a health and wellness coach, I

- Maintain the strictest levels of confidentiality with all client and sponsor information unless release is required by law, specifically adhering to all applicable state and federal regulations.
- Have a clear agreement about how coaching information will be exchanged among coach, client and sponsor, including mobile health/electronic health data collected by the client.
- Have a clear agreement when acting as a coach, coach mentor, coaching supervisor or trainer, with both client and sponsor, student, mentee, or supervisee about the conditions under which confidentiality may not be maintained (e.g., illegal activity, pursuant to valid court order or subpoena; imminent or likely risk of danger to self or to others; etc.) and make sure both client and sponsor, student, mentee, or supervisee voluntarily and knowingly agree in writing to that limit of confidentiality. Where I reasonably believe that because one of the above circumstances is applicable, I may need to inform appropriate authorities.
- Require all those who work with me in support of my clients to adhere to the NBHWC Code of Ethics Confidentiality and Privacy Standards as well as any other sections of the Code of Ethics that might be applicable.

Section 5: Continuing Development

- As a health and wellness coach, I

- Commit to the need for continued and ongoing development of my professional skills.

Part Three: The NBHWC Pledge of Ethics:

As a health and wellness coach, I acknowledge and agree to honor my ethical and legal obligations to my coaching clients and sponsors, colleagues, and to the public at large. I pledge to comply with the NBHWC Code of Ethics and to practice these standards with those whom I coach, teach, mentor or supervise.

Adapted with permission from the ICF Code of ethics. Available at www.coachfederation.org/about/ethics. Accessed July 26, 2016. Adopted by the NBHWC Board of Directors February 1, 2017.

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Contact Information

Email: info@nbhwc.org

Phone: 866-535-7929 ext 1