



Chronic Care Professional (CCP) Health Coaching Certification Manual

*An Interdisciplinary Curriculum for Population Health Improvement,
Chronic Disease Management and Health Behavior Change Support*

5th Edition

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PREFACE

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Today we face lifestyle-related risks to global health, which cannot be vaccinated against, and chronic diseases, which cannot be cured. These threats to public health are unprecedented in scope and impact, affecting developed and developing countries alike. In the U.S., chronic conditions pose the biggest threats to health and independence—from children affected by diseases like diabetes rarely before seen in the young, to frail elderly who simply want to remain in their homes. Chronic conditions also threaten economic security, driving over 75% of total health care spending. Unsustainable health care spending is in essence a chronic care problem given that most health care delivered is delivered to patients with chronic conditions.

Stemming the human and financial costs of chronic conditions will require new health care delivery models, information technologies and biomedical advances—but must also include practitioners prepared and proficient in newer lifestyle management support and chronic care approaches that are significantly different from existing acute care-oriented approaches. While we continue to see serious gaps in the routine delivery of recommended medical care, we remain reliant on patients who will ultimately choose how they manage their health and health behaviors. The Chronic Care Professional (CCP) program was introduced in 2003 to prepare the interdisciplinary health care team in a new two-pronged model of evidence-based medical care and evidence-based patient support.

Implementing the Vision of the Institute of Medicine for Health Professions Education

HealthSciences Institute recognizes the CCP groundwork laid by members of the National Academy of Sciences, Institute of Medicine (IOM) *Health Professions Education: A Bridge to Quality* committee. This group, which represented U.S. employer purchasers, health systems and scores of professional associations—from nursing, medicine and pharmacy—called for a shift away from today’s specialty accreditation, certification and licensure frameworks, to more cross-cutting, interdisciplinary, patient-centered credentials, along with a transformation in health care professional training and continuing education. It also called for a “retooling” of the health care workforce. The IOM report was an impetus for CCP, as was the World Health Organization’s (WHO’s) report: *Preparing a Health Care Workforce for the 21st Century: the Challenge of Chronic Conditions*.

Preparing for the New Health Care Environment

Health care organizations and professionals are faced with a new environment much like others in fields as diverse as transportation, telecommunications, and financial services, as well as primary and secondary education. Experts in organization change have observed that organizations go through predictable patterns in dealing with change. Those that survive these transitions understand the urgency for change and respond decisively by implementing new strategies, processes and technologies. Most importantly, they change their cultures and engage and prepare their people for success in the new environment. In the U.S. we have seen these same success factors in play (or not) in outcome studies of teams and organizations who have implemented new models ranging from the Patient-Centered Medical Home, Chronic Care Model or the Accountable Care Organization. Health care quality and value expert Stephen Shortell, MD, MPH, MBA, Dean of Public Health with UC Berkeley, has led a number of these studies. In his words, “We won’t get better health care value without greater integration of evidence-based medicine and evidence-based management.”

The Population Health Improvement Learning Collaborative

In 2010, HealthSciences Institute and the PartnersInImprovement Alliance founded the first not-for-profit health coaching and chronic care learning collaborative <http://partnersinimprovement.org/>. Now the largest interdisciplinary community of its type, the collaborative provides free, noncommercial monthly webinars to over 10,000 practitioners in the U.S. and abroad. Each is facilitated by thought leaders and clinicians from institutions including Harvard, Mayo Clinic and Cleveland Clinic.

The Registered Health Coach & Health Coach Registry

For individuals who have completed the entire CCP program and examination (www.healthsciences.org/Chronic-Care-Professional-Certification), an advanced health coaching credential is available based on national standards for training and proficiency in motivational interviewing health coaching (Registered Health Coach or RHC). CCPs and RHCs are included in the first national health coach registry (www.HealthCoachRegistry.org).

Thanks to our Partners In Improvement

We recognize the population health industry association Care Continuum Alliance, and the Case Management Society of America, who have supported CCP certification, as well as over 5,000 professionals and hundreds of organizations that have shown their commitment to better patient care and purchaser value by choosing CCP. Thanks to over 25 BCBS affiliates, the U.S. Air Force, Kaiser Permanente, among others, who have provided CCP training and recommended or required CCP certification for staff. Special thanks to BCBS of Michigan who partnered with HealthSciences in a comprehensive workforce development project combining CCP, Motivational Interviewing (MI) skill-building and nurse proficiency assessment. The program was nominated for the BCBS Association Best of Blue Award, following an evaluation by health care services researcher, Dr. Ariel Linden. The study was the first to demonstrate a link between nurse proficiency in MI and member engagement (enrollment).

We are grateful for early support from the State of Minnesota Department of Human Services and PrimeWest Health, as well as the states of Wisconsin and Vermont. We also thank states, including Montana, who have made CCP a requirement for Medicaid disease management providers, along with consortiums such as Michigan's Medical Advantage Group, who chose CCP for practices in one of the top ten Patient-Centered Medical Home groups in the U.S. through a HealthSciences partial CCP tuition waiver program.

HealthSciences Institute also acknowledges our international participants and implementation partners from Canada, Asia, the Middle East, South America and Europe, with special thanks to the Alberta Health Authority for earlier funding for regional delivery of CCP throughout the province.

We are grateful for the hard work of the HealthSciences Institute team who contributed to the research, development, writing and design of this manual. We also thank the thought leaders and subject-matter-experts who shared their knowledge and expertise as faculty for the not-for-profit PartnersInImprovement Alliance and contributed to the online CCP program.

We hope that CCP helps you to support the success, health and independence of the people that you serve.

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