



The NBHWC Content Outline Update Crosswalk

2024





The NBHWC Content Outline Update Crosswalk is a tool designed to facilitate the transition from the previous content outline to the updated 2024 version. This tool provides a side-by-side comparison of the previous and new content areas, highlighting any changes, additions, or deletions.

To use the crosswalk effectively, simply locate the relevant section of the old outline on the right side and refer to the corresponding section on the left, where you'll find the updated information. This visual representation makes it easy to identify shifts in content focus, ensuring that all stakeholders can quickly adapt to the revised requirements.

Key:

Orange box: Brand new competencies

Orange text: Clarification or additional information to a previous competency



The NBHWC Content Outline Update Crosswalk

RBP Coaching Competencies 2024

CURRENT Coaching Competencies

1. Coaching Presence, Relationships, and Sessions

1.1. Coach Presence

1.1.1. Create a mindful, calm, receptive state; recognize presence is foundational for growth and learning

1.1.2. Demonstrate unconditional positive regard

1.1.3. Demonstrate an inclusive, culturally-affirming manner that invites all aspects of client's identities

1.1.4. Demonstrate empathy and compassion

1.1.5. Convey belief that client is resourceful, autonomous, and expert in client's lived experience

1.1.6. Remain open-minded, non-judgmental, and curious

1.1.7. Invite client feedback

1.1.8. Demonstrate integrity and follow through on commitments to client

1.1.9. Attune to discord or breaches of trust and rapport (including microaggressions)

1.1.1. Coach is calm, present, and emotionally available

2.2.2. Convey unconditional positive regard

2.2.1. Demonstrate benevolence, honesty, sincerity, and authenticity

2.4.4. Show empathy (resonance with)

2.1.5. Convey the belief that client is resourceful, expert in own experience

2.3.2. Be open-minded

2.3.3. Be curious without assumptions

1.4.8. Invite the client to provide feedback to the coach on the coaching provided

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

1.2. Coach self-awareness and self-regulation

1.2.1. Attend to own emotions, thoughts, beliefs, values, and non-verbal cues

1.2.2. Recognize that all biases influence coaching relationship

1.2.2.1. Be aware of impact of diversity-related history, marginalization, and trauma

1.2.2.2. Recognize power and privilege imbalances

1.2.3.3. Practice cultural humility

1.2.2.4. Be aware of own social identities, power, privileges, unconscious bias, and personal triggers

1.2.3. Refrain from directing, advising, or problem-solving

1.2.4. Manage own emotions and judgment about client

1.2.4.1. Accurately perceive and understand impact of words and actions; self-monitor verbal and nonverbal communication

1.2.5. Welcome client's full emotional experience

2.3.1. Be attentive and mindful

4.2.8. Self-monitoring and management of triggers and boundaries

1.3. Build growth-enhancing relationship

1.3.1. Cultivate coaching partnership

1.3.1.1. Foster an open, welcoming, and inclusive relationship

1.3.1.2. Practice culturally appropriate communication

1.3.1.3. Facilitate collaborative approach

1.3.1.4. Observe, name, and refer to client's beliefs, values, successes, and strengths

1.2.1 Set the climate/stage

2.1.4. Observe, name, and refer to client's beliefs and values

1.3.1.5. Ensure that client's agenda, needs, interests, literacy, pacing, and preferences (vs. coach's) drive coaching relationship

1.3.2. Build trust, rapport, and psychological safety

1.3.2.1. Establish rapport; connect with client by helping them feel seen and heard

1.3.2.2. Respond appropriately to nonverbal cues relevant to the unique individual and their culture

1.3.2.3. Ask client preferred identifiers (e.g., name, nickname, pronouns, etc.)

1.3.2.4. Respect client's personal boundaries

1.3.2.5. When given permission, briefly share coach's personal information/experience only when helpful to client

1.3.2.6. Notice and attempt to neutralize any power dynamics

1.3.2.7. Attempt to repair discord or breaches of trust and rapport (including microaggressions)

2.1.1. Client's agenda, needs, interests, and preferences (vs. coach's) drives the coaching relationship

2.3.4. Pace communication to fit client's needs

1.2.1.1 Establish rapport

2.4.1. Attend to the client's state of being (mood/affect/presence)

2.15.4 Client's being (values, qualities, and self-worth)

2.3.6.2. Attend to and address nonverbal communication

4.2.7.2. Maintaining professional boundaries

2.1.2. Share coach's personal information/experience only when appropriate

2.2.4. Openly name and address discord/conflict between coach & client as it occurs and resolve in a

1.4. Session preparation

1.4.1. Review available client materials

1.4.1.1. Use strengths-based mindset, focusing on the person, not the problem

1.4.1.2. Recognize limitations of client materials in relation to cultural norms, family histories, significant life events, etc.

1.4.2. Establish logistics (meeting modality [virtual, in-person], time, etc.) and appropriate onboarding

1.1.2. Review available client materials

1.2.5. Review assessments, if any used, and other data sources

1.1.3 Logistics (meeting location, conference call arrangements, etc.)

1.4.2.1. Make arrangements with client's needs in mind, including a safe and confidential environment

1.4.2.2. Examine potential access issues for clients from different backgrounds, life experiences, and needs

1.4.2.3. Eliminate distractions for coach and client

1.4.3. Engage in mindful or grounding practice prior to session

1.1.1. Coach is calm, present, and emotionally available

1.5. Early sessions

1.5.1. Establish coaching foundation

1.5.1.1. Explain coaching process and partnership using plain language

1.5.1.2. Explore client's intentions, motivations, and needs for coaching

1.5.1.3. Determine if coaching is appropriate at this time

1.5.1.4. Mutually determine if coach and client are good fit

1.5.1.5. Establish feedback mechanisms

1.5.2. Co-create coaching agreement

1.5.2.1. Set guidelines (e.g., logistics, fees, scheduling, inclusion of others if appropriate, duration)

1.5.2.2. Establish format of coaching (e.g., laser coaching, long-term coaching, virtual, in-person, and incentivized coaching)

1.2.3. Explain the coaching process

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

1.2.4. 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)

1.2.4.3. Understand type of coaching relationship (i.e., short laser coaching session vs. long-term coaching relationship, telephonic, coaching apps, face-to-face, incentivized coaching)

1.5.2.3. Discuss roles, responsibilities, and expectations

1.5.2.4. Review confidentiality and privacy policies and practices

1.5.2.5. Address accessibility issues

1.5.2.6. Ensure client understanding of agreement

1.5.3. Explore vision and current vs. desired states

1.5.3.1. Have client assess current state of health and wellbeing

1.5.3.2. Explore client's vision of desired health and wellbeing

1.5.3.3. Identify gaps between current state and desired state

1.5.4. Establish focus and/or long-term goals that lead to desired outcomes

1.2.4.2. Client vs. coach responsibilities, setting appropriate expectations

4.2.7.3. Consent and approval from relevant parties

1.3.4. Explore and clarify client preference for priority areas of focus

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

1.3.5. Establish or refine client's specific long-term goals that lead toward desired outcomes

1.6. Follow-up sessions

1.6.1. Reconnect with client, encouraging client to reflect on how they are showing up at beginning of each session

1.6.2. Invite client to share success and learning related to action steps or commitments made in previous sessions when appropriate

1.6.3. Establish and/or re-establish the "what" by inviting client to select focus for session

1.6.4. Identify and/or re-identify the "why" by exploring what's most important to client

1.6.5. Partner and support client to outline the "how" by identifying and planning action steps or commitments aligned with client's vision and values

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

1.6.6. Include below components of session closing

1.6.6.1. Invite client to summarize next steps

1.6.6.2. Invite client to reflect on learning and insights, including “takeaways”

1.6.6.3. Affirm and acknowledge client

1.6.6.4. Set next coach/client interaction

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

1.7. Ending coaching agreements

1.7.1. Invite client to reflect on and articulate progress made, lessons learned, and growth attained

1.7.2. Invite client to reflect on how successes will be celebrated

1.7.3. Affirm client’s progress and learning

1.7.4. Assist in developing sustainable pathway forward to maintain progress, supporting ending of relationship in a way that honors client’s experience

1.7.5. Explore and summarize support and resources for client’s continued progress, and share resources with permission, as appropriate

1.5.1. Invite the client to reflect on, assess, and to articulate progress made, challenges experienced, lessons learned, and growth attained

2.15.2. Increase positive psychological resources: Efforts, progress, successes, insights, and learning

1.5.2. Assist in developing sustainable pathway forward and/or maintenance/relapse prevention plan including available support and resources

2. Theories, Models, and Approaches to Behavior Change

2.1. Neuroplasticity including basics of healthy habit formation

2.2. Transtheoretical Model (stages of change)

2.3. Motivational Interviewing 4.0

2.3.1. The spirit of motivational interviewing

2.3.2. The four tasks

2.3.3. Change talk vs. sustain talk

2.3.4. Guiding style

2.4. Goal-Setting Theories and Approaches

2.5. Self-Efficacy Theory (Social Cognitive Theory, Social Learning Theory)

2.6. Self-Determination Theory

2.7. Growth vs. Fixed Mindset

2.8. Positive Psychology Approach

2.9. Appreciative Inquiry

2.9.1. Transtheoretical Model (stages of change)

2.11.6. Motivational interviewing concepts

2.9.2. Specific, measurable, achievable/attainable, realistic/relevant, timely (SMART) goals

2.12.5. Social Cognitive Theory (Social Learning Theory and Self-Efficacy Theory, including role models, mastery)

2.11.5. Self-determination theory

2.14.1. Growth mindset

3. Skills, Tools, and Strategies

3.1. Facilitation tools

3.1.1. Wellness exploration (e.g., Wellness Wheel, Personal Health Inventory)

3.1.2. Health information (e.g., healthcare provider recommendations, biometric and health risk assessment results)

2.8. Assist client to evaluate and integrate health information

3.1.3. Values exploration (e.g., surveys)

3.1.4. Strengths-based exploration (e.g., surveys)

3.1.5. Wellness/wellbeing visioning

3.1.6. Brainstorming

3.1.7. Scaling questions (e.g., using a 0-10 scale)

3.1.8. Reflective and self-awareness practices (e.g., journaling, meditation, guided imagery, visualization, mindfulness, etc.)

3.1.9. Digital health platforms, apps and technology

2.9.4. Facilitate visualizing to elicit intrinsic motivation and goal direction

2.6.4. Brainstorm

2.7.4. Scaling questions (using a scale of 0-10)

3.2. Core communication skills

3.2.1. Employ active listening

3.2.1.1. Listen with curiosity for what is said and how it is said

3.2.1.2. Observe nonverbal communication

3.2.1.2.1. Notice what is not being said

3.2.1.2.2. Attend to and address nonverbal signals

3.2.2. Use silence and pauses appropriately

3.2.3. Use open- vs. closed-ended questions

3.2.4. Affirm/acknowledge/validate

3.2.5. Reflect

3.2.5.1. Use simple content reflections, paraphrase

3.2.5.2. Complex reflections (e.g., double-sided, metaphors, meaning, and emotion)

2.3. Active Listening and presence

2.3.3. Be curious without assumptions

2.3.6. Nonverbal communication

2.3.5. Listen for what is not being said

2.3.6.2. Attend to and address nonverbal communication

2.3.6.1. Use silence appropriately

2.6.1. Open-ended questions

2.7.1. Closed-ended questions

2.15.2. Increase positive psychological resources: Efforts, progress, successes, insights, and learning

2.5 Reflections

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)

3.2.6. Summarize

3.2.7. Utilize core components of Motivational Interviewing

3.2.7.1. Cultivate change talk

3.2.7.2. Soften sustain talk

3.2.7.3. Respond to discord

3.2.7.4. Use ask-offer-ask

2.5.3. Summaries

2.11.6. Motivational interviewing concepts

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

3.3.1. Elicit client's perspectives (including reasons for change, solutions, ideas, experiments, desires, reactions, desired outcomes, rewards/incentives, **cultural identity, and lived experiences**)

3.3.2. Help client explore and articulate values, sense of meaning, and purpose

3.3.3. Help client envision their optimal health and/or wellbeing

3.3.4. Discuss and honor without judgment client's preferences for self-monitoring, accountability, and mode of connecting (email, text, phone call, in-person)

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

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

2.9.4. Facilitate visualizing to elicit intrinsic motivation and goal direction

2.11.4. Discuss and honor client's preferences for self-monitoring (without judgment), accountability, mode of connecting (email, text, phone call)

3.4. Client awareness, perspective shifts and insights

3.4.1. Elicit awareness of self-talk and adjustment as appropriate

3.4.2. Acknowledge self-defeating thoughts, perceptions, and limiting beliefs

2.10. Client awareness, perspective shifts and insights

2.10.4. Awareness of self-talk and adjustment as appropriate

2.10.2. Address self-defeating perceptions

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

3.4.4. Invite and support client to engage in reframing and shifting perspective

3.4.5. Invite and amplify client insights

3.4.6. Support client to recognize, name, and describe own emotions

3.4.7. Encourage client to foster self-compassion and self-acceptance

3.4.8. Draw out client's positive emotions (e.g., joy, contentment, serenity, peace, and gratitude)

3.4.9. Nurture optimism, persistence, and resilience

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

2.10.1. Reframe

2.11.1. Elicit the client's perspectives (including reasons for change, solutions, ideas, experiments, desires, reactions, desired outcomes, rewards/incentives)

2.15.2. Increase positive psychological resources: Efforts, progress, successes, insights, and learning

2.4.2. Acknowledge client's emotions

2.4.3. Ask client to describe emotions when appropriate

2.4.5. Foster self-compassion

2.15.5. Positive emotions, gratitude, acceptance, and compassion

2.15.6. Optimism and resilience

3.5. Client self-efficacy

3.5.1. Assist client to identify positive role models for behavior change (e.g., vicarious learning experiences for self-regulation, acceptance, and active engagement)

3.5.2. Offer affirmations to support client's positive efforts, qualities, and skills

3.5.3. Invite client to articulate strengths and abilities, **and plan how to leverage them**

2.12. Client self-efficacy

2.12.1. Explore ways to improve self-efficacy

2.12.5 Social Cognitive Theory (Social Learning Theory and Self-Efficacy Theory, including role models, mastery)

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

3.5.4. Support client to build self-efficacy through taking achievable and realistic steps

3.5.5. Support client to build confidence through reflection, self-assessment, and naming of learnings and progress made

3.5.6. Recognize and highlight client's identity and lived experience as integral to making informed decisions

3.5.7. Invite client to problem-solve and evaluate options,

2.9.6. Encourage behavioral stretches but also set a comfortable pace of learning and implementation of client's goal

2.9.2. The "A" and "R" in some forms of SMART action steps

2.12.4. Use client's awareness, learning, and tools to support the client to improve confidence in making informed decisions

2.15.2. Increase positive psychological resources: Efforts, progress, successes, insights, and learning

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

3.6. Expanding the conversation

3.6.1. Use open-ended/appreciative questions

3.6.2. Use evocative (powerful) questions

3.6.3. Use metaphors based on client language and interests

3.6.4. Connect the focus to multiple dimensions of client's life

3.6.5. Explore broader perspectives and inspire interest in new possibilities

3.6.6. Recall previous information and experiences of client

2.6 Expand the conversation

2.6.1. Open-ended questions

2.6.2. Evocative (powerful) questions

2.6.3. Use of metaphors based on client language and interests

2.6.5. Connect the focus to multiple dimensions of client's life

2.6.6. Explore broader perspectives and inspire interest in new possibilities

2.5.4. Recall previous information and experiences of client

3.7. Narrowing the conversation

3.7.1. Skillfully interrupt and redirect

3.7.2. Use bottom-lining

3.7.3. Ask client to summarize

3.7. Focus and refocus the conversation

2.7.2. Interrupt and redirect

2.7.3. Bottom-lining

2.7.5. Ask the client to summarize the topic

3.8. Improving support

3.8.1. Assist client to identify and build supportive relationships (social, familial, professional)

3.8.2. Assist client to identify and build community resources and networks

3.8.3. Assist client to identify and develop structural and environmental supports

3.8.4. Recognize non-modifiable systemic barriers to inform supports

3.8.5. Consider how health literacy and numeracy impact client's health and wellbeing and adjust coaching approach as needed

2.13. Improve Support

2.13.1. Social

2.13.2. Structural/environmental

2.1.6. Adjust approach according to client's health literacy

3.9. Defining goals and implementing action

3.9.1. Help client establish and refine specific long-term goals that lead toward desired outcomes and/or vision

3.9.2. Help client identify short-term goals or action plans

2.13. Improve Support

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

3.9.2.1. Align with client's pace, interests, needs and values

3.9.2.2. Ensure that goals or action plans are specific, realistic, and time-bound (e.g., SMART framework)

3.9.2.3. Consider thought (cognitive goals) or mindset changes as well as tangible actions

3.9.3. Translate outcome goals into behavioral goals

3.9.4. Guide client to commit to action

3.9.5. Identify and leverage types of support to facilitate and sustain change

3.9.6. Anticipate and plan for potential barriers or challenges

3.9.7. Establish client's own methods of accountability and tracking progress, moving toward self-management

3.9.8. Incorporate cultural considerations into goals or action plans

3.9.9. Adapt goals or action plans to address the impact of social determinants of health

2.9. Goals and implementing action

2.9.2. Specific, measurable, achievable/attainable, realistic/relevant, timely (SMART) goals

2.9.10. Behavioral goals (also known as process goals or learning goals) vs. outcome goals

2.9.5. Commitment to action

1.3.7. Support the client in achieving the SMART goals or action steps including back-up plans

2.13 Improve Support

2.13.1. Social

2.13.2. Structural/environmental

2.9.7. Anticipate, plan for, and help client navigate challenges

1.3.8. Establish client's preferences for learning and maintaining accountability

2.9.8. Behavior tracking

2.9.9. Develop and manage accountability plan

3.10. Ensure appropriate time management

1.2.6. Ensure appropriate time management of this and all sessions

4. Professional Practice

4.1. Engage in ongoing development

4.1.1. Obtain continuing education that advances professional practice as a health and wellness coach

4.1.2. Seek mentorship and collaboration

4.1.3. Develop ongoing reflective practices to deepen awareness and cultural humility

4.1.4. Monitor own physical and emotional health and seek help when necessary

4.1.5. Cultivate personal health and wellbeing practices

4.1.6. Build and maintain professional network for referrals, collaboration, and support

4.1.7. Stay up-to-date on relevant emerging research

4.1.8. Demonstrate basic understanding of how to locate and evaluate appropriate resources based on robust evidence-based science (e.g., Centers for Disease Control, peer-reviewed journals, and National Institutes of Health)

4.1.1. Continue ongoing training and development as a health coach including emerging research

4.1.3. Engage in self-awareness practices, including emotional self-regulation

4.1.2. Engage in personal health and well-being, including physical and emotional health and potential burnout

4.1.1. Continue ongoing training and development as a health coach including emerging research

4.2. Know and abide by current NBHWC Health & Wellness Coach Scope of Practice

4.2.1. Educate or share information within NBHWC Scope of Practice when given permission or specifically asked

4.2.2. Refer clients as appropriate (i.e., for imminent danger, trauma treatment, mental health treatment, or other professional healthcare)

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

4.2.7. Scope of practice and refer when necessary

4.3. Know and abide by current NBHWC Code of Ethics

4.3.1. Maintain and uphold client privacy

4.3.2. Identify and address conflicts of interest (e.g., disclosure for sale of products)

4.3.3. Honor diversity, demonstrate dignity and respect for all people, practice cultural humility

4.3.4. Maintain clear professional boundaries with clients

4.3.5. Provide true and accurate representation of training, experience, expertise, and credentials

4.3.6. Provide attribution for contributions of others, including copyrighted material

4.3.7. Understand the ethical implications and the responsible use of digital health technology and platforms

4.3.8. Disclose the use of artificial intelligence (AI) or emerging technologies as appropriate if used

4.3.9. Seek consultation or supervision as needed

4.2.1. Confidentiality

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
4.2.7.1. Balancing multiple roles (nurse/coach, physician/coach, therapist/coach, etc.) and dual relationships

4.2.6. Provide attribution for contributions of others, including copyrighted material

4.2.9. Seek consultation or supervision as needed

4.4. Legal

4.4.1. Maintain confidentiality of data

4.4.1.1. Gather documented consent from client to collect and store data

4.4.1.2. Provide data security through protected access and controls (e.g., two-factor authentication, secure servers, and password-protected wifi)

4.2.1. Confidentiality

4.3.1. Maintain security and privacy of client records

4.4.1.3. Ensure data privacy and confidentiality and storage through password-protected platforms, secured devices, or physical files

4.4.1.4. Know secure vs. non-secure sites and platforms

4.4.1.5. If using generative AI, do not involve client data

4.4.2. Adhere to relevant laws and regulations (e.g., reporting laws, HIPAA) that affect health coaching

4.3.2. Awareness of relevant federal and state regulations that affect health coaching

5. Health and Wellness

5.1. Health promotion and wellness, embracing a whole person perspective

5.1.1. Describe health, wellness, and wellbeing (e.g., whole person health, high-level wellness, illness-wellness continuum)

5.1.2. Describe dimensions of wellness and their interconnectedness (e.g., social, physical, intellectual, occupational, financial, emotional, environmental, and spiritual)

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

3.1. Health, health promotion and disease prevention, applying a whole person perspective
3.1.1. Wellness and well-being concepts (including the Travis Illness-Wellness Continuum)

5.2. Components of proactive health and wellbeing

5.2.1. Physical activity, exercise, and movement

5.2.1.1. General physical activity guidelines per the U.S. Surgeon General/U.S. Department of Health and Human Services for adults, older adults, and adults with chronic conditions or disabilities (not including children, adolescents, pregnant, or postpartum women)

5.2.1.2. Activity tracking options, including mobile devices and wearable technology

3.3. Health behaviors, social and behavioral risk factors

3.3.3. Physical activity, sedentary lifestyle

5.2.2. Food and water

5.2.2.1. Healthy diet basics, including knowledge and recommendations regarding unprocessed and minimally processed whole foods, whole grains, lean proteins, adequate fiber, healthy fats, and fruits and vegetables (i.e., MyPlate and Harvard Healthy Eating Plate)

5.2.2.2. Awareness of evidence-based nutritional interventions commonly recommended for chronic health conditions (i.e., DASH diet, ADA Plate Method, Mediterranean Diet, and anti-inflammatory diet)

5.2.2.3. Water intake basics, including the role of hydration in health

5.2.3. Surroundings and environment

5.2.3.1. Surroundings include where we live, work, learn, play and worship—both indoors and out

5.2.3.2. Understand that surroundings influence behavior and can have positive or negative impact

5.2.3.3. Understand how to help clients make incremental changes to improve environment

5.2.4. Spirituality, meaning, and purpose

5.2.4.1. Influence of connecting with something greater than oneself, and how this can provide a sense of meaning, purpose, direction, peace, or comfort

5.2.4.2. Understand the importance of exploring the personal meaning under desires and needs; what gives an individual meaning and purpose

5.2.5. Personal and professional development (growing and learning)

5.2.5.1. Impact of investing in personal and professional growth

3.3.2. Optimal nutrition & hydration

5.2.6. Sleep, rest

5.2.6.1. Basic sleep needs

5.2.6.2. Awareness of impact of sleep and rest on optimal functioning and healing, including in chronic conditions and diseases

5.2.6.3. Sleep hygiene

5.2.7. Stress management, recovery, and recharge

5.2.7.1. Impact of stress on the body and mind

5.2.7.2. The role of unmanaged stress in the development and/or exacerbation of most chronic diseases

5.2.7.3. Awareness of evidence-based strategies to reduce stress and engage the relaxation response/parasympathetic nervous system (e.g., breathing techniques, biofeedback, meditation, yoga, qi gong, and massage therapy)

5.2.7.4. Recharging involves activities that replenish mental and physical energy

5.2.8. Mind-body connection

5.2.8.1. Changes in the mind impact the body, and vice-versa

5.2.8.2. Impact of thoughts, beliefs and mindset on behavior as well as physical and mental health

5.2.8.3. Impact of mindset shifts on moving toward health and wellbeing, even in the presence of disease or disability

5.2.8.4. Impact of mind-body techniques and practices to support behavior change, personal growth, and overall health and wellbeing

5.2.9. Relationships and communication

5.2.9.1. Influence and role of relationships and communication in health and wellbeing

3.3.4. Sleep

3.3.5. Stress & emotional wellness

5.2.9.2. Impact of relationships and communication in shaping how clients perceive themselves and the world around them

5.2.10. Community and belonging

5.2.10.1. Influence of community on health and wellbeing, including connection to others, environments, social systems, culture, history, geography, etc.

5.2.10.2. Impact of living within the context of community, and that love, acceptance, belonging, and support from others are essential needs

5.2.10.3. Role of social isolation and loneliness as a risk factor for all-cause mortality

5.3. Supporting prevention and self-management of chronic disease

5.3.1. Key knowledge for coaching in prevention and self-management of common chronic conditions and diseases

5.3.1.1. Cardiovascular disease (heart disease and stroke)

5.3.1.1.1. Definitions and descriptions of conditions

5.3.1.1.2. Red flags indicating need for immediate attention (i.e., FAST, signs of heart attack)

5.3.1.1.3. Modifiable risk factors

5.3.1.2. Hypertension/prehypertension

5.3.1.2.1. Definitions and descriptions of conditions

5.3.1.2.2. Systolic blood pressure and diastolic blood pressure, normal ranges, and red flags indicating need for immediate attention

5.3.1.2.3. Modifiable risk factors

3.2. Chronic disease

3.2. Cardiovascular disease (mainly heart disease and stroke)

3.2. Hypertension/prehypertension, blood pressure

5.3.1.3. Lipid abnormalities, including high cholesterol

5.3.1.3.1. Definitions and descriptions of conditions

5.3.1.3.2. Lipid profile, including LDL, HDL, total cholesterol, triglycerides, and normal ranges

5.3.1.3.3. Modifiable risk factors

5.3.1.4. Diabetes/prediabetes

5.3.1.4.1. Definitions and descriptions of conditions

5.3.1.4.2. Fasting blood sugar, A1C, normal ranges, and red flags indicating need for immediate attention

5.3.1.4.3. Modifiable risk factors

5.3.1.5. Metabolic syndrome

5.3.1.5.1. Definition, criteria, and description of condition

5.3.1.5.2. Modifiable risk factors

5.3.1.6. Obesity

5.3.1.6.1. Definition and description of condition

5.3.1.6.2. BMI (and its limitations), waist circumference, and normal ranges

5.3.1.6.3. Modifiable risk factors

5.3.1.7. Dementia and Alzheimer's disease

5.3.1.7.1. Definitions and descriptions of conditions

5.3.1.7.2. Modifiable risk factors

5.3.2. Mental health, specifically depression and anxiety

5.3.2.1. Definition of mental health

5.3.2.2. Definitions and descriptions of depression and anxiety

5.3.2.3. Lifestyle influences

3.2. Lipid abnormalities, lipid panels

3.2. Diabetes/pre-diabetes, fasting glucose, hemoglobin A1c

3.2. Metabolic syndrome, arthritis and inflammation

3.2. Overweight & obesity, BMI, waist circumference

3.3.1. Healthy weight

3.3.5. Stress & emotional wellness

5.3.3. Substance use (prescription and non-prescription)

5.3.3.1. Substance use and abuse overview and definitions, and when to refer

5.3.3.2. Tobacco, including overview of tobacco use, health effects, and support networks/tools for tobacco cessation

5.3.3.3. Alcohol, including overview of alcohol use, health effects, and support networks for alcohol use issues

5.3.4. Symptoms of common sleep disorders (insomnia and apnea); when to refer

5.3.4.1. Definitions and descriptions of insomnia and apnea

5.3.4.2. Modifiable risk factors

3.3.6. Avoiding tobacco use

3.3.7. Moderate or no alcohol use, substance abuse

3.3.4. Sleep

5.4. Health and healthcare disparities, equity and inequity

5.4.1. Define

5.4.1.1. Health disparities

5.4.1.2. Health equity and inequity

5.4.1.2.1. Healthcare equity and inequity

5.4.2. Recognize that there are strategies and resources to promote equity, dismantle power dynamics, address stereotyping, and reduce discrimination

5.5. Structural determinants of health

5.5.1. Recognize that structural determinants of health are the 'root causes' of health inequities because they shape the quality of the Social Determinants of Health experienced by people in their neighborhoods and communities

5.5.2. Identify relevant structural determinants and how they impact client (e.g., values, beliefs, and norms; governance; laws and policies; institutional practices that impact hierarchical patterns of advantage; and power relations)

5.5.3. Know that the structural determinants of health affect whether the resources necessary for health are distributed equally in society, or whether they are unjustly distributed according to race, gender, social class, geography, sexual identity, or other socially defined group of people

5.5.4. Understand how structural determinants of health impact people's health, wellbeing, behavior, and medical conditions

5.6. Social determinants of health (SDOH)

5.6.1. Define SDOH as the conditions under which people are born, grow, live, work, and age, which are shaped by a set of forces beyond the control of the individual. They are intermediate determinants of health, 'downstream' from the structural determinants of health.

5.6.2. Identify relevant social determinants and how they impact client (e.g., education access and quality, economic stability, healthcare access and quality, neighborhood and built environment, and social and community context)

5.6.3. Know that structural determinants of health create and impact SDOH

5.6.4. Consider how SDOH impact client's health, wellbeing, behavior, and medical conditions

5.7. Health literacy and numeracy

5.7.1. Define health literacy and numeracy definitions

REMOVED ITEMS

2.6.7. Incorporate coach's intuition

2.9.3. Patient activation and engagement models

2.14.2. Decisional balance

4.2.2. Working within an organization; serving sponsor and client