



Commentary

Pharmacist-based health coaching: A new model of pharmacist-patient care

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Summary

This paper describes a provider-patient communication process, which although not new to health care in general, is new to the pharmacy profession. Health coaching is a technique that empowers patients to make lasting health behavior changes that improve overall well-being. It provides patients with health care implementation options that better suit their lifestyle and abilities. Health coaching programs have the potential to foster better health outcomes, especially with patients who are chronically ill or represent an at risk population for medication non-adherence (e.g. elderly, patients on psychotropic medications). Other health professions (e.g. nursing and medicine) have had success with the implementation of health coaching models. For example, nurse coaching is recognized by the American Nurse Association and recent statistics show 3.1 million nurses in the U.S.A are also trained in nurse coaching. The pharmacy profession has yet to tap the patient-related benefits of health coaching. This commentary will discuss (i) The theoretical foundations of health coaching (ii) Distinctions between health coaching, motivational interviewing and traditional medication therapy counseling (iii) Training necessary for health coaching; and (iv) How pharmacists can use health coaching in practice.

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Introduction

The concept of health coaching is relatively new, having come into popularity over the last several years and poised to become an important piece of health care professional-patient relationships.^{1,2} Health coaching has gained attention due to increases in repeat hospitalizations and

increasing health care costs.^{3,4} Additionally, significant increases in those diagnosed with chronic conditions has put into focus the importance of managing⁵ and preventing chronic conditions through healthy lifestyle behaviors.^{2,4} While the current definition of health coaching continues to evolve, there are aspects of the role that align

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well with current and projected responsibilities for community pharmacists.

For the purposes of this paper, the terms “client” and “patient” may be used interchangeably to more accurately reflect the spirit of the health coaching philosophy. Health coaching has been described as a client or patient-centered approach, with coaches providing support, education, and feedback in order to enhance client self-awareness, motivation, accountability, and self-efficacy while recognizing that patients are experts in their own life situations and they must provide the direction for learning and change.⁴ A critical aspect of health coaching is the dissemination of accurate, evidence-informed, health knowledge incorporating medication adherence, lifestyle changes, and accepted practice guidelines.⁶ The role of educator is one that is not foreign to pharmacists given their clinical expertise compounded with unparalleled accessibility as health care professionals.⁷ Counseling patients on medications, disease states, and proper usage of medical devices are all areas of patient education that pharmacists have significant expertise and experience.⁷ Within the context of health coaching, patient education is one of many tools used as an instrument to help elicit behavior change or to help patients begin to think about changing certain behaviors with the ultimate goal being to improve health and wellness. Current health coaching Models implicitly acknowledge the difficulties behind enacting behavior change and recognize that for some patients, simply being told that they need to implement behavior changes from their health care provider will not actually lead to long-term behavior change. Current models recognize that while educating patients is important, it is not enough to facilitate sustainable behavior change. Another distinguishing aspect of health coaching is the unique relationship dynamic that is fostered and encouraged through its implementation. The approach is distinctly client-centered – a break from the traditional one-sided dynamic where patients typically have very little input regarding the decisions being made over the management of their health. In health, coaching the term client-centered means something quite different from the way it has been used in other contexts. Client-centered health coaching means the client’s preferences and needs are put ahead of what the practitioner feels are in the best interest of the client. Patients’ target goals and medication regimens are generally dictated to them and are often

standardized according to broad patient characteristics as opposed to being individualized to suit patient preferences.

Health coaching is designed so that the focus is on the patient and not just on the disease state and desired outcome from a clinician’s point of view.⁸ This has been shown to empower patients.³ Patients are encouraged to voice their concerns, and ask questions, all with the goal that through addressing these unique attributes, a collaborative care plan will be made in order to benefit the patient.³ Health coaching involves encouraging the patient to take control of the choices they make as well as allowing them to recognize the behavior changes that are needed for sustainability of positive choices.⁸ Patients often lack the knowledge, confidence, and psychosocial skills necessary to focus on prevention and optimize the pharmacotherapy they are receiving.² The appropriate use of health coaching naturally leads to patient accountability, which allows the patient to improve their own health and well-being, by building up their confidence and skills.^{8,9} Over time, health coaches work with the patient to provide ongoing education, feedback, and support, all while maintaining a client-centered approach.⁴

Health coaching has achieved success in other health professions such as nursing and medicine.^{9,14–16} For example, nurse coaching is recognized by the American Nurse Association¹⁴ and research has shown worldwide, that there are 19.6 million nurses and midwives that practice nurse coaching and 3.1 million nurses in the U.S.A that are also trained in nurse coaching.¹⁵ Research on health coaching in medicine can translate into lessons that could be applied into the community pharmacy context.¹⁶ In one study on physician health coaching two important issues were brought to light: (i) How best to embed health coaching into clinical practice, and (ii) How to differentiate the role of a coach and a health care professional.¹⁶ That is, the physician participants reported they found it difficult at times to be able to incorporate health coaching into a typical 10 min office visit, and that they often found themselves setting up additional follow up sessions to meet the patient or going over the allotted 10 min.¹⁶ However, over time, the physicians said that they were actually able to incorporate health coaching into their normal consultations while avoiding the initial time constraints.¹⁶ The physicians also found that their role as a health coach was more effective when patients were able to understand the difference

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