

Duke IHCPT Alumni Newsletter

Fall 2011 | Issue 1



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Newsletter Committee

Debbie Lee
Newsletter Committee Co-Lead
deborahalee@hotmail.com

Candace Gregory
Newsletter Committee Co-Lead
ccgregory@aol.com

Deirdre Breen Bernstein
deirdre@selfcareinstitute.org

Jo Brewton
jobrewton@gmail.com

Rachel Kuliani
rachel.kuliani@duke.edu

Nancy Watson
nancyewatson@gmail.com

This Issue's Contributors

Eimer Kernan
celtsjd@bellsouth.net

Chandra White
chandrawhite@bellsouth.net

Ken Zeno
kzeno1@comcast.net

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What's Happening: Announcements

Nurses Network

If you are interested in joining the Duke IHC Nurses Network, please contact Candace Gregory at ccgregory@aol.com. The Nurses Network is a way to stay connected, network, learn from other nurse coaches, share information and tools, and discuss and problem-solve issues unique to IHC nurses and the healthcare industry. The Nurses Network also serves as an avenue for finding referral resources. The Nurses Network currently conducts monthly conference calls that are available by recording for those members unable to attend.

Triangle (Raleigh, Durham, Chapel Hill) IHC Group

I am trying to start an association of Duke-trained integrative health coaches in the Triangle (Raleigh/Durham/Chapel Hill area). Many of us have been meeting once a month since finishing our cohort. I know there are more graduates in the area, and many are more experienced. I would like to form a networking group to increase the visibility of the Duke IHCPT, promote professionalism, and learn from each other. Please contact me at kkmihcp@gmail.com if you are interested in being a part of this groundbreaking group. Please type "NC IHCP" in the subject line.
~ Kathy Mackintosh, Clear Path Health Coaching, LLC

Florida Coaches Network

If you are an IHCPT graduate and live in the state of Florida, please join us for a monthly conference call to discuss areas of mutual interest, ideas and networking opportunities. Calls are scheduled every month and all are welcome to participate. If you are interested in joining the group, please contact Candace Gregory at ccgregory@aol.com. The next call is scheduled for September 26, 2011 at 7 p.m.

Welcome Message from the Newsletter Committee

Greetings Integrative Health Coaches,

Welcome to the first edition of the Duke IHCPT Alumni Newsletter. This newsletter is developed for you by members of the Alumni in collaboration with Duke Integrative Medicine. Our purpose is to provide articles that interest you and enhance your practice as an integrative health coach. Your feedback is vital to assure the newsletter meets your needs, so don't hesitate to let us know what you like and what you'd like to see if it isn't there. Please provide your comments directly to me at deborahalee@hotmail.com, or you can post to the Alumni Forum on the Duke IHCPT Alumni Website.

It is my pleasure to introduce you to the Newsletter Committee members who have volunteered to produce a quarterly newsletter for the alumni: Candace Gregory (Newsletter Committee Co-Lead), Deirdre Breen Bernstein, Jo Brewton, Rachel Kuliani, and Nancy Watson.

If you would like to participate on the Newsletter Committee, please contact me. The alumni committees are a great way to contribute to the professionalism of integrative health coaching and to use your skills in a different way.

We envision the newsletter having regular columns as well as

new items in each edition. For now, the regular columns are: What's Happening in the Coaching World/Research Update; Updates from Duke Integrative Medicine; Spotlight on a Coach; Alternative and Complementary Therapies; and Mindfulness.

I am pleased to introduce two special columns that will be included in each newsletter. Eimer Kernan and Chandra White will be contributing a business column, and Ken Zeno and the Continuing Education Committee (CEC) will contribute information and/or education updates. Thanks to Eimer, Chandra, and the CEC for their efforts to keep you informed.

If you have an article, item, or an idea to contribute to the newsletter, please send it to me. The newsletter will be published around the dates below, so if you have a submission please provide it at least three weeks in advance of the publication date:

- Winter edition (Dec 23rd)
- Spring edition (March 23rd)
- Summer edition (June 22nd)

It is with great excitement that I invite you to read the first edition of the Duke IHCPT Alumni Newsletter. Enjoy!

Debbie Lee
Newsletter Committee Co-Lead



Integrative Health Coach Spotlight

By Candace Gregory

Cherry Pfau, MSN, RN, AHN-BC
Durham, North Carolina

Cherry Pfau is a Registered Nurse and an Integrative Health Coach. Her nursing career began in critical care, she then transitioned into nursing management, home health infusion, and hospice.

At the end of the 1990s, Cherry went to work for a large industrial pharmacy in Baltimore as the regional infusion coordinator. This led to a regional education manager position with the parent company. In 2006, Cherry was offered a position as coordinator of the Integrative Medicine Program at Tampa General Hospital in Tampa, Florida.

In 2008, Cherry went to work with hospice. She found hospice to be a good fit for her holistic practice. "Hospice was very supportive and allowed me to develop programs for staff and volunteers, as well as patients."

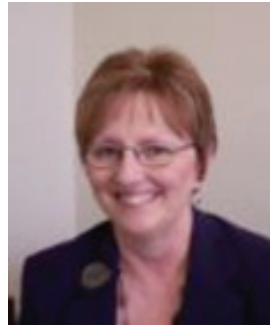
Cherry has always been interested in holistic nursing care, saying, "It resonated with me and my value system." While she always incorporated holistic principles into her patient care and trainings, Cherry decided to become certified as an Advanced Holistic Nurse by the American Holistic Nurses Association (AHNA) in 2002.

She moved to Chapel Hill in 2007. "Being new to town made finding integrative programs a challenge initially." Wanting to remain independent, continue practicing holistic nursing, and network with other holistic and integrative practitioners, she started the local chapter for the AHNA network.

Cherry will complete her certification in Healing Touch this December. She is a Reiki Master teacher, completed the Wellness Inventory Coaching Program in 2002, and the Duke Integrative Health Coach Foundation Course in 2009. She plans to pursue Integrative Health Coach certification in the near future.

She currently works as an Integrative Cancer Coach and Holistic Health Practitioner. She offers various wellness classes, runs cancer support groups, and is a healing touch practitioner for both private and hospice clients.

Cherry will be conducting a session at the Duke IHCPT Alumni Reunion on Integrating Health Coaching into a Holistic Nursing Practice. If you would like to contact Cherry she can be reached at 919-564-6016 or integrativecancercoach@gmail.com.



What's Happening:
Upcoming Events

Trainings of interest at Duke Integrative Medicine

Integrative Medicine in Professional Practice (IMPP):
In March 2012 we will launch a new program designed for physicians, physician assistants, nurse practitioners, and nurses. IMPP is a thorough and practical course that offers health care professionals in-depth knowledge and understanding of evidence-based integrative medicine practices that have been demonstrated to enhance patient outcomes. Over the course of four days, participants will work with experts at Duke Integrative Medicine to learn about the complementary therapies, stress reduction techniques, and dietary supplements that can help patients improve their health. Continuing education credits are available for this program. Please see our website for more details. <http://www.dukeintegrativemedicine.org/professional-training/integrative-medicine-in-professional-practice>

Powerful Conversations in Healthcare:

This new program will be offered in the summer of 2012. It will include valuable coaching skills that healthcare practitioners can use to improve patient interactions and maximize the potential for health behavior change. More information will be available on our website soon.

CAM Corner: Reiki

By Deirdre Breen-Bernstein

Complementary and Alternative Medicine 101: A Primer

Complementary and alternative medicine (CAM), as defined by the National Institutes of Health, is a group of diverse medical and health care systems, practices, and products that are not presently considered to be part of conventional medicine. Complementary medicine is used together with conventional medicine, and alternative medicine is used in place of conventional medicine.

How can being familiar with CAM approaches to health and healing improve my coaching ability?

As Integrative Health Coach Professionals, our effectiveness in supporting health behavior change relies on multiple skills including our ability to relate and respond to our clients. Therefore, developing a frame of reference for CAM therapies will serve to help us understand the approaches our clients have tried, may try, or perhaps will never try in their journey toward optimizing health. Although it is not our role to make suggestions, it is our job to ask questions. Being familiar with CAM allows us to maintain an expanded field of non-judgmental presence when we ask, "What have you tried?" instead of a less professional, judgmental response. Similar to the all important adage, "location, location, location in real estate," maintaining presence during our coaching creates a fertile field where deep insight toward one's greatest potential can grow.

As part of this ongoing newsletter, the CAM corner will highlight a specific CAM therapy and its origin, history, and use in optimizing health.

The Presence of Reiki

Reiki refers to a healing practice that originated in Japan. It is a generic Japanese word that describes healing and spiritual work. The contemporary translation means universal life force. The healing system called Usui Reiki Ryoho Gakkai was developed by Dr. Miako Usui in the 1930s, after he experienced a mystical experience on Mount Kurama in Japan. It is significant that Dr. Usui believed this experience was an answer to his long quest

to discover the gift of healing. He developed a self-healing system for humanity based on his belief in the combined power and intention of body and mind to restore health. Two of his students, Dr. Hayasho and Mrs. Takata, advanced the system to include professional facilitators and levels of professional trainings. Mrs. Takata brought this healing system to the west in 1937, where it has grown into a paraprofessional healing modality.

In addition to a hands-on healing system, whether for self-healing or paraprofessional care, Reiki is also a philosophy. Dr. Usui developed the following guiding principles of Reiki, because he believed anger and worry were toxic to the body and caused illness. He recommended living by the following principles daily:

Just for today do not worry;
Just for today do not anger;
Show love and respect for everything;
Do your work honestly;
Live in an attitude of gratitude.

Reiki treatments are ignited through an energetic attunement process. This process can be thought of as one's bio-field connecting to a higher vibratory level of energy (light) or universal life force. The Reiki energy is transmitted through one's hands to the body for self-healing or to serve the healing of another. This universal life force is described as having an intrinsic healing quality that 'knows' where to direct the transmitted energy. Usually the hands of the deliverer get warm, often described by recipients as hot mitts. However, sometimes hands turn cold. Apparently this happens when addressing an inflammatory condition. The deliverer of the Reiki energy cannot determine the temperature of their hands; this is considered part of the innate wisdom of Reiki energy.

Reiki treatments can be facilitated in person or remotely due to the energetic matrix that supports the healing system and is considered an energy-based medicine by the National Institutes of Health. Contemporary Reiki includes three levels of paraprofessional trainings by Reiki Master Teachers. Each training level can be completed in 1-2 days, while Master Teachers are generally apprenticed for

6-12 months. However, there is no governing body that unifies treatment or training, and there are no credentials or licensing. Therefore, finding a practitioner or teacher is a personal preference that relies on referrals from reliable sources.

Reiki is becoming common in hospice facilities for the dying and family members, because it is shown to be effective in balancing emotions, and promoting peace and tranquility. Reiki treatment is also

considered effective for pain management, symptoms of anxiety, and autoimmune conditions.

For further information:

NIH NCCAM
www.nccam.nih.gov/health/reiki/

Reiki Organization
www.reiki.org

New York Reiki International Center
www.reiki.nu/reiki/reiki.html

Introducing Mindfulness in the Corporate Setting

By Nancy Watson

Take rest; a field that has rested gives a bountiful crop. – Ovid

Responding to an Unmet Need

Drive for results. Win at what matters most. Corporate life is full of buzzwords and phrases that describe the push for productivity. Now more than ever employees are feeling the pressure to do more with less. Workers may suffer from stress and burnout as a result of this results-driven environment. Employees of companies caught in the “frenetic pace” of what Heike Bruch and Jochen I. Menges call “the acceleration trap” feel exhausted, “and the best employees defect.” Bruch and Menges point out leaders who think employees suffering burnout only need more motivation may “increase the pressure, only making matters worse” (Bruch & Menges, 2010). If increasing pressure on employees does not work, what might be another option? Angela Cape-Baker, OTR/L, RYT, CIMI® and members of the Patient Services Stress Management and Reduction Team at Biogen Idec thought mindfulness might be a solution. Cape-Baker was already offering yoga classes to fellow employees, and she added mindfulness sessions earlier this year.

Finding Common Ground

In the early stages of planning, Cape-Baker decided to offer the mindfulness sessions as opportunities to “relax and restore.” She wanted the sessions to have universal appeal and did not want to alienate employees who might not respond positively to the term “mindfulness.” Cape-Baker saw this renaming as a way to bring the benefits of mindfulness to people in a very relatable way: everybody could understand and appreciate the importance of relaxation.

She also felt it was crucial to make the sessions accessible to all employees, which meant employees needed to be able to attend during scheduled breaks. Her ten to fifteen minute sessions could easily fit into schedules without taking employees away from their primary roles and responsibilities: a win for the employees and the business. The short sessions also fit well in Cape-Baker’s schedule. She points out, “Because it is a minimal time commitment, it is sustainable for the long term.”

Increasing Awareness

Cape-Baker led participants in two mindfulness exercises: an awareness of breathing meditation and a



What’s Happening:
Upcoming Events

Trainings of interest at
Duke Integrative Medicine

Mindfulness Training for Professionals:

In March through May 2012, we will offer our Mindfulness Training for Professionals program. In this two-module course, mindfulness experts at Duke Integrative Medicine offer an extensive training in this core concept so that participants can optimize the health and well-being of their clients and patients. Mindfulness is recognized as an increasingly important element in healing and in the helping relationship between professionals and their clients and patients. Continuing education credits are available for this program. (Please note that this program may be used to fulfill the MBSR/Mindfulness requirement for the IHCPT Certification Course.) Please see our website for more details. <http://www.dukeintegrativemedicine.org/professional-training/mindfulness-training-for-professionals>

body scan. These exercises gave participants the opportunity to gain a new awareness of the connection between mind and body. Cape-Baker noted that a participant told her she now realizes she needs more help establishing that mind-body connection. Other participants commented on their experiences with “monkey mind,” something Cape-Baker assured participants is normal. By guiding participants to observe their thoughts without attachment, Cape-Baker hoped to plant the seeds for witness consciousness. If participants are motivated by having this experience of mindfulness, they will start their own journey.

She says the real point of the sessions is to give people tools to incorporate into their day-to-day lives. If an employee returns from a session with a more relaxed state of being, the benefits can have a ripple effect with coworkers fostering improved relationships. If employees feel more ease and satisfaction at work, that ripple effect can continue to bring benefits to the entire organization through increased productivity and decreased voluntary attrition.

Lessons Learned

Interested in bringing mindfulness to your office or offering mindfulness sessions to businesses as part of your coaching practice? Cape-Baker offers the following tips:

Get Approval – Before offering the sessions, Cape-Baker made sure to check with human resources and company leadership. Companies may have different requirements, so be sure to check on those specifics before promoting sessions.

Make Participation Voluntary – Meet people where they are, and allow people to come when they are ready and willing to fully participate.

Set Appropriate Expectations – Cape-Baker noted some participants came with pen and paper ready to take notes on how to relax. In the future she thinks it would be helpful to offer an information session to set expectations (no pen and paper required!), answer questions, provide background information, and share supplemental resources.

Know Your Audience – Cape-Baker tried sessions at various times of day and found the 3:00 PM sessions were most heavily attended. She thinks sessions earlier in the day were not as popular, because many people were just starting their work and did not feel they needed breaks. Get to know the corporate culture and try different times of day to find the best fit for employees.

Involve Leadership – Cape-Baker was pleased to see a supervisor attend a session and noticed her attendance corresponded with an increased interest from her direct reports. Employees may be more likely to attend if they see their leaders find value in the sessions.



Angela Cape-Baker is a Senior Program Leader at Biogen Idec in Research Triangle Park, NC, where she leads national nurse educator programs to enhance the lives of people with multiple sclerosis. She is an occupational therapist, yoga teacher, health coach, infant massage instructor, and is pursuing her Biodynamic Craniosacral Therapy certification. Angela learned mindfulness techniques primarily through her training at Kripalu. Angela’s passion is developing programs that promote individual transformation. Visit her website at www.caprihealth.com.



Research Update

By Debbie Lee

Health Coaching Performance Assessment™ (HCPA): A New Tool for Benchmarking and Improving Effectiveness

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This article provides an overview of the report published by the HealthSciences Institute of a tool to assess health coaching proficiency and performance of health, disease management, and care management staff. The tool, Health Coaching Performance Assessment™ (HCPA), was developed by Dr. Susan Butterworth, Associate Professor with Oregon Health & Science University School of Medicine, and a team that included Motivational Interviewing Network of Trainers professionals and Motivational Interviewing Treatment Integrity (MITI) coding specialists.

Purpose

The purpose of the HealthSciences Institute project was to develop and validate a tool that would evaluate the quality and effectiveness of health coaching services. The intent of the project was to provide purchasers of services and consumers a way to compare the quality of health coaching services; no tool currently exists for this purpose, and few organizations use any validated tool to assess the fidelity of services to evidence-based health coaching best practice (pg. 14). Another objective of the project was to provide a mechanism for feedback to coaches to support improved proficiency.

The report provides an overview of motivational interviewing (MI) as, “the only health coaching approach to be fully described and consistently demonstrated as causally and independently associated with positive behavioral outcomes” (pg. 8). Consideration of the components of behavior change science from the client/provider encounter that link directly or indirectly to measureable clinical outcomes was imperative in development of the tool.

Research about practitioner behavior tests often works on the premise that the practitioner can positively or negatively affect aspects of patient behavior. This practitioner behavior is known as either MI-adherent or consistent with MI (MIC) or MI non-adherent or inconsistent with MI (MIIN) (pg. 19).

Reliability, Validity and Variables

Instrument development includes analyses to evaluate the reliability and validity of the tool. Multiple inter-rater reliability and criterion validity analyses were conducted by an independent health science researcher to establish reliability and validity of the HCPA.

The tool is based on MI techniques and seven global characteristics, and the variable of Change Talk strength that were rated from 1 to 5 by coders for inter-rater reliability:

- Collaborating and partnering;
- Evoking and exploring client’s motivation for change;
- Listening and expressing empathy;
- Resisting the righting reflex;
- Staying on task/being directive in an MI congruent way;
- Supporting autonomy and choice;
- Validating, supporting, and affirming; and
- Change Talk strength (pg. 25).

The number of behaviors (open-ended/close-ended questions, simple/complex reflections, and MIC/MIIN behaviors) were counted and converted into ratios or percentage values. These values, plus the behavior counts that went into the formula for Change Talk, were compared among coders:

- % of open-ended questions (calculated against close-ended questions);
- % of complex reflections (calculated against simple reflections);
- Ratio of total reflections to total questions;
- % of MIC behaviors (calculated against MIIN behaviors); and
- Count of Change Talk utterances (pg. 25).

Methods and Subjects

Recordings from in-person and telephone sessions were coded. Fifty-one recordings were selected for purposes of coding for reliability and validity testing. Recordings from the continuum of seasoned to novice coaches were selected for coding purposes, and were from 8 to 20 minutes in length with longer sessions edited to 20 minutes.

All clients had chronic conditions and were either

enrolled in a disease management program or were volunteers from a previous health coaching study. All personal health information was removed before the coding process began.

Discussion and Limitations

Coders concluded that the tool was applicable for use in a variety of health care settings from primary care to disease management. The HCPA was found to be a reliable measure of coaching behaviors based on the MI approach. The Change Talk component of the tool was difficult to evaluate given the lack of measures to assess client behaviors. This proved to be a limitation of the project in understanding how coaching behavior ultimately influences client behavior. There is still much to know about the underlying mechanisms of the MI approach, and whether or not there are variables that should have been included in the coding process (pg. 32).

The authors conclude:

. . . It is clear that this approach is indeed effective and best practice in addressing lifestyle management, chronic condition self management and treatment adherence. There seems to be evidence amassing that indicates that the patient behavior of Change Talk is associated with clinical outcomes. What is not yet clear, is exactly which practitioner behaviors are directly linked with evoking Change Talk from the patient, which are most important, and if there are any direct links from practitioner behavior to clinical outcomes. Until more is known, as

stated above, it is important to pay close attention to all MI-based practitioner behaviors and, especially, to Change Talk from the patient (pg. 33).

Future research should focus on replicating findings from this project and to see if there are qualities of the health care environment that indicate a different approach to MI be used from its traditional use in counseling and addiction. Further study is also needed to validate data from HCPA coding with clinical outcomes (pg. 33).

Summary

This project was conducted to address the need for a valid tool based on current behavior change science that could be used for health care encounters to provide formal feedback to health coaches. The HCPA was developed based on the MI approach and proved to have good inter-rater reliability. It is imperative that coders are well trained to use the tool so that health coaches can receive feedback about their encounters in order to improve coaching competency and proficiency.

Health Coaching Performance Assessment™ (HCPA): A New Tool for Benchmarking & Improving Effectiveness

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http://www.healthsciences.org/pdfs/HCPA_FAQ.pdf





From Duke Integrative Medicine

Greetings IHCPT Alumni!

Welcome to the first issue of the Duke IHCPT Alumni Newsletter. We are so proud of and grateful for all the hard work that our alumni have put into this inaugural issue, and we look forward to seeing this initiative grow over the coming months and years. We owe a special thanks to all the members of the Newsletter Committee for their efforts.

This is a year of firsts for IHCPT. In addition to this first issue of the Newsletter, we will host our first IHCPT Alumni Event in November 2011. The first part of this event, the Business Implementation Skills Intensive, is a one-day continuing education session held on Friday, November 18. This session will include a mixture of didactic and experiential exercises designed to cover the four key business concepts necessary for running an integrative health coaching practice. The second part of this event, held on November 19 and 20, will include a plenary session as well as presentations by your fellow alumni on a variety of topics ranging from social media to holistic nursing to tips for making successful presentations. More details about this event and how to register are available on your IHCPT Alumni Website.

Exciting changes are happening at Duke Integrative Medicine (Duke IM). On September 1 we welcomed our new Executive Director, Dr. Adam Perlman. Dr. Perlman holds an MD from Boston University School of Medicine and an MPH from Boston University. He has served in several physician leadership positions in integrative medicine, most recently as the Executive Director of the Institute for Complementary and Alternative Medicine, University of Medicine and Dentistry of New Jersey. Dr. Perlman brings years of integrative medicine leadership and clinical experience to his new role at Duke IM. "It is a privilege to join one of the leading academic medical institutions in the country," commented Dr. Perlman. "I look forward to carrying on the

great traditions at Duke Integrative Medicine which has been a national leader in the development of new models of patient care." Dr. Jeffrey Brantley, Director of the Mindfulness-Based Stress Reduction (MBSR) program at Duke IM, ably served as Interim Executive Director prior to Dr. Perlman's arrival. Dr. Perlman takes over from Dr. Tracy Gaudet, who recently joined the U.S. Department of Veterans Affairs as the first Director of their Office of Patient Centered Care and Cultural Transformation after ten years at Duke IM.

In January 2012 we will welcome our eleventh cohort of the Foundation Course as well as our fourth cohort of the Certification Course. We have close to 300 Foundation Course graduates, and we have more than 25 certified integrative health coaches. Congratulations to all of these graduates and certified coaches for their hard work!

As the number of graduates and certified coaches has grown, you have come together to form committees and volunteered to give presentations to your fellow alumni. All of this work contributes to the advancement of integrative health coaching as a profession. We want to thank the Continuing Education Committee, chaired by Ken Zeno, as well as the alumni presenters for the event in November.

The IHCPT Program would not be where it is today without each of our graduates and certified coaches. You put your hearts and souls into the course as students and continue to advocate for integrative health coaching after you graduate. We see the positive effects of this advocacy in the amazing work you are doing in your communities and in the referrals of your friends and colleagues to our programs, and we honor this great commitment.

With sincere thanks,

The Faculty and Staff of the IHCPT Program

The Business of Coaching: CEU Offering at the Duke IHCPT Alumni Weekend

By Eimer Kernan and Chandra White

Planning, starting, and running an integrative health coaching practice can seem overwhelming, like battling a great big Tyrannosaurus Rex with an insatiable appetite for overload, confusion, and indecision. However, there are strategies to help you wrestle the beast to the ground! One key strategy is to have a clear understanding of the stage at which you are in the business journey: are you planning, starting, or running your practice? Once you've determined the stage, focus only on the tasks appropriate to that stage.

During the IHCPT Foundation Course we focus on the *planning stage*. We use concepts in a business plan to organize the tasks involved in this stage, specifically: Business Case, Vision/Mission and Values, Marketing, Operations, Human Resources, Legal, Finance, and SWOT Analysis. We suggest a start-up checklist, so there are guidelines on what to do and the order in which to do them (see the Duke IHCPT Alumni Website for business templates: www.dukeintegrativehealthcoach.com).

During the IHCPT Certification Course, the focus shifts to *starting* an integrative health coaching practice. We use concepts in Attraction Marketing to organize the tasks of this stage: Developing a Powerful Audio Logo, In-Person Networking, Building a Client Enrollment Website, Preparing a Presentation/Speaking Package, Writing a Free Report, Publishing a Blog or E-zine, and Conducting a Complimentary Coaching Consultation.

The one-day **Business Implementation Skills Intensive**, that will be held on Friday, November 18, as part of Alumni Weekend, will focus on *running* an integrative health coaching practice. During this one-day training, we will zero in on the four key skills necessary to run a profitable practice:

- Having a Clear Destination One Year Out;
- Organizing Work and People Along a One-Year Timeline;
- Developing an Execution Mindset;
- Using Proven Accountability Tools.

Let's take a look at these business-building skills a little closer:

1) *Having a Clear Destination One Year Out.* The first section of your business plan deals with the long-term mission, vision, and values of your practice and includes your Big Hairy Audacious Goal (BHAG). As you transition from planning and starting your practice to running it, you'll need to operationalize your BHAG, so that it becomes concrete and gives you a clear destination for your practice one year in the future. This helps determine where you will/will not focus your resources and what business results you can expect in the next year. For example, what marketing, operational, and financial goals do you want to accomplish in the year ahead? Doing this exercise promotes a realistic assessment of what's achievable for you in a one-year time frame, what needs to be placed on a longer timeline, and what is simply not worth your time and effort. It encourages you to operate your practice based on well-placed priorities, knowing you're making conscious and informed choices rather than panicked and reactive decisions. It promotes balance in the inner workings of your practice and allows you to quiet the "monkey mind" of business overload. The questions you'll want to answer about your one-year destination are these: Using marketing, operations and financial metrics, where is my integrative health coaching practice going to be one year from now? Why am I choosing to go there?

2) *Organizing Work and People Along a One-Year Timeline.* Once you have clarity around your one-year destination, you'll need to make a realistic assessment of where your practice currently stands, the gap between the present and the destination, and how you might close the gap. You can then take this information and map it to a Business Wheel to determine how balanced your practice is. Be sure to pay particular attention to the balance between marketing, operations, and finance, because these are the three areas where most of your energy will go once you're up and running. In addition, this assessment tool can help you prioritize pieces of the business you'll want to process in-house, pieces you'll want to out-source, and other resources/people you might want to invite onto your team. The question you'll want to answer about the organization of your practice is this: During the next year,

how am I going to approach closing the gap between my current and desired integrative health coaching practice states?

3) *Developing an Execution Mindset.* The one-year goals you have for your integrative health coaching practice won't be fully realized unless you have a powerful execution mindset to match your visioning mindset. To run a successful practice you'll need to develop a clear understanding of the work that needs to be done week-to-week and month-to-month. As each piece of work comes due, you will need to know who will do it. It also helps to have timely quality assurance measures to check the results of your efforts, so you don't waste any resources; you will need to know what does and doesn't work in real time. The two questions you'll want to answer about your execution mindset are these: What's my month-to-month plan to close the gap between my Current and Desired Integrative Health Coaching Practice States? Will this plan bring me to my destination one year from now?

4) *Using Proven Accountability Tools.* You can be very busy running your practice and yet drift off course, because the only person holding you accountable is you! For instance, you may become stymied by a piece of business development. Your personal circumstances may change, such that you can no longer devote the same time and effort to your practice. The

successful business owner anticipates these things, and so develops a range of accountability tools to refocus goals and stay on track. One of these tools is Mastermind Groups, also known as Success Groups or Success Circles. Having regular face-to-face, telephonic, or online meetings with a circle of peers who act as trusted advisors and sounding boards is an effective accountability tool and a source of support. The question you'll need to answer about accountability is this: Who and what will support me so that I have the resources and the accountability to successfully reach my Integrative Health Coaching Practice destination one year from now?

The one-day Business Implementation Skills Intensive during the Duke IHCPT Alumni Weekend will address each one of these four key skills. The day will be filled with information, experiential exercises, and teamwork, so that as you run your integrative health coaching practice, guess work and indecision are kept to a minimum. The workshop is targeted for all graduates of the IHCPT Foundation Course, and it is recommended that you bring a completed Business Plan template with you and are ready to begin skills development for this stage of your business journey.

Clear, concise, decisive - we look forward to seeing you in November!

What's Happening: Upcoming Events

IHCPT Alumni Weekend

Early Registration Discount
available until October 24, 2011

Call 866-313-0959 (toll-free) or
919-660-6826 to register!

Continuing Education Session: Business Implementation Skills Intensive

Friday, November 18, 2011
8:30am - 5:30pm

Instructors: Eimer Kernan and
Chandra White

\$195 Early Registration by
October 24, 2011
\$210 after October 24, 2011

Alumni Event

Saturday - Sunday,
November 19-20, 2011
(9:00am - 6:00pm Saturday,
9:00am - 3:30pm Sunday)

\$325 Early Registration by
October 24, 2011
\$350 after October 24, 2011

More details are available on
your IHCPT Alumni Website!

Duke IHCPT Continuing Education Committee

By Ken Zeno

Duke IHCPT Alumni Continuing Education Committee Meets for The First Time

The Duke IHCPT Alumni Continuing Education Committee (CEC) conducted its first conference call meeting on August 23, 2011, to discuss mission, vision, and scope of work.

The meeting began with members invited to express what excited them about serving on the Committee. Individual responses included, “the strong professional background represented on the committee,” “an opportunity to connect the Newsletter work with that of the CEC,” “excited to be a part of the passion for continuing education and setting a structure to support our work with Duke IM.”

These positive statements launched the Committee into an exploration of its mission. A prepared mission statement was reviewed, briefly discussed, and accepted by the group. The mission statement was crafted from the content of several questionnaires completed by alumni and Committee members.

The CEC’s mission is “to assist Duke IHCPT Alumni in maintaining the highest standards of professional skills and development through facilitation of opportunities for continuing professional education, support, networking, and the exchange of information.” Committee members then focused their attention on the 3 functions of the CEC: to inform, to educate, and to support.

To Inform: The Committee discussed providing alumni with information to maintain the highest standards of practice in the health coaching profession in three ways: through information posted on Alumni discussion forums, through a column in the electronic Alumni Newsletter, and through networking.

To Educate: The Committee discussed providing alumni with professional opportunities for improving and refining their coaching, marketing, and networking skill development, and increasing their knowledge base for advancing their coaching businesses. Several ideas for consideration included: How to Conduct Group Coaching, Using Motivational Interviewing in a Coaching Practice, Overcoming The Challenges to Developing a Successful Coaching Practice,

Deepening Your Mindfulness Practice, Masterful Coaching Using Powerful Questions, Deep Listening, Demonstrating Presence and Reflecting Back to Clients, Understanding the IHC Role in Integrative Health Care Delivery, Marketing Your Health Coaching Practice, Best Business Practices, and How To Give a Persuasive Presentation, and Partnering With Other Healthcare Providers.

To Support: The Committee discussed providing networking opportunities, developing a quality PowerPoint series that members could use as a basis to structure marketing presentations, conducting regular surveys of alumni regarding CE courses, providing an interactive site for alumni needs, mentoring, making recommendations to Duke regarding potential collaborations with other programs and organizations.

The primary focus of the first meeting was to summarize a compilation of the responses to the questionnaires, review their pertinence to the Committee’s work, and establish the agenda for the emerging, long-term scope of work. Since our work has just begun we invite all alumni to contribute to the focus and responsibilities of the CEC. Please let us know how we can serve you in your business practice, provide quality continuing education offerings, and support you in achieving successful best practices as integrative health coaches.

Please email Ken Zeno (kzeno@comcast.net) with your suggestions so the Committee may consider incorporating them into the scope of our work. The Committee will meet again on Monday, November 14, 2011, at 7:00pm.

Continuing Education Committee Members:

Jim Dykes, MD
Leila Finn, MA
Eimer Kernan, MSW, LMSW, MBA, RYT
Debbie Lee, PhD, RN
Cynthia Moore, MS, RD, CDE
Donna Scattergood, PhD, RN
Art Waber, MFA
Ken Zeno, MA, MAT, PhD Candidate