



Program Approval Handbook



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NBHWC Program Approval
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Introduction to NBHWC Program Approval

Thank you for your interest in NBHWC Program Approval!

NBHWC Program Approval is a rigorous process intended for organizations seeking to provide coach training and education in alignment with the NBHWC standards for health and wellness coach training. This handbook outlines the training and education requirements for NBHWC Approved Training Programs as well as provides numerous resources for the application process. You will find the NBHWC Code of Conduct for Approved Training Programs, a list of the core competencies for health and wellness coaches, as well as many other resources to ensure that your program has all the necessary tools to deliver a coach training and education program to the highest standards. We look forward to having your coach training and education program become part of the NBHWC collaborative network as we build and advance the field of health and wellness coaching together.

Overview of NBHWC Program Approval

NBHWC Program Approval identifies health and wellness coach training and education programs that have met NBHWC standards for preparing capable, competent health and wellness coaches. Graduates from NBHWC Approved Programs qualify to apply for the National Board Certification Examination, offered in partnership with the National Board of Medical Examiners (NBME). Graduates who pass the National Board Certification Examination earn the designation: National Board Certified Health and Wellness Coach (NBC-HWC).

NBHC Program Approval Designations

Approved	Not Approved
<ul style="list-style-type: none"> • Programs that meet NBHC standards and qualify for Approval. • Approval is annually updated. • Programs are reviewed every 3 years to sustain approval. 	<ul style="list-style-type: none"> • Programs that do not meet NBHC standards for Approval. • Programs are provided feedback on areas of deficiency in accordance with each required standard. • Reapplication is encouraged with support provided during the reapplication process.

NBHC Program Approval Fees

Approval Level	Application Fee*	Annual Fee	Administrative Fee
Approved	\$899	\$700	
Approved; has not yet graduated a cohort	\$899	\$700	\$200**
Not Approved	\$899		

All fees are non-refundable.

* Application Fees are due, in full, at the time of application account creation.

** Administrative Fees are charged annually until a program graduates the first cohort.

Glossary of Essential Terms

Term/Phrase	Definition
Allied Health Professional	A distinct group of health professionals (other than doctors or registered nurses) with specific training, registration, or licensing to perform services in the care of patients. Many have expertise in disease transmission, prevention, and diagnosing as well as treating and rehabilitating people of all ages. Includes many specialties; typically provides direct patient care to assist with restoring optimal health.
Approval and Approved Program	Recognizes an endorsement of a health and wellness coach training program, specifically one that has met the minimum standards as set forth by the NBHWC.
Asynchronous and Synchronous Training	<p>Asynchronous training is faculty-constructed instruction that occurs outside of live instructional time. Examples include watching recorded lectures or participating in interactive online activities that are not live but are faculty-constructed. (Does not include reading assignments or triad practice without faculty present.)</p> <p>Synchronous training is faculty-led instruction that occurs under the direct, “live” facilitation of the program faculty, either in-person or remotely.</p>
Faculty	Denotes program personnel, designated by the applicant program or host organization, who are responsible for the development, delivery, and assessment of curricula in content areas 1-5 of the HWC Certifying Examination Content Outline.
NBHWC	<p>The National Board for Health and Wellness Coaching – A nonprofit credentialing body with a mission to champion the advancement of health and wellness coaching through evidence-informed standards of education, training, credentialing and research.</p>
Instructional Hour	A full 60-minutes of instruction without breaks, either faculty-led or faculty-constructed.
JTA	<p>Job Task Analysis – A validated work-product that seeks to delineate the knowledge, skills, and abilities required to successfully perform that which is occupationally necessary.</p>

Term/Phrase	Application
License/Registration	A license is a legal designation with a clear set of requirements that authorizes individuals to work in a specific profession (typically state regulated); a registration is the least restrictive form of state regulation and denotes a qualified professional that has obtained specific professional qualifications, including registering those qualifications with the state, before practicing in the field of expertise. The NBC-HWC credential is neither a license nor a registration.
NBC-HWC	National Board Certified Health and Wellness Coach – The landmark credential for health and wellness coaches as established by the NBHWC and offered in partnership with the NBME. The NBC-HWC is a certification, not a license nor national registration.
NBME	The National Board of Medical Examiners – An organization dedicated to the assessment of healthcare professionals. The NBME has partnered with the NBHWC to advance the field of health and wellness coaching on a global scale.
Practical Skills Assessment	At least one of the required student practice coaching sessions must be assessed by faculty for competency in practical skills; the assessment must result in a pass/fail grade. The coaching session can be presented in a live or recorded format, and a passing grade is required for successful completion of the program.
Program	A health and wellness coach training and education program that is offered by a host organization, currently falling within one of the following categories: academic credit programs, academic non-credit programs, private sector programs, and private sector internal programs. Programs are considered “Applicant Programs” through the application process and must meet specific criteria to be eligible to be an NBHWC Approved Training Program.
Program Director, Program Lead, Program Manager, Coordinator, or Primary Contact	Denotes the primary contact person within an Approved Program who has the direct oversight of the program and authority to make or secure the resources necessary to seek and maintain program approval.
Published	Denotes an artifact of the program that has been made available to the public, such as a website page/link, a brochure, etc
Recertification	Identifies the process whereby an NBC-HWC maintains certification status.

NBHC Program Approval Standards

Outlined below are the NBHC standards for coach training and education programs. It is recommended that your program faculty and stakeholders thoroughly review and ensure understanding of the standards prior to beginning the application process.

Part 1: Instructional Hours

- A program includes a minimum of 75 instructional hours of training and education covering all competencies outlined in the HWC Certifying Examination Content Outline (1 instructional hour is defined as 60 minutes without a break).
- From the required 75 instructional hours, 60 hours come from content areas 1, 2, 3, 4 with at least 40 hours being delivered synchronously.
- From the required 75 instructional hours, 15 hours come from content area 5 in either synchronous or asynchronous format.

Part 2: Practical Skills Development, Feedback, and Assessment

- As part of the required 75 instructional hours, each student demonstrates to appropriate program faculty at least 3 complete practice coaching sessions of at least 30 minutes in duration.
- As part of the required 75 instructional hours, appropriate program faculty provide at least 20 minutes of synchronous, post-session feedback for each of at least 3 student practice coaching sessions, totaling a minimum of 60 minutes of synchronous post-session feedback for each student.
- As part of the required 75 instructional hours, your program administers at least 1 Practical Skills Assessment (PSA) that measurably demonstrates a student's practical skills in alignment with the NBHC practical skills guidelines; the PSA must be a scorable assessment tool outlining explicit observables of proficient skills.
- As part of the required 75 instructional hours, your program's Practical Skills Assessment (PSA) reflects a student's final assessment of practical skills, occurring after the completion of 80% of the program and resulting in a pass/fail grade in practical skills.

Part 3: Faculty Standards

- Content Areas 1, 2, 3, & 4
 - » A minimum of 48 hours of the required 60 instructional hours are delivered by faculty that have earned the NBC-HWC designation.*
 - » A minimum of 48 hours of the required 60 instructional hours are delivered by faculty with at least 200 hours of coaching practice.*
 - » A minimum of 15 hours of the required 60 instructional hours are delivered by faculty with a minimum of a master's degree in a health and wellness-related field, or a bachelor's degree plus a state license or national registration in a nationally recognized health and wellness-related field (see note below).*

In lieu of a master's degree in a health and wellness-related field, or a bachelor's degree plus a state license or national registration in a nationally recognized health and wellness-related field, faculty who meet the conditions of equivalent experience may deliver the instructional hours in Content Areas 1, 2, 3 and 4. Details are outlined in the section titled, Faculty Equivalent Experience.

- Content Area 5
 - » A minimum of 12 hours of the required 15 instructional hours are delivered by faculty with a minimum of a master's degree in a health and wellness-related field, or a bachelor's degree plus a state license or national registration in a nationally recognized health and wellness-related field.*

**Team teaching is permitted; however, the delivery of instructional hours by appropriate faculty as outlined must still be demonstrated and met in the above standards.*



Detailed Training and Education Requirements

Program Establishment

To be eligible to be an NBHWC Approved Program, a program must meet specific establishment requirements in addition to aligning with the NBHWC standards. Before beginning the application process, be certain to review the following:

- The program must encompass a curriculum with a distinct and identifiable program name; the program must be fully approved and recognized by the host organization as a distinct and identifiable program.
- The program must include a curriculum and program design that meets or exceeds all defined NBHWC standards.
- The program must have qualified faculty on record, either employed or contracted by the applicant program or host organization; faculty on record must be fully able to deliver the curriculum.
- The program must have an identified Program Director, Program Lead, Program Manager, Coordinator, or Primary Contact responsible for program administration and oversight.
- The program must be prepared to issue a fully executed, official document from the host organization to every successful graduate (certificate of completion, diploma, transcript, etc.).

Instructional Hours

Instructional hours are the backbone of all coach training and education programs, and the number of instructional hours can vary widely based on the philosophy of each program. At a minimum, coach training and education programs should consider the number of instructional hours needed for a student to learn, develop, and practice the skills needed to become a professional health and wellness coach. Additionally, each program must ensure that **each and every student** completes the minimum number of instructional hours required according to the NBHWC standards.

Instructional Hour Requirements:

1. A minimum of **75 instructional hours** of training and education covering all competencies outlined in the HWC Certifying Examination Content Outline.
 - a. An Instructional Hour is defined as a full 60 minutes *without breaks*. Any and all breaks should be removed from the calculations of instructional time.
 - b. All competencies in the Health & Wellness Coach Certifying Examination Content Outline **must** be reviewed; students are responsible for knowledge in *all* competencies and instruction for all competencies must be verifiable.
 - c. Reading and self-directed independent learning is strongly recommended and is **not** included in the 75 hours.
 - d. Attendance policies must clearly outline requirements related to complete acquisition of the minimum 75 instructional hours by each student.

2. From the minimum 75 instructional hours, **60 instructional hours** must address Health & Wellness Coach Certifying Examination Content Areas 1, 2, 3, & 4.
 - a. From the minimum of 60 instructional hours in Content Areas 1, 2, 3, & 4, **a minimum of 40 instructional hours** must be faculty-led and synchronously delivered using a live, fully interactive format. Synchronous instruction may include:
 - i. Coach skill and strategy demonstrations.
 - ii. Practical skills development (coaching practice) and practical skills assessments conducted during synchronous instruction.
 - iii. **Not included are** practical skills development sessions (coaching practice) that take place *outside* of synchronous instructional hours.
 - b. From the minimum of 60 instructional hours in Content Areas 1, 2, 3, & 4, **up to 20 instructional hours** may be faculty-constructed and asynchronously delivered. This

instructional time must be fully accounted for in a minute-by-minute format. This means that only asynchronous instructional hours that can be verified for time are accepted. The following formats typically meet this requirement:

- i. Viewing faculty-narrated PowerPoints
 - ii. Listening to or watching recorded coaching demonstrations
- c. All asynchronous instructional hours must assess student learning; examples of such assessments include:
- i. Answering homework questions or discussion board posts
 - ii. Completing analyses, reviews, reports, or presentations
 - iii. Quizzes or exams

3. From the minimum 75 instructional hours, **15 instructional hours** must address Health & Wellness Coach Certifying Examination Content Areas 5.

- a. Content Area 5 may be delivered in synchronous or asynchronous formats.
- b. Instruction should be in alignment with the competencies outlined in the most current Health & Wellness Coach Certifying Examination Content Outline.
- c. If asynchronously delivered, the above requirements for asynchronous instruction must be met as outlined in 2b.
- d. All asynchronous instruction must also meet the requirements for assessing student engagement and learning as outlined in 2c.

Instructional Hour Summary:

	Synchronous Hours	Asynchronous Hours
Content Areas 1, 2, 3, & 4	Minimum 40 hours	Up to 20 hours
Content Area 5*	Minimum of 15 hours	Minimum of 15 hours

* Content Area 5 may be offered either synchronously or asynchronously.

Practical Skills Development, Feedback, and Assessment

The development of practical skills in health and wellness coaching is one of the most critical components provided by coach training and education programs. The approach to practical skills development should be comprehensive and multi-faceted, and programs should consider how to best develop practical skills rather than focus exclusively on meeting minimum standards. Clear expectations should be established for students from the onset of the program, and students must have opportunities to both understand and practice new skills. *The Practical Skills Assessment tool should serve as a guide throughout the program, and formative feedback provided by faculty should refine and enhance student practical skills to prepare them for professional practice.*

Practical Skills Development and Feedback Requirements:

1. Practical Skills Development:

- a. A student must demonstrate three (3) complete, separate practice coaching sessions.
 - i. Each practice coaching session must be a minimum of 30 minutes in duration.
 - ii. A “complete” practice coaching session is defined as a session conducted from an opening through a closing. “Complete” sessions are not skill practice sessions or partial sessions.
 - iii. Practice coaching sessions may be conducted in a live or recorded format.
 - iv. Each session must be observed or reviewed by a faculty member in order to count as a part of the program’s instructional hours and meet the requirements of an observed session.

2. Practical Skills Feedback:

- a. Each of the three (3) complete, separate practice coaching sessions must be followed by faculty-led developmental feedback provided verbally in real time.
 - i. Each feedback session must be a minimum of 20 minutes in duration per student, per practice coaching session, and counts as a part of the program’s synchronous instructional hours in Content Areas 1, 2, 3, & 4.
 - ii. Feedback sessions must occur in between practice coaching sessions and prior to the student’s next practice coaching session.
- b. Feedback sessions must be guided by the program’s practical skills rubric utilized to evaluate a student’s competency in practical skills.

Practical Skills Assessment (PSA) Requirements:

The Practical Skills Assessment (PSA) is a key component of every student's coach training and education. During the PSA, the student is demonstrating key knowledge and skills relevant to professionally practicing health and wellness coaching with clients. It is imperative for students to have sufficient time to develop their skills and prepare for this assessment. Students who are not ready or do not pass the PSA should be provided additional learning opportunities to develop the necessary skills.

The PSA is comprised of the two key components outlined below.

1. Practical Skills Assessment (PSA) Tool/Rubric:

- a. The PSA must assess all areas of the NBHWC Practical Skills Guidelines.
- b. The PSA must be detailed in rubric format. *If the PSA Tool/Rubric is adapted from the NBHWC Practical Skills Guidelines, credit must be given to NBHWC in the documentation.*
- c. The PSA must detail observable behaviors; a satisfactory category must be minimally included.
- d. The PSA must detail pass/fail criteria and clearly indicate the pass/fail result from the PSA administration.

2. Practical Skills Assessment (PSA) Administration:

- a. The PSA may be the final session of the required three (3) complete, separate practice coaching sessions; ***it is preferred that the PSA is a specific assessment session conducted after the completion of the required three (3) complete, separate practice coaching sessions.***
- b. The PSA must be assessed by faculty for competency in practical skills with the PSA Tool/Rubric.
- c. The PSA must be the final assessment of practical skills, occurring after the completion of 80% of the program and instruction in all Ethics and Legal competencies.
- d. The PSA must result in a pass/fail grade in practical skills.
- e. The passing date on the final PSA is the first date that can appear on the NBHWC Coaching Log for exam eligibility.

Faculty

The faculty standards have been established to ensure that faculty of health and wellness coach training and education programs have satisfactory education, experience, and credentials to provide quality training to health and wellness coaching students. Programs will want to ensure that faculty are both well-educated in health and wellness coaching and well-trained in the interpersonal skills that give the field its unique identity and effectiveness.

A program's faculty is responsible for meeting the NBHWC standards in four ways:

1. Provide training and education in Content Areas 1, 2, 3 & 4 of the Health & Wellness Coach Certifying Examination Content Outline.
2. Provide training and education in Content Area 5 (health and wellness knowledge) of the Health & Wellness Coach Certifying Examination Content Outline.
3. Oversee and manage skills development and developmental feedback, including mentoring.
4. Administer a Practical Skills Assessment (PSA) for each coaching student who has completed the training and education in the coaching competencies.

Overview of Faculty Requirements:

To meet the faculty standards for NBHWC Program Approval, programs must demonstrate instruction by highly qualified faculty that meet the minimum standards for delivery of the program's instructional hours. The key areas for faculty credentials and education include:

1. Faculty with a current and active NBC-HWC credential,
2. Faculty with 200 hours of coaching experience,
3. Faculty with a graduate-level health and wellness related degree; OR, alternatively,
4. Faculty with a bachelor's degree plus a state license or national registration in a nationally recognized health and wellness-related field, which is considered equivalent to a graduate degree in a health and wellness related field.

Meeting the Faculty Standards:

Meeting the standards for NBHWC Program Approval requires establishing a highly qualified, skilled team of faculty members who deliver the minimum required instructional hours in Content Areas 1 - 5 of the Health & Wellness Coach Certifying Examination Content Outline. There is no minimum number of faculty required to provide instruction, and there is no minimum faculty/student ratio. To be effective in meeting the faculty standards, programs should consider how the *instructional hour requirements* are met by the program's faculty in accordance with each standard. Any and all faculty, including mentors, involved in the program's design and delivery must be reported in the application process.

Meeting the standards for faculty includes ensuring that:

1. A minimum of **48 hours of the 60 instructional hours in Content Areas 1, 2, 3, & 4** is delivered by faculty that have earned the designation of National Board Certified Health and Wellness Coach (NBC-HWC).
2. A minimum of **48 hours of the 60 instructional hours in Content Areas 1, 2, 3, & 4** is delivered by faculty that have completed 200 hours of live, professional coaching sessions which meet the following criteria:
 - a. Individual or group health and wellness coaching sessions
 - b. Live formats including face-to-face, telephonic or virtual/video coaching (coaching via text, message, or other digital formats do **not** count as live formats)
 - c. A minimum of 20 minutes in duration, 75% of which must be coaching process and not instructional, educational or directional
 - d. Volunteer or for pay, but may **not** be delivered to friends or family or in services exchange with other coaches
3. A minimum of **15 hours of the 60 instructional hours in Content Areas 1, 2, 3, & 4** is delivered by faculty that have a minimum of a master's degree in a health and wellness-related field, or a bachelor's degree plus a state license or national registration in a nationally recognized health and wellness-related field.
4. A minimum of **12 hours of the 15 instructional hours in Content Area 5** is delivered by faculty that have a minimum of a master's degree in a health and wellness-related field, or a bachelor's degree plus an active, nationally-recognized registration or state license.
5. *Team teaching is permitted for two (2) faculty members to deliver instructional hours together; however, the delivery of instructional hours by appropriate faculty as outlined must still be demonstrated and met in the above standards.*

Faculty Equivalent Experience:

NBHCW recognizes that, as a growing field, there are Faculty with considerable experience and education who have significantly contributed to the development of the health and wellness coaching profession but whose credentials lie outside of the areas that have been historically outlined in the NBHCW Program Approval standards. To acknowledge the experience and contributions of these Faculty members, the following may be considered in lieu of a master's degree in a health and wellness-related field or a bachelor's degree plus a state license or national registration in a nationally recognized health and wellness-related field.

Note: Equivalency will only be recognized in the delivery of Content Areas 1, 2, 3, & 4.

1. A current and active NBC-HWC credential, **plus**,
2. Achievement in **at least two** of the following eligible requirements:
 - a. A master's degree in a field related to course development or facilitation such as adult learning, instructional design, or education
 - b. Authorship of textbook which has contributed to the development of the field and the NBHWC standards and processes
 - c. Identification and participation as a Subject Matter Expert (SME) for NBHWC and NBHWC related projects, including competency development
 - d. A minimum of 2,500 hours of coaching experience (not education or counseling)
 - e. Served a key role, such as Program Director or Lead Content Developer, in the development of the curriculum for a current NBHWC Approved Training & Education Program
3. If your program has faculty who meet equivalency requirements, the equivalency must be listed in the Faculty Table in the application and documentation must be uploaded for verification.

Details Relevant to Faculty Requirements:

Definition of health and wellness related degree:

A degree in a health and wellness related field emphasizes various aspects of health in order to effect and improve the health and wellbeing of individuals and communities. Health and wellness related fields may include education in physical, biological, and social sciences and is inclusive of education in advancing behavior change. Health and wellness related fields often provide education and skill development in areas of health promotion, public health, healthy living, wellness advocacy and support, health and wellness program development, and the advancement of holistic, patient-centered healthcare.

Examples of health and wellness related degrees include, but are not limited to:

Health coaching, integrative health, psychology, health promotion, health education, wellness, clinical social work, counseling, marriage and family therapy, couples therapy, exercise physiology, kinesiology, nursing, physiology, nutrition, dietetics, public health, yoga therapy, physical therapy, occupational therapy and areas of medicine, including psychiatry, osteopathic medicine, naturopathic medicine, chiropractic medicine, and traditional Chinese medicine.

Guiding questions for determining a health and wellness related degree:

- Has coursework been completed on various aspects of health, such as disease prevention, fitness, nutrition, and mental health?
- Has coursework been completed in health care delivery, health systems management and analysis, professional responsibilities in healthcare, ethics, leadership and management as related to healthcare, global health, or epidemiology?
- Has coursework been completed in fundamental biology, chemistry and/or social sciences?
- Has coursework been completed that examines the health care system (principles and practices), disease prevention, quality of life, health literacy, needs assessment and evaluation, and critical lifestyle behaviors that impact well-being and mortality?
- Has coursework been completed in evidence-based practices that influence individual to population health?

Parameters of national registration or state licensure in a nationally recognized health and wellness-related field (pertaining to faculty with bachelor's degrees with additional credentials):

1. National registrations require practitioners to provide information about their training and experience to a state consumer protection agency. General requirements for a registration include: graduating from an accredited program within the specific field or profession, meeting certification requirements of a national organization, completing a specified amount of training, passing an exam, and participating in continuing education.
 - a. Examples include, but are not limited to: Registered Nurse (RN); Registered Dietitian Nutritionist (RDN); Registered Occupational Therapist (ROT); Certified Health Education Specialist (CHES).
 - b. Note: The NBC-HWC credential is not a registered practice that is overseen by state consumer protection agencies.**
2. State licensure includes that practitioners meet specific education, training, or practice standards for that state, in addition to being licensed to provide a service. In some states, practitioners must have specific credentials before using a professional title.
 - a. Examples include, but are not limited to: Licensed Practical Nurse (LPN); Licensed Dietitian Nutritionist (LDN); Licensed Social Worker (LSW).

Details for Mentors:

NBHC recognizes that many programs utilize mentors to provide support, observation, and feedback opportunities to coaching students. If your program uses or plans to use mentors to support coaching students, be certain to consult the following detailed information regarding the definition and required qualifications of mentors providing instructional support in NBHC Approved Programs.

Definition of Mentor:

A Mentor Coach is an experienced and trusted health and wellness coach who provides support, feedback, and guidance to individuals working to master the practice of health and wellness coaching through the development of the efficacy of the health coach-client relationship, and the growth of skills and competencies for successful coaching.

Mentor Coaches in NBHC Approved Programs:

Mentor Coaches who specifically provide support, feedback, and guidance to coaching students in NBHC Approved Training Programs, including the administration of Practical Skills Assessments and required coachee feedback sessions, are considered faculty of the NBHC Approved Training Program.

NBHC Approved Training Programs who hire or contract Mentor Coaches to provide support, feedback, and guidance to coaching students, including the administration of Practical Skills Assessments and required coachee feedback sessions, must ensure that the Mentor Coaches meet the minimum requirements for faculty, per the NBHC standards, and are included on the NBHC Approved Program's Faculty Table.

Mentor Qualifications for Mentors serving as faculty in NBHC Approved Programs:

- a. Current and active NBC-HWC credential, and
- b. A minimum of 200 hours of coaching experience, and
- c. Must meet the requirements of faculty for the NBHC Approved Program as it applies.

Program Approval Process



*These steps only apply if program approval has been granted.
Note that completion of the program approval process does not imply nor guarantee program approval.

Application Review

With the submission of a completed application, the review process begins. Your program will be assigned an NBHWC Program Reviewer, who will be responsible for conducting a systematic review of your program in alignment with the NBHWC standards. The review process is as follows:

Step 1: Application Review

The review process begins with your NBHWC Program Reviewer spending the first 10-14 days completing an initial review of your application materials. If, during this time, the Reviewer notes any errors or omissions in your documentation, they will reach out directly for that information.

Step 2: Virtual Site Visit

Once the initial review of your application is complete, your Reviewer will reach out to schedule your program's Virtual Site Visit, the next step in the review process. The Virtual Site Visit is an opportunity to share details about your program, program philosophy, and your program's training of student coaches. Conducted virtually, the Virtual Site Visit typically takes place within 15-30 days of application submission.

The primary parties participating in the Virtual Site Visit will be the Reviewer and your Program Director; you are encouraged to include other internal stakeholders as appropriate, such as program faculty and administrators. During the 90 minutes of your Virtual Site Visit, you can expect that your Reviewer will share some reflective observations and ask questions regarding your application and accompanying documentation. The visit will take the form of an interview with supportive, program focused dialogue.

Step 3: Submission of Additional Documentation

After your Virtual Site Visit, your Reviewer will complete a final review of your application and notify you if any documentation is missing or requires additional updates. You will have two (2) business days to submit documentation requested by your Reviewer in order for this final part of the process to be completed. Once submitted, your review will be officially closed.

Step 4: Approval Decision

At the completion of the review, your Reviewer prepares a final report with verification of evidence assembled from the application review, the Virtual Site Visit, and any additional documentation received. This report is presented to the NBHWC Program Approval Department for final review and confirmation; this process can take up to 30 days after the completion of the Virtual Site Visit. Once the final review and confirmation of evidence has been completed, you will receive notification of the final decision regarding approval status and any other relevant information.

Maintaining NBHWC Approval



Once an NBHWC Approved Program, maintenance of Approval comes with responsibilities for your coach training and education program. Your NBHWC Approved Program must, at a minimum, be administered **as Approved** and maintain compliance with the NBHWC standards and the NBHWC Approved Training Program Code of Conduct. Approval periods last for three years and reapproval is required at the end of each three-year cycle. As you pursue NBHWC Program Approval, make certain to review all the requirements and responsibilities to maintain Approval status.

Annual Updates

NBHWC Approved Programs are required to complete Annual Updates on the anniversary of Approval. These updates consist of an attestation that your program continues to meet the minimum standards for Approval and requires documentation of updates, modifications, and enhancements to your program. Also required is the upload of a current Faculty Table with the qualifications for all faculty involved in the delivery of the Approved Program. **Failure to fully complete Annual Updates may result in the loss of NBHWC Program Approval.**

Annual Update Sample Questions

- Please describe significant activities for the organization and program over the past year.
- Please describe in detail your program's growth over the past year (include any expanded outreach and marketing, increased number of students, adding/expanding faculty, etc.)
- Please describe in detail any program changes over the past year (include any general program changes, content delivery changes, changing content delivery [such as moving synchronous to asynchronous or vice versa], modifications to instructional hours, etc).
- Please describe any content modifications over the past year (this includes any and all modifications in content itself and include if additional content has been added).
- Please describe feedback you have received in your program evaluations in the past year.

- How many students have fully completed your program in the last 12 months? How many students are projected to fully complete your program in the next 12 months?
- What changes, if any, have occurred in your faculty in the last 12 months? Please describe how your faculty meets the current NBHWC standards.
- What feedback do you hear from your graduates about the national board exam?
- How can NBHWC help encourage your graduates to sit for the board exam?
- What type of support would you be interested in receiving from NBHWC in the ongoing maintenance of your program's approval?

Audits

Audits of NBHWC Approved Programs are done periodically to review and verify program operations in alignment with the NBHWC standards. By agreeing to operate as an NBHWC Approved Program, your program agrees to comply with and participate in any audit deemed necessary or relevant by NBHWC.

Whether formal or informal, audits may and can be conducted to provide insight into NBHWC Approved Program policies and procedures as well as to assure compliance with the NBHWC standards and the NBHWC Code of Conduct. Please consult the NBHWC Code of Conduct with more information on audit participation and compliance.

Faculty Updates

Changes in faculty are a natural and normal part of the delivery of an Approved Program. While you may have faculty that stay with your Approved Program for a significant length of time, you may also experience faculty turnover or growth as your program develops and matures. When such changes occur, it is important that NBHWC has a record of your Approved Program faculty changes in order to protect the integrity of your Graduate Letter of Eligibility for the NBHWC Board Exam. Updated Faculty Tables are available in your Approved Program's profile and must be submitted every time there is a change to your faculty.

Falling Below the NBHWC Standards

Sometimes there are program changes that are unanticipated and impact your program's ability to be delivered as approved. While most changes are easily rectified through delivery adjustments and minor modifications, there are times where the changes are significant and require action. **When a change in your program's delivery causes your program to fall below the minimum NBHWC standards, immediate action is required.** Approved Programs have 30 days from the date of the known change to provide notification to NBHWC. Once NBHWC is notified, the following remediation process, also outlined in the the NBHWC ATP Code of Conduct, will be followed to address necessary adjustments:

- The Approved Program develops and implements a remediation plan **within 90 days** of falling below any standard. If the Approved Program is able to complete the remediation plan within 90 days, no further action will be taken; the Approved Program may continue operations as normal.
- If the Approved Program is unable to remediate any standard(s) non-compliance within 90 days, the Approved Program will have **up to 180 days** to implement and complete the remediation plan. However, during this period the Approved Program will be considered to be in “probationary status,” which will include removal of the Approved Program from the NBHWC website and current students of the program must be notified.
- If the Approved Program fails to return to the minimum standards **within the 180 day** rectification period, NBHWC will revoke approval status. The program will need to reapply in order to be reinstated as an NBHWC Approved Program.

Changes can be challenging and overwhelming. Make certain to stay in touch with NBHWC whenever your program undergoes a significant change that could impact Approval status.

Practical Skills Submission

At the one-year anniversary of receiving Approval, or when your program completes its first cohort, your program is required to submit a recording of the final, graded assessment session of a student coaching for at least 30 minutes with the Practical Skills Assessment rubric used to assess practical coaching skills. Recordings are used to review the nature and scope of your program’s Practical Skills Assessments, feedback provided by faculty, and outcomes. Notices will be provided for this required submission; programs completing the first cohort will receive upload links once NBHWC has been notified of the cohort’s completion.

Reviews & Reapproval

Every three years, your program hits a milestone for review and reapproval. These reviews, conducted virtually, are an opportunity to review the ongoing development of your program as well as discuss continued alignment with NBHWC standards, instructional enhancements, score reports, and any required updates. Reviews are scheduled 30-60 days in advance of the renewal date and the review itself is an estimated 60-minutes for discussion. Programs are provided review questions in advance to prepare for the discussion, and any stakeholders involved in the management, development, and delivery of the program are welcome to attend.

Reviews are a mandatory part of the Reapproval process. **Programs must be prepared to be reviewed for Approval every three years.**

Review & Reapproval Sample Questions:

- Please describe your program's general development since becoming NBHWC Approved.
- Please describe the philosophy of your coach training and education program. How has it changed and/or evolved since becoming NBHWC Approved?
- What do you think are the strengths of coaches who complete your program? What do you believe makes your coaches unique from other programs?
- How do you feel the NBHWC Approved status has impacted your program and its training of coaches? What is your NBHWC Approved Program's vision for the future?

NBHC Approved Training Program Code of Conduct



Introduction

Purpose

NBHC Program Approval identifies health and wellness coach training and education programs that have met the NBHC standards for preparing capable, competent health and wellness coaches. The purpose of this document is to outline the policies and agreements established as coach training and education programs apply for and become NBHC Approved Programs. The policies and agreements outlined in this document ensure that NBHC Approved Programs operate with consistency and integrity to benefit the development and professionalization of health and wellness coaching.

Scope

Coach training and education programs that are seeking initial NBHC Approval or renewal of Program Approval status are responsible for understanding and complying with all of the policies and agreements outlined in this document. The scope of these policies and agreements shall be understood as applicable both during the Program Approval application process and once Approval is received. These policies and agreements shall be understood as binding guidelines and responsibilities to ensure appropriate conduct and integrity is

maintained; attestation to the adherence of these policies and agreements is completed as a part of the NBHC Program Approval application and renewal processes.

Program Promise

When seeking or renewing NBHC Program Approval, it is the expectation of NBHC that all coach training and education programs commit, in good faith, to be accurate and truthful in all information presented through the NBHC Program Approval process, and through the acquisition and maintenance of Program Approval status. Falsification and/or fraud, in any format, will not be tolerated and may result in refusal or removal of NBHC Approval status.

Falsification shall include, but is not limited to, the following: fabrication of information; false or misleading program information and details; false or misleading information regarding program operations; false or misleading information and/or data; false or misleading advertising and marketing; false or misleading use of NBHC Approved Program language, logos or other NBHC materials; false or misleading information regarding the program's Approval status.

Fraud shall include, but is not limited to, the following: the false representation of facts, intentionally withholding information and/or providing false statements.

NBHC Approved Training Program Code of Conduct

1. Organization and Program Conduct

- a. Organizations seeking NBHC Approval status for a coach training and education program must ensure compliance with the NBHC Code of Conduct from the date of application through the program review process. Organizations that have and/or provide an NBHC Approved Program are obligated, by virtue of the receipt of approval status, to be in full compliance with the NBHC Code of Conduct.
- b. Organizations seeking NBHC Approval status for a coach training and education program must attest (in the application process) the first enrollment date for the program presented in the NBHC application for program approval; this date shall be reflective of the date from which the program first met the requirements of the NBHC standards and is not modifiable.
- c. NBHC Approved Programs, and overseeing organizations, shall maintain the integrity of the program, as approved, and to comply with any provisions of approval identified by the NBHC Program Approval Department.
- d. NBHC Approved Programs, and overseeing organizations, only implement curriculum and utilize materials that are proprietary to the program and the program has explicit permission to use.
- e. NBHC Approved Programs, and overseeing organizations, abide by the policy that an NBHC Approved Program operates under singular approval and may not share approval status with any other programs that maintain independent leadership structures from the Approved Program. *This holds true regardless of authorization granted by the Approved Program to carry out other specific activities and/or use the Approved Program's expertise, ideas and processes.*
- i. NBHC Approved Program may be offered **within or for** an outside organization provided that the following conditions are met:
 1. The NBHC Approved Program is not misrepresented as an affiliate of or in partnership with the outside organization. The use of the NBHC Approved Program logo is exclusive to the Approved Program only; outside organizations are prohibited from using the NBHC Approved Program logo.
 2. The NBHC Approved Program is administered completely intact as Approved (as it was presented in the original application and updated through Annual Updates).

3. The NBHWC Approved Program maintains the integrity of the program as Approved, regardless of the structure or influence of the outside organization.
 4. The NBHWC Approved Program is provided only by the faculty (designers, instructors, mentors, evaluators, etc) that were presented in the original application and updated through Annual Updates. Should the faculty be altered (i.e. reduced faculty size) in the provision of the NBHWC Approved Program within or for an outside organization, the faculty involved must be able to meet all the requirements of the NBHWC standards for each complete cycle of the NBHWC Approved Program.
 5. Marketing of the NBHWC Approved Program **within or for** an outside organization shall be transparent and clearly conveyed.
 6. Responsibility for the provision of Graduate Letters of Eligibility to graduates of the NBHWC Approved Program is exclusive to the NBHWC Approved Program in accordance with the policy for graduates (see 5). There may be no alteration to the NBHWC Approved Program Graduate Letter of Eligibility, regardless of the provision of the Approved Program **within or for** an outside organization.
 7. If the above policy is not being adhered to in the administration of the NBHWC Approved Program, the NBHWC Approved Program and overseeing organization will be held responsible. NBHWC reserves the right to suspend or revoke Approval status for any and all violations related to the conditions as listed above.
- f. NBHWC Approved Programs, and overseeing organizations, will provide notification within 30 days to NBHWC of **any** drop below NBHWC standards. If or when this occurs, the NBHWC Approved Program will comply with the following remediation process:
- i. Approved Programs must develop and have a remediation plan in place **within 90 days** of falling below any standard. If the Approved Program is able to complete the remediation plan within 90 days, no further action will be taken, and the Approved Program may continue operations as normal.
 - ii. If an Approved Program is unable to remediate any standard(s) non-compliance within 90 days, the Approved Program will have **180 days** to implement and complete the remediation plan. During this period, the Approved Program will be considered to be in “probationary status.” If

moved to probationary status, the Approved Program will be removed from the NBHWC website and will be required to notify students of the current probationary status with NBHWC.

- iii. If an Approved Program fails to return to the minimum standards ***within the 180 day*** rectification period, NBHWC will revoke approval status. The program will need to reapply in order to be reinstated as an NBHWC Approved Program.
- g. In the acceptance of and operation under NBHWC Program Approval and the NBHWC Approved Training Program Code of Conduct, all NBHWC Approved Programs are subject to review should a formal Program Complaint be made against the program. All Program Complaints will be reviewed and measured against the Approved Training Program Code of Conduct. NBHWC reserves the right to enact audits, reviews, and other disciplinary procedures in the event of a substantiated complaint and/or if just cause is found for an investigation or further action.
- h. In the acceptance of and operation under NBHWC Program Approval and the NBHWC Approved Training Program Code of Conduct, NBHWC retains the right, at its sole discretion, to issue, amend or revoke the rules and regulations governing NBHWC Program Approval. NBHWC Approved Programs and applicants in process agree to abide by any decision of NBHWC regarding the matters of NBHWC Program Approval, including changes in the guidelines and requirements, and the revocation of NBHWC Program Approval, if deemed necessary.

2. Faculty Conduct

- a. Definition:
 - i. Faculty members of an NBHWC Approved Program shall be designated as all of those individuals directly involved in the design, development, instruction, mentoring, and assessment of student coaches enrolled in an NBHWC Approved Program. Faculty member designation, as determined by the policies of NBHWC, is regardless of an individual's operation as employee or contractor of an NBHWC Approved Program.
- b. Training and Education:
 - i. Faculty of an NBHWC Approved Program who need to complete an NBHWC Approved Program in order to earn an NBC-HWC credential may select from any current NBHWC Approved Programs.

- » It is permitted for Faculty to attend the NBHWC Approved Program through which employed or contracted; however, if faculty is attending their own NBHWC Approved Program, they will be unable to teach while enrolled as a student in the program.

c. Code of Ethics:

- i. NBHWC Approved Programs, and overseeing organizations, ensure that all affiliates of the program, including managers, faculty members, and mentors, maintain compliance with the **NBHWC Code of Ethics** (page 79).
- ii. All faculty members of an NBHWC Approved Program, regardless of credential and the individual's operation as employee or contractor with the overseeing organization, will conduct student training and mentoring in accord with the NBHWC Code of Ethics.
- iii. If the NBHWC Code of Ethics is violated by a faculty member, it is the responsibility of the NBHWC Approved Program, and overseeing organization, to take immediate action to remedy the situation. If NBHWC discovers negligence on the part of the NBHWC Approved Program, or overseeing organization, NBHWC reserves the right to suspend or revoke approval status.

3. Governance of NBHWC Brand & Logos

- i. The NBHWC acronym may be utilized when stating a specific coach training and education program's approval status or when describing NBHWC as an entity. In any and all materials provided or distributed by an applicant, NBHWC Approved Program, and/or overseeing organization, the use of the NBHWC business name (in full or in part) and acronym must clearly and factually convey the role of NBHWC in the health and wellness coaching industry only. Affiliation and partnership with NBHWC may not be implied in any way unless explicit permission has been granted.
- ii. NBHWC Approved Programs, and overseeing organizations, are not permitted to use NBHWC trademarks, logos or language in a way that conveys a direct or implied endorsement by NBHWC through a program name, course title, organization name, etc. (i.e. NBHWC Health Coaching Certification Program).
- iii. NBHWC intellectual property (including but not limited to NBHWC competencies, NBHWC HWC Certifying Examination Content Outline, NBHWC Scope of Practice and NBHWC Code of Ethics) is required to be cited in any and all material provided to the public and coaching students

interested in and/or enrolled in an NBHWC Approved Program.

- iv. NBHWC Program Approval is specifically awarded to coach training and education programs that appear to meet the industry standards established for approval status. Organizations themselves, even when overseeing an NBHWC Approved Program, do not receive approval status and may not imply that the organization holds affiliation with or endorsement by NBHWC in any manner.
 - v. NBHWC Program Approval is a process that begins with the submission of a complete application. Coach training and education programs, and overseeing organizations, may not imply or reference NBHWC Program Approval until the approval process has been completed and an official outcome for approval status has been announced.
- b. NBHWC Approved Programs must adhere to NBHWC and NBME branding and graphics policies and procedures. Violations of the branding and graphics policies, procedures, and guidelines may result in the revocation of approval status.

4. Program Operation Policies

- a. Content:
 - i. All NBHWC Approved Programs must address the following:
 1. NBHWC Definition of Health & Wellness Coaching, as defined in the NBHWC Code of Ethics (*page 79*)
 2. NBHWC Scope of Practice (*page 78*)
 3. NBHWC Code of Ethics (*page 80*)
 4. NBHWC HWC Certifying Examination Content Outline (*page 39*)
- b. Instructional Hours:
 - i. NBHWC Approved Programs are required to include and maintain a minimum of 75 instructional hours of training and education covering the HWC Certifying Examination Content Outline (60 minutes = 1 instructional hour; breaks may **not** be included).
 - ii. From the required 75 instructional hours, NBHWC Approved Programs are required to provide and maintain a minimum of 60 of those hours from Content Areas 1, 2, 3, & 4 of the HWC Certifying Examination Content Outline, with at least 40 of those hours being delivered synchronously.
 - iii. From the required 75 instructional hours, NBHWC Approved Programs

are required to provide and maintain a minimum of 15 of those hours from Content Area 5 (synchronous and/or asynchronous formats are permitted).

- iv. It is the expectation that **every graduating student** from an NBHWC Approved Program will have completed a minimum of 75 instructional hours in accordance with the NBHWC standards.
 - v. Additional instructional hours above and beyond the minimum standards for NBHWC Program Approval must be documented and explained in the application and updated in the Annual Update. Applicant programs and NBHWC Approved Programs must maintain transparency in the expectations for the completion of an NBHWC Approved Program.
- c. Practical Skills Development:
- i. Within the required 75 instructional hours, NBHWC Approved Programs are required to include and maintain compliance with the minimum standards set forth for student practical skill development.
 - ii. Within the required 75 instructional hours, NBHWC Approved Programs are required to include and maintain compliance with the minimum standards set forth for faculty-led development feedback on practical coaching skills.
- d. Practical Skills Assessment:
- i. Within the required 75 instructional hours, NBHWC Approved Programs are required to include and maintain compliance with the minimum standards set forth for practical skills assessment of student coaching skills, including both the tool constructed/ utilized for the assessment and the administration process itself.
- e. Student Graduates
- i. NBHWC Approved Programs are required to clearly publish the requirements for graduating from the NBHWC Approved Program. Further, the NBHWC Approved Program will maintain records of all students who complete the program in its entirety and receive a designated certificate of completion/ graduation from the NBHWC Approved Program.
 - ii. NBHWC Approved Programs are required to provide graduates of the Approved Program with a designated NBHWC Graduate Letter of Eligibility. This documentation is distributed by NBHWC to Approved Programs upon the receipt of approval. Programs may additionally choose to distribute a certificate that includes: date of Approved Program completion, Practical Skills Assessment date and the NBHWC Approved Program Seal of Approval.

Effective in 2025, however, certificates from Approved Program will not be accepted from graduates completing an Approved Program in 2025 and beyond. Only the NBHWC Graduate Letter of Eligibility will be permitted for the exam application.

- iii. NBHWC will not be held accountable or responsible for the provision of graduate certificates from NBHWC Approved Programs. Conflicts between coaching students and NBHWC Approved Programs will be the responsibility of the NBHWC Approved Program directly involved to resolve. NBHWC Approved Programs will be held responsible for any falsification, fraud, violation of the code of ethics, and/or violation of the code of conduct with regards to coaching students and coaching student graduates; NBHWC reserves the right to suspend or revoke approval status for any of the above violations.

5. Annual Updates and Renewal of Approval

- a. NBHWC Approved Programs are required to submit Annual Update reports by the due dates provided in order to maintain Approval status. Annual Updates will minimally include, but are not limited to: updates and modifications to curriculum and content, delivery methods, practical skill development and/or assessment methods; changes in faculty; updates to scope, marketing and/or outreach.
- b. Within one year after receiving notification of acceptance, NBHWC Approved Programs are required to submit a recording of the final, graded assessment session of a student coaching (at least 30 minutes) with the graded rubric used for the program's final assessment of practical coaching skills.
- c. At the end of every three years is the completion of an approval cycle. At this time, NBHWC Approved Programs are required to participate in a review in the form of a live interview with NBHWC Program Approval staff to discuss the program's ongoing maintenance and development in alignment with NBHWC standards. NBHWC Approved Programs will be notified 60-days in advance of the program's 3-year renewal date to schedule the interview; compliance and participation in the review process will be required in order to maintain approval status.

6. Audits

- a. NBHWC Approved Programs, by nature of agreement in the acceptance of NBHWC Approved Program status, agree to comply with and participate in any audit deemed necessary or relevant by NBHWC. Audits may and can be conducted to provide insight into NBHWC Approved Program policies and procedures as well as to assure compliance with the NBHWC standards and the NBHWC Code of Conduct.
- b. Audits may be conducted formally or informally, dependent on the information sought and/or depth needed to determine compliance with the NBHWC standards and the NBHWC Code of Conduct.
- c. NBHWC Approved Programs that are found, via audit, to be out of compliance with the policies of NBHWC Program Approval and/or the NBHWC Code of Conduct will be provided a formal notification of noncompliance and will be provided an opportunity to participate in the remediation process outlined for Approved Programs that drop below the standard (see 1f).

NBHWC Program Approval Application and Approved Training Program Agreement

TERMS AND CONDITIONS

In signing this form, the applicant organization (“I,” “we,” or the “Applicant”) indicates complete understanding, acknowledgement, and agreement with the terms and conditions outlined below:

- I (we) represent and warrant that all information and any documents submitted with the Applicant’s application for NBHWC Program Approval for the program(s) listed in such application (the “Application”) are true, accurate, and complete to the best of the Applicant’s knowledge.
- I (we) authorize NBHWC to contact third parties; request, obtain, use, and disclose additional information and documents; and otherwise take such actions as are reasonably necessary or appropriate to investigate and verify the information in the Application or other supplemental Materials.
- I (we) represent and warrant that the Applicant and the individual submitting the Application for the Applicant have the legal authority to submit the Application and to make all disclosures, grant all permissions, and meet all obligations in these terms and conditions.
- I (we) understand and agree that the application fees for NBHWC Program Approval are review fees and do not guarantee program approval. I (we) further understand that all fees for NBHWC Program Approval are non-refundable.
- I (we) understand that NBHWC retains the right to increase fees without prior notice.
- I (we) understand that all decisions and recommendations by NBHWC are final. I (we) further agree to defend, indemnify and hold harmless NBHWC, the National Board of Medical Examiners (“NBME”), and the Foundation for Health and Wellness Coaching (“FHWC”) and their respective affiliates, directors, officers, employees, and agents for any and all third-party claims, causes of action, liabilities, losses, damages, penalties, assessments, judgments, awards, or costs, including

reasonable attorneys' fees and costs, arising out of, resulting from, or relating to the applicant's Application.

- I (we) acknowledge that NBHWC Program Approval, if granted, will apply only to the program(s) listed in the Application that are approved. It will not apply to any other program, course(s) or other educational opportunity operated by the Applicant.
- I (we) acknowledge that NBHWC Program Approval, if granted, will apply only to the program(s) operated and delivered by the Applicant. It will not apply to and cannot be used by any franchisee, licensee, or secondary distributor of any kind or by any entity other than the Applicant. Any such program, described above, will be considered a separate, individual program and must have a separate application for NBHWC Program Approval.
- I (we) agree to maintain compliance with all applicable copyright laws for course materials and content used for any and all locations in which the program(s) is delivered and/or provided.*

**If the course/program material and content is not uniquely developed by the Applicant, the Applicant must furnish evidence of authorization, i.e., licensing, etc. to use the materials/content. Documentation should include the signed statement below regarding compliance with copyright laws and ownership. If utilizing licensed content, upload a copy of the license agreement or statement from the licensor stating that the Applicant has a license to use the material.*

- I (we) have read and understand the NBHWC Approved Training Program Code of Conduct and agree to honor and uphold the guidelines and agreements as stated for NBHWC Program Approval and the NBHWC Program Approval process. This shall include, but is not limited to, agreement to maintain the integrity of the program as approved; agreement to comply with any provisions of approval as identified by the NBHWC Program Approval Department; agreement to submit required Annual Updates and Practical Skills Assessments (as applicable); agreement to notify NBHWC if the program falls below NBHWC's minimum standards for maintaining NBHWC Program Approval; agreement to adhere to NBHWC and NBME branding and graphics policies and procedures; and agreement to ensure that all training and education, including mentoring, is in accordance with the NBHWC Code of Ethics.
- I (we) agree that NBHWC has sole discretion to issue, amend or revoke the rules and regulations governing NBHWC Program Approval. I (we) agree to abide by any decision of NBHWC regarding the matters of NBHWC Program Approval, including changes in the guidelines and requirements, and the revocation of NBHWC Program Approval, if granted.
- I (we) acknowledge that this agreement, including the Release of Liability set forth below, is governed by the internal laws, and not the law of conflicts, of California.

RELEASE OF LIABILITY

To the fullest extent permitted by law, the Applicant releases and forever discharges NBHWC, NBME, FHWC, and their respective affiliates, directors, officers, employees, and agents (collectively, the “Released Parties”) from and against any and all claims, causes of action, liabilities, losses, damages, penalties, assessments, judgments, awards, or costs, including reasonable attorneys’ fees and costs, arising out of, resulting from, or relating to:

- A Released Party’s review of the Application and any other Application-related documents or information;
- A Released Party’s good-faith consultation or exchange of documents or information with any third party for purposes of investigating and verifying any information in the Application and any other Application-related documents or information; or
- A Released Party’s decision, opinion, or recommendation to approve or reject the Application.

The Applicant acknowledges that it has read and considered and understands the provisions and significance of California Civil Code Section 1542, which provides as follows:

A general release does not extend to claims that the creditor or releasing party does not know or suspect to exist in his or her favor at the time of executing the release and that, if known by him or her, would have materially affected his or her settlement with the debtor or released party.

The Applicant expressly waives any and all rights that it has or may have under California Civil Code Section 1542, as now worded or later amended.

I (we) acknowledge that I (we) have read this NBHWC Program Approval Application and Approved Training Program Agreement and voluntarily agree to its terms and conditions, including the Release of Liability set forth above.

Coaching Presence, Relationships, and Sessions



The foundation of coaching lies in how a coach “shows up” in the coaching relationship and the partnership that is formed as a result. The coach brings their authentic self to the conversation with the intention to fully focus on the client, allow silence, and listen to understand; the coach’s presence is grounded in being attentive and “with” the client while coaching. The coach uses mindful awareness to notice, with curiosity and non-judgment, what is happening with the client, as well as what is happening within themselves during coaching. The ultimate purpose of the relationship is to support the client’s change process, with the coach’s attunement to self also essential for self-regulation and self-management.

The coaching relationship is based on the recognition that the client is whole, resourceful, and the expert on their own life; the client does not need to be “fixed.” This perspective creates an open and accepting space for the client to explore, reflect, and respond. This type of presence increases connection, builds trust and rapport, and helps the client feel supported, heard, seen, and safe. When the client’s agenda, needs, and preferences drive the coaching relationship, the coach is able to resist “knowing” what is best for the client. Additionally, with a grounded, positive, and supportive environment, the client is more likely to be aware, honest, vulnerable, and prepared for self-discovery.

While the content of Health and Wellness Coaching is client-driven, the coach guides the process and provides structure for sessions. There are many models for coaching that create structure and support the coaching process. In general, though, coaching structures can be organized into preparation for a session, early client interactions, follow-up sessions, and the end of the coaching agreement. Using such structures, the coach embraces a client-centered, strengths-based perspective to affirm, empower, and equip the client to take responsibility for their health and wellbeing. This approach informs all aspects of coaching, from the clarification of roles and expectations for both coach and client to the exploration of the client’s values,

vision, purpose, priorities, and understanding of their own health and wellness. Work done in early sessions to clarify “why” and “what” the client wants and needs helps provide motivation for the “how” of the process of positive changes that are most important to the client. Throughout, the coach is attuned to the state of the client, emphasizing successes and new discoveries. The coach encourages the client to reflect on their own learnings, which they may then apply to their plan for continued progress or maintenance at the end of the coaching relationship.

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)

1.2. 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
 - 1.2.2.3. Practice cultural humility
 - 1.2.2.4. Be aware of own social identities, power, privileges, unconscious biases, 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

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
 - 1.3.1.5. 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)

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
 - 1.4.2.1. 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

1.5. 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)
 - 1.5.2.3. 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 the importance of the 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

1.6. Follow-up sessions

- 1.6.1. Reconnect with client, inviting 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 topic 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

1.6.6. 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

1.7. 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 a 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

Theories, Models, and Approaches to Behavior Change

Health and Wellness Coaching focuses on helping people change their health behaviors. It draws on a broad theoretical base ranging from theories in psychology and neuroscience, to the fields of communication and leadership. It is essential for health and wellness coaches to have a working familiarity with the established theories and models that have influenced coaching methodologies. Many of these are specific to learning, motivation, behavior, and brain function, and help explain how behavior and mindset change, along with ways to support that change.

Health and wellness coaches should have general knowledge of the primary concepts defining each theory and model noted below. The ordering of the items does not convey their relative importance.

Most importantly, the coach should be able to apply relevant elements to their coaching practice. For example, Self-Determination Theory posits several universal needs for psychological health and well-being: autonomy (not feeling persuaded or controlled), competence (seeking confidence and mastery), and relatedness (being connected to others). The coach does not need to memorize minute details of this theory, such as how these universal needs interact, but should recognize ways to help clients meet these needs.

For each item noted below, coaches should demonstrate the following abilities:

1. define the item;
2. identify the item within coaching conversations and the coaching process; and
3. utilize relevant resources, strategies, techniques, and/or skills associated with the item that are most applicable to Health and Wellness Coaching within scope of practice.

All theories and models have inherent limitations. The coach should be able to discern the appropriate use of models and behavior change approaches.

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

Skills, Tools, and Strategies

In the practice of Health and Wellness Coaching, coaches apply skills in active listening, empathy, and communication to establish rapport and foster a supportive coaching relationship. This section reviews evidence-based skills and tools used in Health and Wellness Coaching, including those used in motivational interviewing, goal setting, and behavior change techniques. Coaches should know how, why and when to utilize these techniques to empower clients to make sustainable lifestyle modifications and mindset shifts. The ordering of the items does not convey their relative importance.

Additionally, coaches should practice cultural humility and adapt strategies to meet the unique needs of each individual, ensuring inclusivity and equity in the coaching process. Coaches should regularly review and update their knowledge, leverage innovative tools, and implement client-centered strategies. Coaches should strive toward a comprehensive and personalized level of support to promote long-term health and wellbeing.

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)
- 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

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. Use complex reflections (e.g., double-sided, metaphors, meaning, and emotion)
- 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

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)

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

- 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

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
- 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, considering both short- and long-term benefits

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

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

3.8. 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

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
 - 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

3.10. Ensure appropriate time management

Ethics and Professional Practice

Health and wellness coaches commit to maintaining and promoting coaching excellence by adhering to best practices inclusive of professional development, scope of practice, code of ethics, and legal and regulatory guidelines.

Personal development as a coach will focus on enhanced growth and self-awareness, with practices including self-reflection on personal biases, assumptions, judgments, and stereotypes. Additionally, the coach will monitor self-care, including seeking necessary outside help to monitor burnout and promote overall growth and wellbeing. Professionally, the coach will pursue ongoing training, as defined by the *NBC-HWC Recertification Handbook*, including emerging research, science, and evidence-based trends in health and wellness, diversity, and inclusion practices, cultural humility, health equity, and disparity.

It is the responsibility of the coach to adhere to the *NBHC Health & Wellness Coach Scope of Practice* and to educate the client and other individuals/organizations regarding what is and is not within the scope of practice. If holding additional, active, national- or state-recognized credentials, the coach must clearly define boundaries and guidelines for the coaching relationship in regard to multiple roles and/or dual relationships. The coach will refer the client to a specialist for care outside the coach's appropriate scope of practice. Examples of when to refer include, but are not limited to, a request for providing nutritional plans, exercise prescriptions, recommendations for supplements, interpreting medical data, unpacking past trauma experiences, or providing psychological therapeutic interventions or treatments.

The coach abides by the standards and guidelines as defined in the *NBHC Code of Ethics*. This includes demonstrating dignity and respect for all people, consistently honoring diversity and cultural sensitivity while maintaining appropriate confidentiality, and clearly stating any conflicts of interest and dual roles. Further, the coach will accurately represent training, expertise, and use of material from appropriate sources, and disclose use of artificial intelligence and related technologies.

Finally, the coach follows best practice guidelines with regards to client privacy and security of information, including appropriate platforms. The coach adheres to the *Title II HIPAA Administrative Simplification* and stays up to date on relevant federal and state regulations that affect health coaching, including responsible use of emerging technologies.

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)

4.2. 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)

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 on ethics 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)
- 4.4.1.3. Ensure data privacy, 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

Health and Wellness



Health and Wellness Coaching is rooted in a whole-person model (e.g., physical, psychological, emotional, social, and spiritual) to support a client's pursuit of optimal health, wellness, and wellbeing. The coach understands that health is much broader than the absence of disease and that wellness and wellbeing are impacted by many facets of a client's life. Coaches therefore seek to support clients in achieving the client's vision aligned with their life's mission, aspirations, and purpose as well as their mental, physical, emotional, and social needs. The coach understands that healing can exist despite the presence of disease and that the client is the best expert to shape their vision.

A holistic or whole-person view of health can include many domains, as noted in 5.2. The health and wellness coach should be as familiar with the components of proactive health and wellbeing as they are with the prevention and self-management of the most common chronic diseases. While there are many components of proactive health and wellbeing, there is no pressure on behalf of the coach to encourage the client to optimize any given area. Further, a client's chronic disease(s) does not dictate the focus in coaching unless it is the client's chosen focus. A coach must be able to identify risk factors for prevalent chronic diseases, commonly used biometric measures, and current lifestyle recommendations for optimizing health; however, these are referenced only in service to the client's overall vision, desires, values, and needs. The coach should approach topics within the areas of health and wellness by first determining what the client already knows, needs, and wishes to learn; from this vantage point, then, the coach supports the client in obtaining credible health and wellness-related information, including general knowledge on healthy lifestyle practices to facilitate progress toward the client's vision.

Health and wellness coaches are not content experts in health or disease, nor is this expertise necessary; health and wellness coaches do not diagnose, treat, prescribe, or advise unless the coach has credentials in another profession that allow expert advice to be given. While specific chronic conditions are listed to guide the examinee for studying purposes, it should be understood that lifestyle plays a key role in the prevention and management of other conditions not mentioned here, including cancer. What is important is that a coach is able to recognize common signs of potentially imminent danger or medical red flags and knows when and how to refer to other healthcare professionals as necessary and relevant.

Further, coaches should have a working knowledge of current evidence-based recommendations in the areas of health promotion, disease prevention, and basic lifestyle medicine. Guidelines in health and wellness are continually evolving and can vary widely; the coach's knowledge should include common guidelines created by public health groups, for example, the Centers for Disease Control and Prevention, the U.S. Department of Health and Human Services, Healthy People 2030, and the National Institutes of Health. In addition, coaches should be aware that there is evidence-based health and wellness information emerging from established organizations in fields such as lifestyle medicine, integrative health and medicine, etc.

Health and Healthcare Equity and Inequity

As the credentialing body for Health and Wellness Coaching, the NBHWC is committed to helping eliminate health and healthcare disparities by embracing and utilizing strategies and resources that promote equity, increase access, and reduce discrimination. As such, health and wellness coaches must be aware of and understand structural determinants of health, social determinants of health, and health literacy and numeracy. Further, they should be able to help clients adjust health and wellbeing strategies to accommodate individual needs.

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)

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, or pregnant or postpartum women)
 - 5.2.1.2. Activity tracking options, including mobile devices and wearable technology
- 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. Understands 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
- 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)
[NOTE: Many ways to manage stress are covered in the other components as well (e.g., exercise, healthful nutrition, time in nature, prayer, speaking with trusted friends, adequate sleep, etc.)]
 - 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

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

- 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
- 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

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 structural determinants of health affect whether the resources necessary for health are distributed equally in society

5.5.4. Consider how structural determinants of health impact client’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



NBHWC Program Approval Resource Guide

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- » Arloski, M. (2014). *Wellness coaching for lasting lifestyle change*. Duluth, MN: Whole Person Associates, Inc.
- » Arloski, M. (2021). *Masterful Health & Wellness Coaching : deepening your craft*. Whole Person Associates.
- » Arnold, S. C., Bean, P., & Lanier, C. H. (2024). *Motivational Interviewing in Life and Health Coaching: A Guide to Effective Practice*.
- » Bark, L. (2011). *The wisdom of the whole: coaching for joy, health, and success*. San Francisco, CA: Createspace.
- » Dossey, B. M., Luck, S., & Schaub, B. G. (2015). *Nurse coaching: integrative approaches for health and wellbeing*. North Miami, FL: International Nurse Coach Association.
- » Frances, B. (2023). *Awareness is Enough: Reflections on Being a Coach*. Billie Frances.
- » Gavin, J. (2022). *Foundations of professional coaching : models, methods, and core competencies*. Human Kinetics.
- » Jordan, M. (2021). *How to be a health coach : an integrative wellness approach*. Global Medicine Enterprises, Inc.
- » Kimsey-House, H., Kimsey-House, K., Sandahl, P., & Whitworth, L. (2018). *Co-active coaching : changing business, transforming lives*. Nicholas Brealey Publishing.
- » Miller, W. R., & Rollnick, S. (2013). *Motivational interviewing: helping people change*. New York: Guilford Press.
- » Miller, W. R., & Rollnick, S. (2023). *Motivational interviewing: helping people change and grow (4th ed.)*. New York: Guilford Press.
- » Moore, M., Jackson, E., Tschannen-Moran, B., & Wellcoaches Corporation. (2016). *Coaching psychology manual*. Wolters Kluwer.
- » Muth, N.D., & Green, D.J. (2014). *Coaching behavior change*. San Diego, CA: American Council on Exercise.
- » Prochaska, J.O., & Prochaska, J.M. (2016). *Changing to thrive: using the stages of change to overcome the top threats to your health and happiness*. Center City, MN: Hazelden Publishing.
- » Rosengren, D. B. (2017). *Building Motivational Interviewing Skills: A practitioner Workbook (2nd Edition)*.

Disclaimer

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This guide is meant to serve only as a resource for NBHWC Approved Programs for the purpose of instructional support; this guide has not been designed for coaching student use and should not be distributed to students or marketed in any way as exam preparation material. Under no circumstances is NBHWC, its employees, Board of Directors, commission members, or representatives liable for any direct, indirect, incidental, special, punitive or consequential damages which may result in any way from the use of the information contained within this guide.

Appendix C: Practical Skills Guidelines

DESCRIPTION OF SKILL	UNSATISFACTORY	SATISFACTORY	JTA CORRELATIONS
	<i>Observables</i>	<i>Observables</i>	
A. Mindful Presence	<ol style="list-style-type: none"> 1. Presents as nervous or agitated at any time during the session. 2. Presents as distracted; digital devices interfere with the session; setting is not conducive to session. 3. Does not practice a means for self-calming or focusing, such as meditation or breath-work. 4. Does not modulate or regulate own emotions; demonstrates negative emotional responses in session. 	<ol style="list-style-type: none"> 1. Presents as calm at the beginning and throughout the session. 2. Appears present and ready; turns off digital devices; minimizes external distractions; has dedicated space for coaching. 3. Practices inner-directed technique like meditation, breathing or other means for calming; directs energy and focus to session. 4. Modulates own emotions appropriately, even when there is discomfort or stress in the session. 	<p>JTA Skills: 5, 21, 34, 35</p>
B. Empathy & Rapport	<ol style="list-style-type: none"> 1. Does not acknowledge client's thoughts, perspectives, emotions or state; demonstrates disrespect or judgment towards the client. 2. Does not inquire about the client's ability to manage emotional state; overlooks emotional functioning as indicative of when outside mental support is needed. 3. Responds to the client with irrelevant or insensitive comments; makes repeated inaccurate reflections. 4. Does not match or respond to client energy and tone. 5. Uses humor inappropriately or insensitively. 6. Presents with body language, non-verbal gestures, facial expression or posture out of sync with client's emotional state. 7. Does not create a warm, safe environment through attention to building trust and rapport. 	<ol style="list-style-type: none"> 1. Acknowledges and reflects client's thoughts, perspectives, feelings or emotional state with empathetic, nonjudgmental, supportive comments; demonstrates respect and unconditional positive regard. 2. Considers and inquires, as appropriate, about client's ability to manage emotional state; explores client's emotional functioning to determine if and when outside mental health support is needed. 3. Offers reflective and affirming statements using client's language; demonstrates understanding. 4. Matches energy and emotions with a warm tone of voice; stays attuned to the client's emotional state. 5. Uses humor appropriately to create connection and reinforce rapport. 6. Responds with appropriate non-verbal cues, including nods & gestures of understanding; non-verbal cues are open and in sync with the client. 7. Creates a warm, safe environment through attention to building trust and rapport. 	<p>JTA Knowledge: 1, 2</p> <p>JTA Skills: 1-7</p>
C. Client-centered Process	<ol style="list-style-type: none"> 1. Inquiries and reflections do not address or explore the client's stated needs, preferences and interests. 2. Overlooks the process of self-discovery; comments or reflects the coach's own view of the agenda or situation. 	<ol style="list-style-type: none"> 1. Inquiries and reflections facilitate a client-centered process that keeps the client's agenda, needs, and interests foremost. 2. Evokes details from client to support self-discovery of an agenda for exploration; coach 	<p>JTA Tasks: 2</p> <p>JTA Knowledge: 1-6, 8</p>

DESCRIPTION OF SKILL	UNSATISFACTORY	SATISFACTORY	JTA CORRELATIONS
	<ol style="list-style-type: none"> 3. Tells or directs the client toward a focus for the session. 4. Fails to inquire how or what the focus means to the client or does not explore its intent. 5. Questions client decision-making or interrupts client's decision-making process. 	<ol style="list-style-type: none"> 3. keeps pace with client self-discovery. 4. Invites the client to choose the area of focus for the session. 5. Elicits from clients how this focus is important to them. 6. Encourages and supports client-driven decision-making. 	<p>JTA Skills: 1, 3, 7-10, 13, 20, 27, 29</p>
D. Active Listening	<ol style="list-style-type: none"> 1. Talks more than the client; coach body language does not demonstrate active listening (i.e. appears distracted, does not maintain eye contact). 2. Coach is not attentive to the client's speech, content, tone, gestures, posture, and other non-verbal behavior; coach is unaware or disconnected from client energy and state of mind. 3. Coach interrupts or misses opportunities to use silence or a pause to reinforce attentive listening and rapport. 4. Reflections do not demonstrate that the coach is listening for underlying concerns and unspoken issues. 5. Does not attend to the flow of the conversation; interrupts the client or takes the conversation off-topic. 	<ol style="list-style-type: none"> 1. Remains quiet, maintains eye contact, and uses body language and voice utterances to demonstrate active listening. 2. Attentive to client verbal & non-verbal cues; comments or reflects in a way that demonstrates an awareness of client's energy, state of mind, and topics or content. 3. Uses silence and pauses to convey empathy and respect as well as allow the client time to process. 4. Reflections demonstrate listening at deeper levels, uncovering underlying concerns or unspoken issues. 5. Supports conversational flow through actively attending to the client and topics; use of appropriate transitions between topics. 	<p>JTA Knowledge: 1-2, 4-5, 8</p> <p>JTA Skills: 1-7, 9, 13, 14, 25, 31</p>
E. Open-ended Questions	<ol style="list-style-type: none"> 1. Asks close-ended questions more than half of the time. 2. Asks leading questions that redirect the conversation toward what the coach thinks is the best solution or that reveal the coach's biases. 3. Stacks questions like an interrogation or asks questions that are not relevant to the discussion. 4. Avoids or omits questions that explore deeper levels of reflection. 5. Asks questions unrelated to the topic or probes for additional information when the client has expressed they do not wish to share; is not in tune with client response and does not demonstrate respect for client boundaries. 	<ol style="list-style-type: none"> 1. Asks primarily open-ended questions; minimally asks "why" questions. 2. Questions reflect sincere curiosity; questions authentically evoke client's beliefs, attitudes, values, and intentions. 3. Questions used appropriately (i.e. timing, quantity, intent). 4. Questions evoke client's stories, images and feelings to access a deeper level of reflection. 5. Attentive to client response to questions; shifts inquiries as needed to respect client boundaries around what they are willing to share. 	<p>JTA Knowledge: 2-4, 8</p> <p>JTA Skills: 8-10, 14, 20, 25-26, 29, 36</p>
F. Cultivating Intrinsic Motivation	<ol style="list-style-type: none"> 1. Does not reflect or ask the client about values and beliefs; sidesteps or overlooks the process of exploring meaning and purpose. 2. Does not reflect or ask the client about their strengths, personal qualities, and skills. 3. Does not reflect or ask about positive resources and client support systems. 4. Does not reflect or ask about past learnings and 	<ol style="list-style-type: none"> 1. Explores client values and beliefs; asks questions (as appropriate) to explore underlying meaning and purpose. 2. Explores client strengths, personal qualities, and skills. 3. Facilitates client's identification of positive resources and supports; inquires how those supports can be leveraged for support. 	<p>JTA Tasks: 7, 9, 16</p> <p>JTA Knowledge: 2- 6, 8</p> <p>JTA Skills: 6-10, 13, 15, 20, 25-29, 31</p>

DESCRIPTION OF SKILL	UNSATISFACTORY	SATISFACTORY	JTA CORRELATIONS
	<p>successes or client's role in moving to the desired outcome.</p> <ol style="list-style-type: none"> 5. Informs or advises client how to use their strengths or what goals to pursue; overlooks connecting strengths, values, and supports to client's desired outcomes. 6. Overlooks discrepancies in what client says, their values and beliefs, and their actions; responds with judgment or blame; creates defensiveness or resistance with addressing it. 	<ol style="list-style-type: none"> 4. Invites client to reflect on past learnings and successes; explores how these can be leveraged toward desired outcomes. 5. Uses reflective statements or summaries to tie client's values, strengths, and supports to desired outcomes or area of focus. 6. Offers curious inquiry about the discrepancies between what client says, their values and beliefs, and current actions; refrains from judgment, blame or evoking defensiveness or resistance. 	
<p>G. Visioning (initial session)</p>	<ol style="list-style-type: none"> 1. Does not explore a client's readiness to creating a health and wellbeing vision. 2. Does not explain the purpose or process of visioning. 3. Asks broad questions about client vision; identifies and highlights client's urgent needs without uncovering a broader, deeper vision that could serve as a powerful force for the client. 4. Does not work collaboratively with the client to create a vision of optimal health and well-being. 5. Creates the vision for the client or doesn't allow the client to create/name the elements of the vision. 	<ol style="list-style-type: none"> 1. Asks questions that assess a client's readiness to explore a health and wellbeing vision. 2. Explains the visioning process (as appropriate to the session). 3. Uses mind-body techniques (e.g., relaxation, imagery) to help the client access an internal process for visioning; creates space for a dynamic process. 4. Co-creates with client a vision that honors the client's preferences, values, and goals. 5. Invites client to summarize and state the vision as well as talk about the meaning it holds; tracks the client's insights about vision of optimal health. 	<p>JTA Tasks: 2, 4, 6-9</p> <p>JTA Knowledge: 3-6, 8</p> <p>JTA Skills: 8-10, 13, 15, 20, 29</p>
<p>H. Exploring Possibility (initial or ongoing sessions)</p>	<ol style="list-style-type: none"> 1. Does not engage or invite client to explore broader perspectives beyond the immediate situation or desired goal. 2. Misses opportunities to use visual tools or cognitive exercises (body scan, imagery, metaphor, decisional balance) to create generative moments. 3. Does not encourage or support client to integrate insights by exploring different perspectives, brainstorm, or expand choices, options and pathways. 	<ol style="list-style-type: none"> 1. Invites client to explore a broader perspective, expanding awareness beyond the immediate situation or goal. 2. Offers different visual tools or cognitive exercises where appropriate (body scan, imagery, metaphor, decisional balance) to create generative moments or envision new possibilities. 3. Helps the client integrate new awareness by engaging in problem solving or brainstorming, as needed. 	<p>JTA Knowledge: 5-6, 8</p> <p>JTA Skills: 13, 15-17, 20, 27, 29-32</p>
<p>I. Maximizing & Leveraging Change Talk</p>	<ol style="list-style-type: none"> 1. Does not elicit preparatory change talk (DARN: Desires, Abilities, Reasons and Needs to change) through open-ended questions and reflections. 2. Does not elicit mobilizing change talk (CAT: Commitment, Activation and Taking Steps). 3. Does not recognize and utilize client's stated preparatory change talk. 4. Does not recognize and utilize client's stated mobilizing change talk. 5. Tends to offer solutions or advice rather than exploring change talk. 	<ol style="list-style-type: none"> 1. Consistently elicits preparatory change talk (DARN: Desires, Abilities, Reasons and Needs to change) through open-ended questions and reflections. 2. Elicits mobilizing change talk (CAT: Commitment, Activation and Taking Steps), as appropriate. 3. Identifies and reinforces client's stated preparatory change talk. 4. Identifies and reinforces client's stated mobilizing change talk. 5. Displays true curiosity in exploring the client's motivations for change. 	<p>JTA Tasks: 8, 9</p> <p>JTA Knowledge: 3-6, 8</p> <p>JTA Skills: 13, 15, 16, 20, 26, 29</p>

DESCRIPTION OF SKILL	UNSATISFACTORY	SATISFACTORY	JTA CORRELATIONS
J. Minimizing Sustain Talk	<ol style="list-style-type: none"> Reflects sustain talk beyond what is needed for empathy. Inadvertently elicits sustain talk or amplifies it. Takes a “you should” stance or tries to “fix” client perceptions in a way that elicits greater discord or resistance. Seems unaware of sustain talk and unable to shift the conversation when needed. 	<ol style="list-style-type: none"> Reflects sustain talk only to the degree needed to build empathy and develop rapport; does not reinforce it. Does not elicit or amplify sustain talk through questions or reflections. Acknowledges discord while avoiding the Righting Reflex. Recognizes when sustain talk is generated and shifts conversation. 	<p>JTA Tasks: 8, 9</p> <p>JTA Knowledge: 3-6, 8</p> <p>JTA Skills: 13, 15, 16, 20, 26, 29</p>
K. Goal Setting (long-term)	<ol style="list-style-type: none"> Does not invite client to create <u>long-term</u> goals connected to the client’s vision. Does not partner and collaborate with client to plan long-term goal(s) aligned with the client’s vision or values; edits long-term goal(s) presented by the client or suggests goals in a directive manner. Does not partner with the client to make long-term goal(s) specific, concrete, actionable, and realistic (or SMART). Does not inquire or help the client define what success looks like. Does not explore past successes, skills, attitudes or values that can be applied toward pursuit of long-term goal(s). 	<ol style="list-style-type: none"> Invites the client to create <u>long-term</u> goal(s) connected to the client’s vision. Facilitates client-directed goal-setting that ties client vision and values to long-term goal(s); provides support for client exploration of goals. Partners with the client to plan long-term goal(s) that are specific, concrete, actionable, and realistic (or SMART). Asks the client to define success in terms of goal completion or progress towards goals. Invites the client to consider how lessons learned from prior experience can be applied toward the long-term goal(s). 	<p>JTA Tasks: 7, 9, 10, 11</p> <p>JTA Knowledge: 1, 8, 9</p> <p>JTA Skills: 13, 15, 20, 22-24, 29</p>
L. Goal Setting (short-term)	<ol style="list-style-type: none"> Does not invite client to create <u>short-term</u> goals or action steps. Does not partner with the client to plan short-term goals or actions steps; suggests short-term goals (or action steps) in a directive manner. Substitutes coach expertise for the client’s in setting goals; edits plans or goals presented by the client. Does not encourage the client to break down large, complex goals into smaller action steps. Does not clear up confusion around action steps or goals with clarifying questions when the client expresses uncertainty. Does not invite or encourage the client to consider how lessons learned from prior attempts can be applied to the next action step or short-term goal. 	<ol style="list-style-type: none"> Invites client to create <u>short-term</u> goals (or action steps) connected to the client’s vision or longer-term goals. Facilitates client identification of client’s short-term goals or action steps; provides support for client exploration of goals. Maintains client-centered process for short-term goal-setting and encourages approach to goal setting through an “experiment” mindset. Partners with the client to create realistic SMART goals or action steps that fit the client’s learning style and pace. Explores any detected client confusion, discrepancy, and ambivalence around action steps or goals. Invites the client to consider how lessons learned from prior attempts can be applied toward the next action step or short-term goal. 	<p>JTA Tasks: 9-16</p> <p>JTA Knowledge: 1, 8, 9</p> <p>JTA Skills: 8, 13, 20, 22-24, 26-27, 29</p>
M. Progress Monitoring	<ol style="list-style-type: none"> Overlooks accountability, tracking or self-monitoring after action planning or goal-setting; or suggests how client should create accountability. Suggests forms of tracking or self-monitoring that do 	<ol style="list-style-type: none"> Asks clients how they would like to be accountable for goals (long and short-term); supports client in selecting specific accountability methods. 	<p>JTA Tasks: 12, 14</p>

DESCRIPTION OF SKILL	UNSATISFACTORY	SATISFACTORY	JTA CORRELATIONS
	<p>not connect to the client’s stated agenda and desired outcomes.</p> <ol style="list-style-type: none"> Directive or does not support client-directed development of an accountability plan; does not ask or receive agreement about intended actions between sessions. Does not explore how client will celebrate accomplishments and amplify successes. 	<ol style="list-style-type: none"> Asks client how they would like to track (self-monitor) their agreed-upon behavioral actions. Supports client to create detailed accountability plan; seeks commitment regarding agreed-upon “homework” between sessions. Asks how the client intends to celebrate accomplishments and successes. 	<p>JTA Knowledge: 4, 5, 8, 9, 11</p> <p>JTA Skills: 3, 8, 10, 13, 15, 20, 22, 24, 27-29</p>
N. Anticipating Challenges	<ol style="list-style-type: none"> Does not bring up the topic of potential barriers or challenges with the client’s action plan. Gives client a plan of action to navigate challenges; tells the client how to “fix” the problem. Does not address client indications of hesitancy, ambivalence, or lack of readiness or confidence to pursue plans. Offers or provides solutions whenever client is uncomfortable or struggling; does not brainstorm with client when client appears stuck. 	<ol style="list-style-type: none"> Invites client to forecast challenges and barriers with proposed action plan. Partners with client to co-create a plan to navigate challenges with identified steps and timeline. Explores ambivalence, hesitancy, competing commitments, or any doubt expressed by client when discussing plans. Provides empathy and space for client to explore discomfort or potential struggles; brainstorms potential solutions as appropriate. 	<p>JTA Tasks: 9-11, 15, 16</p> <p>JTA Knowledge: 3, 5, 6, 8</p> <p>JTA Skills: 3, 4, 7, 8, 10, 13-15, 20, 22, 25, 27, 30</p>
O. Facilitating Self-discovery	<ol style="list-style-type: none"> Does not acknowledge or affirm successes. Provides solutions, knowledge or insight without exploring the client’s perspective; does not invite the client to share their own learning and insights. Misses opportunities to reframe setbacks as learning opportunities. Does not inquire about client take-aways at end of session, or summarizes what the client’s take-aways should be. Offers unsolicited advice or responses that are unrelated to client learnings and insights or what the client is trying to achieve. 	<ol style="list-style-type: none"> Acknowledges and affirms successes to date. Affirms the strengths and values the client used in accomplishments and learnings. Positively reframes setbacks as learning opportunities. Invites client to share take-aways at the end of the session. Assists client in articulating learning and insights gained in the change process. 	<p>JTA Tasks: 9, 16</p> <p>JTA Knowledge: 2, 5, 6, 8</p> <p>JTA Skills: 8, 13, 15, 20, 27-30</p>
P. Information Sharing & Scope of Practice	<ol style="list-style-type: none"> Does not ask clients what knowledge they possess before sharing information. Provides information, gives advice or makes recommendations without permission or prompt from client. Overlooks or ignores red flags in emotional functioning that may indicate the need for a mental health consult; crosses the line of HWC scope of practice by attempting to address mental health needs of client. Crosses the line of HWC scope of practice by offering a diagnosis, prescribing treatment, or providing a psychological therapeutic intervention; recommends 	<ol style="list-style-type: none"> Asks client what knowledge they possess regarding a topic before offering information. Asks permission before sharing information or recommendations or provides information when specifically asked to do so (e.g., elicit-provide- elicit; ask-tell-ask). Recognizes and identifies red flags in emotional functioning that may indicate the need for a mental health consult; considers with the client the need for appropriate mental health support (as appropriate). Stays within HWC scope of practice when information sharing and offers resources from 	<p>JTA Tasks: 19, 20</p> <p>JTA Knowledge: 5, 7, 10</p> <p>JTA Skills: 10, 18, 19</p>

DESCRIPTION OF SKILL	UNSATISFACTORY	SATISFACTORY	JTA CORRELATIONS
	<p>or provides resources and information that is biased, creates a conflict of interest, or is not nationally recognized.</p>	<p>nationally recognized authorities.</p>	
<p>Q. Time Management</p>	<ol style="list-style-type: none"> 1. Does not manage time efficiently in the session; does not achieve client’s stated objectives for the session. 2. Does not end at agreed upon time or ask the client to extend the session; struggles with managing the identified time boundary for the session. 	<ol style="list-style-type: none"> 1. Manages allotted time for the coaching session appropriately, allowing space for the client to direct the session but also achieve the identified objectives of the session. 2. Respects client’s schedule by ending on time, within the time frame allotted for the session, or seeks permission to extend agreed upon session time. 	<p>JTA Knowledge: 5</p> <p>JTA Skills: 13, 33</p>
<p>R. Use of Assessments (as appropriate)</p>	<ol style="list-style-type: none"> 1. Does not ask the client what they learned about themselves in completing the assessment. 2. Does not offer an opportunity for the client to ask questions about the assessment. 3. Fails to highlight or affirm the positive aspects in the client’s assessment. 4. Misses opportunities to gather additional information that seems appropriate to the discussion. 5. Does not discuss or explore concerns that arose in the assessment; fails to recognize when a physician’s release or a referral may be needed to another professional. 	<ol style="list-style-type: none"> 1. Asks client what they learned about themselves in completing an assessment. 2. Asks client what questions they have, if any, after completing the assessment. 3. Shares and affirms the positive aspects and highlights in the client’s assessment. 4. Gathers any missing information, as needed. 5. Discusses any concerns that arose in the assessment as needed, such as the need for a physician’s release or mental health issues that need to be referred out. 	<p>JTA Tasks: 18-20</p> <p>JTA Knowledge: 3, 4, 8</p> <p>JTA Skills: 10-12, 20, 28</p>

Appendix D: NBHWC Scope Of Practice

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

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

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

each role, understand and demonstrate how to work within the limits of each professional role, and comply with all guiding ethical principles to ensure client interests and needs are at the forefront of the coach-client partnership.

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

Approved 12.13.2022

Appendix E: NBHWC Code of Ethics

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

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

Part One: Definitions

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

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

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

Part Two: The NBHWC Standards of Ethical Conduct

Section 1: Professional Conduct at Large

– As a health and wellness coach, I:

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

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

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

Section 2: Conflicts of Interest

- As a health and wellness coach, I

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

Section 3: Professional Conduct with Clients

- As a health and wellness coach, I

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

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

Section 4: Confidentiality/Privacy

– As a health and wellness coach, I

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

Section 5: Continuing Development

- As a health and wellness coach, I

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

Part Three: The NBHWC Pledge of Ethics:

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

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

