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HEALTH COACHES: An Innovative Program For Providing Truly People-Centred Care

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While for many of us the excitement around “person-centred/people-centred/patient-centred” is new, there have been people in our healthcare system fighting for these very practical, and yet profound changes, for years.

Two such health system reformers are **Duncan Sinclair**, founding member, and **Dr. Vaughan Glover**, the President of the *Canadian Association for People-Centred Health* (CAPCH). Glover says “too often ‘people-centred’ is a term used for its political popularity -- with only a vague idea that it means designing our health services delivery system in a fundamentally different way.”

He says that “the concept of people-centred health is a radical idea that health, healthcare, and our healthcare system, should put people first.” In his book *Journey to Wellness*, Glover explains that it is based on the reality, that “each person manages and is responsible for their own health. More specifically, ‘people-centred’ means taking each piece of the health system puzzle, and ensuring it is responsive to, and respectful of, the perspectives of patients.”

Ultimately the goal of “*people-centred care*” is to enable proactive partnerships. “Its value,” says Glover, lies in the fact that “not only does the demonstrated cost of illness care fall, which it does, but population health and well-being also increase — and in the long run, total system costs decline.”

“Real system reform means embracing a system model in which the person – supported by skilled and credentialed professionals – works in partnership alongside their trusted network of confidences to support them”, says CAPCH’s President. While Glover and his organization have advocated for this concept of “**Health Coaches**” since 2005, one highly innovative organization is now actually delivering such programs.

The *Ottawa Regional Cancer Foundation* has taken an active role in the development and provision of person-centred, community-based cancer care -- through an innovative, comprehensive approach referred to as “**Cancer Coaching**”. Cancer Coaches are part of a multidisciplinary team of health and wellness professionals -- with a background in oncology. Coaches work one-on-one, or in groups with cancer patients and/or family members or caregivers. Coaching is offered as a complement to existing cancer treatments and is provided without medical referral.

Cancer Coaching provides navigation assistance to improve access to health care; helps improve patient/clinician communication; and provides information, support and practical guidance to help people cope with the challenges of cancer. The objectives of

Cancer Coaching are to improve patient satisfaction, quality-of-life and quality-of-care as well as both physical and psychosocial health outcomes. It does this by facilitating empowerment and sustainable behavior change. Ultimately, Cancer Coaching serves to enable cancer patients to become engaged, active participants in their own health care – just what the Minister of Health has been suggesting. Cancer Coaching is both part of the continuum of cancer care, and, a facilitator of the process.

Cancer Foundation CEO **Linda Eagen** says “our model of care focuses on the whole person, not the disease. It is personal and individual.” She explains that patients are assisted in identifying their particular needs which may be influenced by a number of factors such as: the individual’s social context (i.e., cultural traditions, personal preferences and values, family situation, social circumstances and lifestyle); the specific point in the cancer experience; the type of cancer; and, the treatments available.

Working collaboratively with their Coach, patients develop their personal “*I Can Plan*”. Through information, support and skills development, they are encouraged and assisted to move toward those goals. Through the processes of empowerment and supported self-management, patients learn how they can be their healthiest – how they can live well with cancer.

Here is a good example of what Health Minister **Deb Matthews** was talking about when she urged health service providers to: “**Dream. Imagine. And make it happen**”.

While the original coaching framework of the *Survivorship Centre* is based on the Australian model, Eagen and her team have engaged in a rigorous continual improvement process – and are now on their twelfth iteration of their unique “*Cancer Survivor Coaching Model*”.

Coaching is delivered at the Cancer Foundation’s **Maplesoft Centre for Cancer Survivorship**: a community-based setting on Alta Vista Dr. in Ottawa -- at which I visited last year with **Sholom Glouberman**, and the *Patients’ Association of Canada*, as we investigated local examples of “patient-centred care”. Since opening their doors in November, 2011, nearly 1300 patients, caregivers and family members have been coached.

The core element of the coaching model is individual coaching -- which provides cancer patients and their primary caregivers with one-on-one personalized care. Coaches work with patients to help identify the areas of need and interest that are relevant and important to them. Appointments are structured to help set goals, assess levels of motivation and readiness and to establish a customized health plan.

Coaches also help anticipate and overcome any foreseeable barriers. Based on their individual goals and needs, Maplesoft clients may then decide to explore other services offered by the Foundation -- including group coaching or a variety of complementary programs. The coaches are also able to assist their clients to access other resources available in the community.

Group coaching is designed to bring together cancer patients and caregivers at “like stages” in their cancer journey. It provides individuals with an opportunity to work with others who are sharing similar challenges and to benefit from each other’s experiences and knowledge. Examples of the group coaching programs available include: Coping with Cancer; Wonders and Worries for kids whose parents have been diagnosed with cancer; Caregiver Group; Cancer Survivorship and Work; and Next Steps.

As a complement to individual and group coaching, a variety of programs and services are offered by means of comprehensive programs, weekly drop-in programs and healing therapies. These complementary programs focus on health and well-being; addressing the client’s physical, emotional, spiritual and psychological needs -- and offer the opportunity to explore forms of alternative care on a trial basis. The current roster includes more than 30 programs, workshops and services.

In addition to its coaching and complementary programming, the Cancer Foundation has established partnerships and collaborative arrangements with other likeminded agencies and organizations to improve access to cancer resources and support. These partners and collaborators offer some of their services at the **Maplesoft Centre**. The Cancer Foundation has become a “hub for cancer survivorship”.

What we know is that *Cancer Coaching* is working. Participant satisfaction surveys indicate:

- 81.6% of respondents reported being “much better”, or “better” able to cope with life;
- 81.7% were “much better”, or “better” able to keep themselves healthy; and,
- 81.4% were “much more”, or “more” able to help themselves.

Johanne Levesque, Vice President, *Survivorship Care and Professional Practice* at the Cancer Foundation explains, “The Maplesoft Centre that we have created is a healing place where cancer patients and survivors can try new things in a ‘safe environment’, develop new skills and the confidence necessary to manage their disease”.

In the words of some participants:

- “Through this unique coaching program, I have been empowered to better manage my diagnosis ... When cancer takes so much from you, knowing that you are part of a network that empowers you is a huge asset.”
- “I have experienced renewed energy, greater stress management and a willingness to engage in activities again.”
- “The Center has helped me to realize how I play an important role in my own health and to take control of my life. When I was diagnosed with cancer I felt that my life was being controlled by the cancer. Now I feel back in control. I

exercise regularly, follow a healthier diet and know that the Center is there to help when and if I need it again. ”

Through coaching, the participants in Ottawa’s *Cancer Survivorship Centre* become informed, active and engaged in their treatment and their wellness. The patients’ report that their quality-of-life and quality-of-care have improved.

Based on these self-reported benefits, it is predicted that Cancer Coaching will have a tangible and quantifiable impact on a number of important measures including: increased treatment compliance and adherence; reduced disease and treatment-related symptoms; increased length of survival time and/or time to recurrence; and more appropriate utilization of health care resources (e.g., accessing acute care for symptom management).

Ultimately, such outcomes would have a significant impact on the efficiency and sustainability of our over-burdened health care system. MOHLTC really ought to fund a *Business Case Proposal* for this concept/initiative.

Linda Eagen says the **Maplesoft Centre** is striving to be “an incubator for cancer survivorship innovation. We are an example of patient-centred, community-based health care; based on action-oriented translational research; including program development as well as delivery; and professional development.”

The Foundation will soon to evaluate the impact of their *Coaching Program* on patients, and on the health care delivery system. They are also building relationships with stakeholders in industry to facilitate the up-scaling of the model by means of an e-coaching platform. They also intend to develop a training and credentialing program for *Cancer Coaches*.

It took a decade of lobbying to get the MOHLTC to recognize palliative care as a “healthcare service”. Will it take that long for Queen’s Park and the LHINs to build on what we have learned from Ottawa’s *Cancer Coaches*?

Can you see how these simple, low-cost concepts for a more “people-centred” approach might work in other circumstances? **Think about it.** We could dramatically improve the patient experience and significantly decrease costs – for very small investments in *Health Coaches*.

Next week’s blog: “*Health Link System Governance In A Decentralized Delivery System*”.

FORWARD THIS BLOG TO COLLEAGUES WHO ARE INTERESTED IN HEALTH SYSTEM REFORM.

