

HANDBOOK

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# COACH handbook

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## **Camden Coalition of Healthcare Providers**

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# Introduction

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COACH is a framework of techniques and tools to be used as part of an intensive care management intervention for medically and socially complex populations. The goals of COACH are to:

- ▶ *build a participant's confidence and skills, and find ways for them to manage their healthcare and social needs independently or with long-term support,*
- ▶ *facilitate and maintain relationships with a primary care physician and community resources, and*
- ▶ *navigate complex systems.*

The development of the authentic healing relationship between the participant and frontline staff member serves as the foundation for progress toward long-term wellness.

This document gives an overview of COACH and a brief introduction to its tools and techniques. It is part of a more detailed manual that complements COACH training. The in-depth manual delves deeper into the COACH framework, including administering the tools and techniques, supervision and training strategy, and resources. If you are interested in learning more about these tools and techniques, and possibly setting up an individualized training session with one of our experts, email [camdenTA@camdenhealth.org](mailto:camdenTA@camdenhealth.org).

## AUTHENTIC HEALING RELATIONSHIP

The authentic healing relationship is a respectful, trusting and non-judgmental partnership between the frontline staff and the participant that serves as the foundation for progress toward long-term wellness. Through interviews with former participants, the Camden Coalition of Healthcare Providers (Camden Coalition) found that the relationships between frontline staff and participants were the major driver for sustainable participant behavior change. This supports best practice literature that has identified the frontline staff-participant relationship as a core element of home visiting programs, and literature that found that a non-judgmental approach motivates participants to make positive change. The Camden Coalition identified three core elements of authentic healing relationships through participant interviews: security, genuineness, and continuity.

# OVERVIEW OF COACH

## History

A year or so after implementing the Camden Coalition's current iteration of the care management intervention in 2012, staff members began to wonder about its "stickiness" – they noticed participants were staying out of the hospital during the intervention, but once the engagement was over, participants went back to prior habits and behaviors. Through qualitative interviews with previous participants, staff learned that they were doing really well problem-solving in the moment but not teaching participants how to problem-solve or build trust in themselves to address their needs.

The COACH framework was developed by several founding members of the Camden Coalition as a way to train frontline staff on engagement styles that sustainably improve outcomes when working with participants with complex health and social needs. Within the COACH model, frontline staff act as empowerment coaches rather than solely as providers for the participants, ultimately working with participants to develop an individualized care plan around participants' own long-term vision and goals. The COACH framework recognizes that all participants function within their own larger social and community systems, and encourages them to identify individuals from their doctor's office, social service organizations, and/or family and personal relationships who can provide continued support in conjunction with and beyond the intensive care management intervention.

COACH incorporates elements of the following well-established theories of behavior change:

- ▶ *Empowerment theory*
- ▶ *Unconditional positive regard*
- ▶ *Transtheoretical theory (stages of change)*

## OVERVIEW OF COACH

COACH is a five-part framework that trains staff to act as empowerment coaches in order to problem-solve with participants to determine how to effectively manage their health conditions and social barriers, have a higher quality of life, and greater connection to community resources. COACH is not a linear model. The tools and techniques that are incorporated within the framework are meant to be fluid – overlapping at times, and repeated and revisited throughout the intervention.

The five-part framework is:

- ▶ *C: Create a care plan*
- ▶ *O: Observe the normal routine*
- ▶ *A: Assume a coaching style*
- ▶ *C: Connect tasks with vision and priorities*
- ▶ *H: Highlight effort with data*

## Goals of COACH

Using COACH as part of the Camden Core Model allows frontline staff to work effectively with the participant to:

- *Build their confidence and find ways for them to independently manage their healthcare and social needs, either by performing tasks themselves or with long-term supports (person or system).*
- *Connect and maintain a relationship with community resources.*
- *Be empowered to navigate complex systems.*

The COACH framework can be sorted into two categories: techniques and tools. The techniques are the approach used by frontline staff in their interactions with participants; the tools help the participant and frontline staff track goals and progress. The techniques and tools embedded in the COACH framework are designed to help frontline staff develop an authentic healing relationship with participants – a respectful, trusting and non-judgmental partnership between the frontline staff member and the participant. It’s also designed to empower and help build the skills of the participant to manage and accomplish their goals, and take the lead in their healthcare. COACH is incorporated, practiced, and normed throughout participant interactions and among the team.

The tools and techniques outlined in each of COACH’s five parts are not meant to be performed sequentially, and the timing may vary depending on the participant’s unique needs.

Techniques	Tools
▶ Observe normal routine	▶ Create a care plan
▶ Connect tasks with vision and priorities	▶ Highlight effort with data
▶ Assume a coaching style	

While COACH is designed to support a care management intervention lasting an average of 90 days, the duration and sequencing of the intervention varies according to the complexity of the case. In addition, since COACH techniques are focused on relationships and trust-building, no time expectations should be put on any of the five foundational behaviors. In addition, the timing of when techniques are used should be tailored to the unique needs of each participant.

From the beginning of the intervention, COACH provides guidelines for frontline staff to build an authentic healing relationship with the participant, understand their goals, and help them navigate complex systems. COACH also aids frontline staff in working with the participant to build their confidence and skills, and in finding ways for them to manage their healthcare and social needs independently or with long-term support. Frontline staff help participants identify a long-term support/strategy, which could be a person within the participant’s primary care office, a social service organization, a long-term care facility, and/or someone with whom they

have a personal relationship. Frontline staff members integrate this long-term support person into the intervention to ensure the participant has a support system beyond the intervention.

## C: Create a care plan

The overall goal of Create a care plan is for the frontline staff member and the participant to create a collaborative care plan driven by the participant’s own priorities and goals for themselves. While COACH’s five-part framework cannot be sorted into defined sessions, Create a care plan serves as the foundation for the other techniques and tools. Knowing what the participant identifies as their goals or priorities in their life is essential to taking a strengths-based and person-centered approach to care.

## O: Observe normal routine

The goal of Observe normal routine is for the frontline staff member to observe and identify routines that the participant already has embedded into their life before giving suggestions and recommendations. It is important for frontline staff to observe daily routines or processes and identify what works for the participant, so they can help the participant build upon them to help with issues, barriers, or difficulties to wellness that the participant may be facing such as scheduling, setting up transportation, medication use, and emergency care.

## A: Assume a coaching style

The goal of Assume a coaching style is for the frontline staff to appropriately support the participant based on the participant’s level of independence for the task at hand. There are three potential coaching styles: “I do,” “we do,” and “you do.” The goal of choosing a coaching style is for the participant to move toward independence, and for the participant to gain confidence in performing key activities related to their chronic health management and systems navigation (for example, arranging transportation, making an appointment, taking medication, etc.).

## **C: Connect tasks with vision and priorities**

The goal for Connect tasks with vision and priorities is for the frontline staff and the participant to have a shared understanding of the answer to the question: “What does the participant want for themselves?” In other words, the purpose is to link everyday tasks the participant needs to do in order to manage their health to the larger vision a participant has for their life.

## **H: Highlight effort with data**

The goal of Highlight effort with data is for the frontline staff to use the co-created care plan to assist participants in visualizing and tracking what they have accomplished over the course of the intervention. Tracking and highlighting progress throughout the intervention empowers and motivates the participant. In the context of Highlight effort with data, data includes participant behavior, attitude, and health outcomes.

## About the Camden Coalition

We are a multidisciplinary nonprofit working to improve care for people with complex health and social needs in Camden, NJ, and across the country. The Camden Coalition works to advance the field of complex care by implementing person-centered programs and piloting new models that address chronic illness and social barriers to health and wellbeing. Supported by a robust data infrastructure, cross-sector convening, and shared learning, our community-based programs deliver better care to the most vulnerable individuals in Camden and regionally.

Through our National Center for Complex Health and Social Needs (National Center), the Camden Coalition works to build the field of complex care by inspiring people to join the complex care community, connecting complex care practitioners with each other, and supporting the field with tools and resources that move the field of complex care forward. The National Center's founding sponsors are the Atlantic Philanthropies, the Robert Wood Johnson Foundation, and AARP.



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