## **Clinical Health Coach Model**

"Behavior Change Specialist" "Care Management Facilitator" Population Identification/Definition Aligning best practice Improving the health of our patient populations... care with patient centered resources. one person at a time. Patient Health & Risk Assessment Transform the Transform the Conversation Care Risk Stratification Health Patient Centric Coachina Care Planning Strategies Low/No Risk Moderate Risk High Risk Reducing Care Science of CLINICAL HEALTH COACHING Gaps **Behavior Change** Patient Health Management Interventions Health Promotion. Health Risk Care Management & Complex Disease / Increasing Patient Wellness Management Coordination Case Management Prevention Visits Centered Goal Settina Improving Transform the Transform the **Patient** Health Literacy Partnering for Conversation Care Process and family **Behavior Change**  Building Self Care Skills Engaged and Activated • Empathy, **Patients** Self-Efficacy & Coordinating **Empowerment** Community Resources Whole Person Strategies **Behavior Change** Measureable Outcomes **HC** Cost Healthcare Health & Patient Patient Clinical Reduction & Team Quality of Life Experience Measures Avoidance Efficiency

