

CANADIAN HOME CARE ASSOCIATION



MODULE 5: Use Emotions and Coaching

USE EMOTIONS

Welcome to Module 5 of the Canadian Home Care Association's emotional intelligence learning modules.

This module is designed to help health care providers learn about using emotions. As you complete this module, you will gain an understanding of the important competency of coaching, as well as the behaviour of guiding.

The goal is to increase your emotional intelligence skills to help patients and caregivers deal with difficult situations and unexpected challenges through their emotional cycles of change.

By the end of this module, you should be able to:

- Define coaching and explain its role in emotional intelligence and the caregiver journey;
- Discuss the need for coaching in response to caregivers' experiences through change;
- Explain the difference between coaching and mentoring;
- Discuss the process of building trust in the coaching relationship;
- Describe the sandwich technique of giving feedback in the coaching relationship;
- Outline two different models of coaching; and
- Describe the technique of guiding and ways to use questions in caregiver conversations

TERMS AND DEFINITIONS

These are the terms introduced in this module. You can also download a PDF that includes all the terms used in the EI Learning Modules.

EI Domain: Use Emotions

As you learned in the EI Learning Module Preview, the fourth domain of emotional intelligence is concerned with using emotions.

Using emotions is the ability to realize and make use of changing emotions and moods to best fit the task at hand.

This domain helps us to use what we know about our emotions to generate positive interactions with others and motivate ourselves in all situations. How you feel often determines how you view situations.

For example, when you are in a good mood, every day challenges don't seem so bad. But, when you are in a bad mood, even the smallest of challenges can seem like a crisis.

In module 4 we looked at how to use emotions in our decision making and collaborative thinking.

In this module, we'll consider how we can use our emotional intelligence to become better coaches and how to guide caregiver during 'coaching moments' by asking the right questions.

What is Coaching?

Coaching is a process for developing skills and competencies. In coaching, a person with experience (the coach) provides instruction and guidance to a learner.

The aim of coaching is to achieve a specific goal or skill. A coach generally focuses on improving one or two areas of development at a time.

The most well-known type of coaching is in sports. You may have also heard of business coaches and life coaches.

But coaching can happen in almost area and you don't need to have coach in your job title to be a coach. If there is a child in your life, you've probably spent some time coaching!

The key skills for successful coaching include:

- Listening;
- Communicating;
- Questioning;
- Emotional intelligence; and
- Developing trust.

Coaching and Emotional Intelligence

Successful coaches have strong emotional intelligence skills.

Coaches are good at understanding and relating to people.

Strong coaches are self-aware, able to show empathy, and skilled at building rapport.

As a key competency of emotional intelligence, coaching is used to respond to changing situations and know what emotions and moods best fit the task at hand. Once you can *perceive, understand, and manage* emotions, you can *use* that knowledge in a helpful, productive, and supportive way.

We've already discussed one way to use emotions through the competency of decision making and the behaviour of collaborative thinking (Module 4). Now we will explore how to use emotional intelligence to be better coaches and learn the behaviour of guiding so that we can recognize and maximize 'coaching moments' with patients and their caregivers.

Why is Coaching Useful?

Coaching is a proven way to develop a person's skills and abilities—just look at any successful athlete.

Coaching creates the space for health care providers to build their emotional intelligence skills and try new behaviours that effectively use emotions to achieve results.

Coaches serve as thought-partners, supporting the development of mindfulness and greater self-awareness.

They use empathic approaches to motivate caregivers and help them reframe situations in a positive light. Coaches can also improve communication skills and encourage the use of mindful listening.

They use flexible approaches to adapt to changing situation and manage potential conflicts.

Effective use of coaching can result in:

- Positive behaviour changes lasting longer;
- Increased creativity and flexibility;
- Improved confidence and knowledge;
- Easy response and acceptance to change; and
- Improved relationships.

Coaching and Caregivers' Experiences

Providing care for a loved-one, friend, or family member can be challenging. But each caregiver's experience is unique. These unique experiences are shaped by their head, heart, and hands.

The head represents what caregivers think: their knowledge, familiarity, and understanding.

The heart represents what caregivers feel: their emotions, reactions, and feelings.

The hands represent what caregivers do: their roles, tasks, and responsibilities.

Coaching is useful for dealing with issues and challenges caregivers may be experiencing. Coaching can help caregivers realize their strengths and abilities and achieve their caregiving goals. Health care providers do not need to be formally trained as coaches to develop and use their coaching skills in their work.

To learn more about how health care providers can respond by coaching and guiding caregivers in what they think, feel and do, hover the hotspots on the photos.

Supporting Caregivers through Change

Caregivers are faced with a number of changes as they adjust to their new role and circumstances. These changes impact every aspect of their life and influence their caregiving experience—what they think, feel and do.

It is important that health care providers recognize and understand the emotional cycles of change that patients and caregivers are experiencing.

When experiencing change—big or small—all patients and their caregivers go through the cycle in

different ways. Some people move through the stages quickly, while others may spend time in each stage, or get stuck and have to move back before they move forward.

Practicing coaching to support caregivers through the emotional cycles of change is an important emotional intelligence skill for all health care providers.

To learn more about practicing coaching to support caregivers' experiences through the change cycle, hover over the hotspots on the exhibit.

COACHING

Coaching vs Mentoring

It's important to understand that mentoring and coaching are not the same thing. There are important differences. Each has goals to accomplish, but the methods are not the same.

Coaching targets very specific opportunities for improvement.

A coaching interaction is usually for a set amount of time.

Coaching focuses on one or two specific areas of development, usually concerning skills and abilities.

The goal of coaching is to produce a more immediate change or result.

Coaching focuses on how to improve skills or abilities in the present moment.

In comparison.....

Mentoring involves a long-term relationship over an extended period of time.

The interaction between a mentor and mentee is usually casual and unstructured.

A mentor is usually regarded as an expert in their field, and they act as a resource to the mentee.

The goal of mentoring is to develop areas that the mentee believes are necessary for their future; for example in their career.

Mentoring focuses on long-term goals and what steps must be taken to achieve those goals in the future.

A comparison of the key elements of coaching and mentoring is shown in the table below.

Coaching in the Moment

Coaching often happens in a formal context—like a sports practice, or a session with a business coach. But, coaching can also happen in an informal, impromptu way.

Health care providers can include coaching and skills building into their regular interactions with patients and their caregivers.

Effective impromptu coaching can happen during spontaneous situations. It involves taking advantage of coachable moments, when the caregiver is open and receptive to feedback and suggestions.

Coaching in the moment is a practical way to engage and empower the caregiver when you have limited time.

The first step to coaching in the moment is observing the caregiver and patient, asking questions and listening.

An effective coaching interaction is built on confidentiality and trust. Caregivers must be comfortable sharing their thoughts and feelings with you before you can engage in coaching. When the time is right, you can have a coaching moment.

Effective coaching moments are a two-way dialogue, not a lecture. Coaching moments should also be positive and encouraging (that is, not a time for sharing negative information or bad news). Coaching moments are also opportunities to give information and instruction that encourages development.

Building Trust

Without trust, you will not be able to have successful coaching moments. Building trust takes practice and sensitivity. Here are six ways to build trust with caregivers.

1. Listen mindfully and speak less

Pay attention to the caregiver's behaviour and body language signals and lend an empathetic ear.

Practice mindful listening and focus on what the caregiver is saying, as well as their facial expressions, gestures, the volume and tone of their voice.

2. Show respect the caregiver

Understanding and acknowledging the caregiver's perspective and experience can make them feel valued and respected.

Practice using empathic statements that include the pronoun "you". For example, "You sound upset" or "It must be difficult for you."

3. Be honest and transparent

The caregiver will trust you if they know they can count on you to tell the truth.

Try reframing negative situations to a more positive approach. A positive reframe looks at a situation and finds something good in it. Reframing from a caregiver's perspective shows them you are understanding open.

4. Keep your word

If you make a commitment, you must make an effort (within reason) to keep it. If you can't, be honest and explain why.

Use dispositional flexibility and remain both optimistic and realistic at the same time.

When circumstances impact what the caregiver needs, it is helpful to approach the challenge with positive thinking and not ignore the reality of a situation.

5. Be confident and demonstrate credibility

Draw on your experience, share stories that support your track record, and refer to useful resources.

Try a collaborative thinking approach to fully understand the patient and caregiver preferences, to recognize their emotions, and integrate these with your own professional clinical knowledge.

6. Inspire the caregiver

Tell the caregiver you believe in them and then demonstrate behaviours such as empathy, flexibility, integrity, respect and authenticity.

Help the caregiver recognize their own successes and acknowledge their feelings through the practice of mindfulness.

The key to inspiration is understanding, accepting, and dealing with emotions in healthy ways.

CHECK YOUR UNDERSTANDING 5.1

Check Your Understanding

To check your understanding so far, take a moment to answer these questions about coaching. If you don't get the correct answers, you can go back and review the content again before going to the next section.

COACHING TECHNIQUES AND MODELS

The Sandwich Technique

Giving feedback is a core element of coaching in the moment. The coach provides feedback to encourage improvement.

But feedback can easily be misunderstood as criticism. This can make providing feedback a stressful situation. It may be helpful to think about feedback as an opportunity for growth (rather than criticism).

The Feedback Sandwich is a way of introducing feedback in a positive way by surrounding it with praise.

The sandwich works like this:

Begin by recognizing something positive.

It could be a good attitude or a step forward in achieving the care plan. But do not spend too much time with praise, because this might dilute your intended feedback message.

Next, deliver the feedback, or the opportunity for growth in a positive tone.

This should be the core of your message.

Then, close the feedback sandwich with a positive note.

For example, you could praise the caregiver on a strength they have or tell them you are confident they are going to be successful.

This closing helps to overcome the embarrassment that is often associated with receiving feedback.

One way to remember the sandwich feedback method is with the acronym POP.

The first P stands for “start with Praise”
O stands for “deliver the Opportunity for growth”
And the last P stands for “close with Praise”

Scenario: Using the Sandwich Technique

There are three key benefits for using the feedback sandwich technique:

First, it softens the impact of corrective feedback.

Second, it is easier to give corrective feedback if it begins and ends with something positive

Third, it reinforces good behaviour and asks for improvement.

Let’s see look at an example of a POP feedback sandwich.

We open with praise:

“Mrs. Patel, you have done an excellent job of working with you husband on his daily exercises and encouraging his improvement.”

Then, we deliver the opportunity for growth:

“But, I’ve noticed the sheet we developed to record his progress is not being completed. We will need the information on this sheet to setup a future program to advance his recovery. It’s important to keep this sheet updated.”

And we close with praise.

“I know you how involved and committed you are to your husband’s rehabilitation.”

GROW Coaching Model

There are many different models of coaching that can be used, even if you have not had any formal coaching training.

Coaching models help coaches use a consistent approach to strategy and direction. Models also increase the caregiver’s confidence, because they see a methodical approach.

A haphazard approach to coaching leads to disorganized and frustrating coaching sessions.

The first coaching model we will learn about in this module is the GROW model. This is a simple, but effective, coaching tool.

GROW stands for

- Goal
- Reality
- Options, and
- Way Forward

Scenario: Using the GROW Model

Following the GROW model consistently will help you develop a natural process for your coaching efforts.

When coaching is natural, it puts you and the caregiver at ease, making the process more valuable and rewarding.

Let's think about how we can use the GROW model to structure a coaching moment with a caregiver.

First we have G: Establish a *Goal*

- A goal has to be set to give direction and purpose to the coaching session.
- When a goal is ambiguous it will probably not be achieved.
- Setting the goal first shapes your discussion with the caregiver and sets the tone.

• Then, we have R: Do a *Reality Check*

- A reality check means that we examine the situation.
- Coach and caregiver must agree on the current situation and what issues are causing breakdowns.
- Understanding a problem begins with identifying it and claiming it.
- Once this is done, obstacles are easier to identify.

Next we have O: Develop *Options*

- Coach and caregiver explore action steps that may help them improve their performance.
- It is important that the caregiver explore different options and develop their own steps.
- Coaches should not set action steps on their own—this leads to poor buy-in and missed goals.

Finally, we have W: Create Plan as the *Way Forward*

- Once you agree on options, create a formal plan.
- If the plan is not written down, it probably will not happen.
- A well-defined plan is essential for understanding the way forward and to track success or failure.

Solution-Focused Coaching Model

The solution-focused coaching model emphasizes the caregiver's role in the process.

In this approach, the coach's role is assisting the caregiver to define their own goal or desired future state.

Then, the coach assists the caregiver in creating their own pathway to achieve that future state.

The model suggests that identifying problems and what causes them does not help us fix them. This approach also believes that focusing on the problem can also limit potential solutions.

In the solution-focused approach, the person who is being coached is capable of solving their own problem and is the best resource for finding the solution.

The principles of solution-focused coaching are that

The coach and caregiver are equals;

The caregiver is the "expert" in their own life;

The coach is a facilitator to new ways of seeing a situation;

The coach and caregiver work collaboratively to develop solutions; and

The solutions must be flexible—if it works, do more of it; if it doesn't, do something different.

Scenario: Using the Solution-Focused Model

In simple terms, when using the solution-focused model, you ask caregivers to think about what they want to achieve and then help them plan how they'll get there.

Let's look at the basics steps you might take when using this approach.

Number 1. Identify a goal or solution

- Reframe and present problems in a way that allows the possibility of a range of solutions.
- Ask questions that raise the caregiver's awareness of potential solutions.
- Talk about the solutions, highlighting caregiver's unrecognized strengths and resources.

Number 2. Create a plan for solutions

- Identify specific action steps.
- Ensure that the caregiver writes down the steps, with a time frame.

Number 3. Take action

- Caregiver begins taking the steps, as planned.
- Coach and caregiver monitor progress together.
- Identify what isn't working and then change the plan.

CHECK YOUR UNDERSTANDING 5.2

Check Your Understanding page

To check your understanding so far, take a moment to answer these questions about coaching techniques and models. If you don't get the correct answers, you can go back and review the content again before going to the next section.

GUIDING

The Process of Guiding

Guiding is a process of directing a person towards an agreed upon goal.

Guiding includes providing encouragement, giving advice, and demonstrating through behaviour.

When guiding is successful, the guide usually leads from the side (not from the front).

A good guide is concerned with the progress and satisfaction of the person they are guiding.

As caregivers go through emotional cycles of change, the health care provider gives them the support and guidance they need at each stage. This on-going guidance is achieved by observing the caregiver, listening to them, and using guiding questions to understand their head, heart and hands. This process empowers the caregiver as an essential partner in the care team.

What Are Guiding Questions?

Guiding questions are non-judgemental and encourage the caregiver to think about their answer.

They are succinct yet stimulate conversation and usually lead to a better understanding of what the caregiver believes or thinks.

Good guiding questions are open-ended. An open-ended question cannot be answered with a simple yes or no.

This type of question requires a more thoughtful answer. Open-ended questions also do not have a single correct answer.

Open-ended guiding questions are designed to start a conversation and require full answers that reflect on both our knowledge and feelings.

Such questions should also be concise and focus on a specific topic.

- This type of question usually begins with What, Why, How or Who, and encourage follow-up questions to get more information. Follow-up questions ask for more details or for examples.

Good guiding questions:

- focus on a specific topic
- open-ended
- concise
- non-judgemental
- encourage both a head and a heart response

To ensure you are asking good guiding questions:

- Listen more than you talk—the goal is to find out information, not to share your own opinions!
- Pause after asking the question—give the caregiver time to formulate a response to the question.
- Remember that silence creates a space for mindful listening.

Guiding questions are also useful outside of coaching moments. Whether you are guiding caregivers in unfamiliar areas of restorative care, or helping them adjust to their new role and responsibility, asking the right questions at the right times will help the caregiver understand themselves better.

Examples of Guiding Questions

Good questions usually lead to good answers. Here are some examples of good, open-ended guiding questions that you might use with caregivers.

- What is important to you right now?
- What are other possible solutions?
- What do you want to do?
- What is working?
- What have you tried so far?
- What do you feel is stopping you?
- What happened next?
- Why you are having problems with this exercise?
- Why do you think she is not making good progress?
- Why is this working so well/not working well?

- How do you think you can balance the work?
- How are you adjusting to the changes?
- How can you take time for yourself?
- Can you tell me more about the situation?
- Could you describe the situation in more detail?

CHECK YOUR UNDERSTANDING 5.3

Check Your Understanding

To check your understanding so far, take a moment to answer these questions about the process of guiding. If you don't get the correct answers, you can go back and review the content again before going to the next section.

SUMMARY

Module Summary

This module covered the emotional intelligence domain “use emotions,” the competency of coaching and ways to practice the behaviour of guiding. The key points to remember are:

- Coaching is a process for developing skills and competencies in which a person with experience (the coach) provides instruction and guidance to a learner.
- The aim of coaching is to achieve a specific goal or skill.
- Coaching is a good way to enhance your emotional intelligence and make use of changing emotions and moods to best fit the task at hand.
- Coaching is useful for home care providers to help caregivers realize their strengths and abilities and deal with emotional cycles of change. achieve their caregiving goals.
- Health care providers do not need to be formally trained as coaches to develop and use coaching in their work.

Coaching and mentoring are not the same. Mentoring differs from coaching in its timing, methods, and goals in that it focuses on the future and developing goals, rather than skill building.

A coaching moment is built on confidentiality and trust.

Building trust requires listening mindfully, respect, honesty, keeping promises, confidence and credibility, and inspiration.

Techniques and models of coaching include:

The sandwich technique of providing feedback, which uses Praise, Opportunity for growth, Praise (POP).

The GROW model of coaching, which includes establishing a Goal, doing a Reality check, developing Options, and creating a plan as the Way forward.

The solution-focused coaching model, which includes identifying a goal, creating a plan for solutions, then taking action.

Guiding is a process of directing a person towards an agreed upon goal through encouragement, advice, and demonstration.

Successful guides ask the right questions.

Good guiding questions are open-ended, non-judgemental and succinct. Open-ended questions cannot be answered with a simple yes or no.

By using emotions and taking small bits of time for coaching moments, health care providers can guide caregivers through their emotional cycles of change.

Reflection

Consider what you have learned in this module and respond to the following reflection questions.

Think about a coaching moment you have had with a patient or caregiver.[pause]

Could you have used the sandwich technique to provide feedback? [pause]

Did you use good guiding questions to build trust?

What's Next?

Congratulations!

You've now completed the Canadian Home Care Association's emotional intelligence learning modules.

The goal of these modules was to introduce the four domains of emotional intelligence and the key EI competencies and behaviours that will help you support patients and caregivers on the care journey.

Final Reflection

Congratulations, you have completed the first part of the Emotional Intelligence Learning Program.

The next steps to enhance your emotional intelligence competencies and to practice new behaviour include:

- Virtual learning sessions facilitated by our organizational trainer and educators teams that will explore the key emotional intelligence competencies in a deep way and provide real-life practice examples that will expand your learning.
- Practical field application using a structured mentoring approach that will take place over a set period of time. Your supervisor will provide hands-on follow-up to help you try and test your new emotional intelligence competencies and behaviours.

The Canadian Home Care Association's Emotional Intelligence Learning Program is designed to help health care providers learn about and develop emotional intelligence competencies.

These practical skills will make providers become more resilient and apply emotional intelligence to better respond to the challenges patients and caregivers experience through the emotional cycles of change.

If you have any questions about the content or would like more information, please contact the Canadian Home Care Association at The CHCA Learning Centre.

The CHCA is a national non-profit association dedicated to strengthening integrated community-based care. Launched in 2021, the CHCA Learning Centre offers a range of flexible and well-designed courses for home and community care providers. Using a blended learning model that leverages technology and instructional design our micro-training courses maximize participant choice and engagement.

The CHCA Learning Centre is an innovative capacity-building initiative for health care providers (regulated and non-regulated) to enhance their abilities to recognize, understand and address challenges experienced by caregivers when they are supporting a loved-one who is receiving care in their home.

The CHCA Learning Centre increases health care providers emotional intelligence skills through a 3 step process: (1) self-directed e-learning modules, (2) facilitated group learning and (3) practical field application through a structured mentoring process.

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