

Intrinsic Coaching™

Intrinsic Coach™  
Development

*A Smoking Cessation  
Conversation*

Intrinsic Coaching™

and Intrinsic Coach™

Development:

A Smoking Cessation

Conversation | May, 2005

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From *Christina Marshall*, President, Totally Coached, Inc.

Dear Colleagues, As committed wellness professionals, we work hard at making a difference for people and too many of us become exhausted from carrying the weight of responsibility for people's results. It's not a secret; it's a difficult situation we hear about all the time. That's why we understand it can be hard to imagine that Intrinsic Coaching™ really does make the difference everyone wants. We want you to know that Intrinsic Coaching™ conversations really are different and we can enable you to have those better and more satisfying conversations every day. That's why we're giving you, here, an inside view of one of our coach development sessions. Please enjoy it.

Regards, Christina

P.S. If you want to have coaching conversations like the one you read here, or experience the same results as the coaches below, contact us at:

***480-515-5220 or [totallycoached@totallycoached.com](mailto:totallycoached@totallycoached.com)***

Intrinsic Coaching™ brings people together in ways that multiply who and what they can be for each other. We want you to imagine this and make it a reality for yourself and your organization like our coaches-in-training below.

**As a professional in the health and wellness field, Intrinsic Coaching™ is one of the most significant skills I've been able to learn, and more importantly, apply, on a daily basis.** - *Debra Dailey, Deputy District Director, Health & Wellness, Cuyahoga Community College, Parma, OH*

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**Totally Coached, Inc. gave us a more focused, efficient, and effective way to deliver our services for optimal client outcomes. What we knew before was the best we knew at the time. Once you know Intrinsic Coaching, you can never go back. It's about developing quality business practices to deliver successful client outcomes.** - *Teresa Taylor-Dusharm, Director, Advocate Health Care, Chicago, IL*

### ***An Intrinsic Coaching™ Approach to Smoking Cessation***

Frustrated by the routine of explaining the same smoking cessation options over and over, Sheila wanted more from her conversations and better results for her clients. Feeling caught between her role as expert and her desire to coach, she asked: How do I elicit their best thinking when so much of what I have to do is provide information?

In a coach development session, Sheila figured it out by coaching fellow coach-in-training, Belinda:

Coachee (Belinda): I don't really want to quit smoking but my doctor says I have to.

Coach (Sheila): How can I help you?

WITHOUT COACHING:

Coachee: I hear a lot about patches. Do they work?

Coach: There are many ways to quit smoking and some work better than others for different individuals. Patches are often successful. But if they don't work we also have other options.

Employees and senior leadership are really buying into our efforts because they're seeing the benefits. We have recently been asked to present coaching to the Board of Directors as an example of a program that builds trust with employees. In less than a year, we went from an idea to a respected and integral program within Clarian. Coaching created an avenue to be successful in new and exciting ways. - Elaine Gaither, Case Manager, Methodist Medical Group, Indianapolis, IN

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I am very glad I took the Totally Coached® Series first because they presented a clear picture of what coaching is and is not. Through Totally Coached, I understand coaching to be about eliciting instead of doing all the talking because the coachee is their own best source of answers. In subsequent coach studying, this line has not been made as clear and the coach has been portrayed as an expert, consultant, or mentor, which is no different from what we had already been doing. Totally Coached gave me a way to get results with people I didn't know how to get before. - Bill McPeck, Director, Employee Health and Safety, Maine State Government, Augusta, ME

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Coachee: Like what?

Coach: There is [this and that....].

Coachee: Well, I want something that works. I don't want to go through all this and have it not work. Can you still smoke while on the patch?

Coach: No. Because the patch delivers nicotine, you can't smoke while wearing one. The combination of patch and cigarette could make the nicotine level in your blood go dangerously high.

Coachee: Oh...well I don't want to quit all at once. I still want to smoke.

Coach: Ok, then. We can talk about other options.

Coachee: Ok. Tell me about the others.

The conversation continued in this manner with the coachee asking questions about "What do have for me?" and the coach continuing to tell.

To change this into a coaching conversation, Sheila was asked to orient the conversation more around action toward change and less around recitation of information. Specifically, Sheila was asked to do two things: 1) Offer information more succinctly and 2) Always hand the conversation back to the coachee by eliciting thinking on what was just said.

#### COACHING APPROACH:

Coach: [Explains the use of nicotine gum.] What do you think about that option?

Coachee: I hate chewing gum. I always bite my tongue.

Coach: Then would you say we should put that option aside?

Coachee: Yes, I don't want the gum.

Coach: [Explains another option.] Do you think that's an option that would work for you?

Coachee: It sounds like it's too much work...it doesn't really appeal to me.

Coaching has opened the door to unlimited possibilities for me. I no longer think that my skills and knowledge are being wasted. I am now able to find out what people are interested in changing and tailor our conversations to exactly their needs. - Colleen Reilly Perkins, Manager of Health and Productivity, Coors Brewing Company, Golden, CO

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It was a big relief to find out it's not my job to motivate people but rather to elicit their best thinking. It's a shift that replaces exhaustion and frustration with energy and enthusiasm. - Susan Cohen, Health Promotion Coordinator, Healthtrax, Glastenbury, CT

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Everyone thinks they know how to call someone on the phone. But then you realize they don't know until they know about coaching. Coaching really is a skill. - Beth Neilson, Manager, Methodist Medical Group, Indianapolis, IN

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Your presentation of coaching is FANTASTIC. To me, you nailed it down - deficit vs. asset approach. Thanks for putting that in my brain. - Jim Smoke, author of 17 books, including the best seller, *Growing Through Divorce*.

Coach: Then let's put that aside, too. There's one more option we haven't covered. [Explains medication.] That would require a visit to the doctor. Could you see yourself being successful by using medication?

Coachee: It seems the easiest. But I'd have to take time to go to the doctor. I just don't have the time.

Coach: Do you have other objections to the pills, in addition to taking time for the doctor's visit? [Note: There is no "push," only full respect, in the Coach's tone of voice.]

Coachee: I just wish you could give them to me right here. Why don't they let you just give them out?

Coach: The pills require medical supervision I'm not trained to provide. If you weren't pressed for time, would medication be the option you wanted?

Coachee: Yes. It seems to require the least amount of attention, other than the doctor visit.

Coach: Ok, then. Do you want to brainstorm how to get that appointment out of the way with the least amount of disruption to your life?

An Intrinsic Coaching™ approach changes the nature of a smoking cessation conversation. Sheila describes it like this:

"I learned I can provide all the information a patient needs to make an informed decision while, at the same time, coaching my patient to think better about choices and action. At first I was somewhat skeptical that coaching could be a part of these conversations I was having with patients. As I found out then, and in my continuing practice, it is much less work for me to coach than to continue with the method I was using and the patient really does respond better. I now provide the patients with information, but they are responsible for making decisions based on that information. From the coaching conversation Belinda and I had, I can sum up what I learned in three main points: 1) End each 'batch' of information with a question that asks the coachee to think about and respond to what was just said; 2) Provide information in a brief and succinct manner; and 3) Ask for an action on the part of the coachee. All of these points get at one main theme – the coachee is responsible for the outcome. It takes the pressure off me as a counselor, it gets better results, and it is satisfying to know that by eliciting better thinking

With coaching, there is no such thing as a routine call. - Elaine Gaither, Case Manager, Methodist Medical Group, Indianapolis, IN

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I am getting better results and also not feeling so exhausted. I'm finding I feel less tired because I am putting less of my own self into it while encouraging the participants to put more of themselves into it. When I make myself be less, they can be more and that's the way it works best. I think that is a really big lesson. - Kristin Wehner, Wellness Specialist, Coors Brewing Company, Golden, CO

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I am a Health Educator and I am used to teaching rather than coaching. It was difficult for me to adjust to the process of letting the coachee take the lead, however now that I've made the shift, I let my coachees tell me what they need and what they will do get there. With my old skills and new skills combined, I find that coaching makes my work much less draining for me personally. Now, I focus on coaching and implement education when appropriate. I look forward to seeing greater individual successes due to the fact that coachees determine their own needs, goals, and action steps. - Tracy Kuhn, Wellness Coordinator, Advocate Health, Caterpillar, Inc., Chicago, IL

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and decision making from my coachees, they can also better make these decisions without me in the future."

Belinda also had an eye-opener. She said, "Before Sheila started using an Intrinsic Coaching™ coaching approach, I was in control of the conversation while also making sure Sheila, not me, was responsible for the outcome. There was a moment, too, that I realized I was watching her suffer from trying to make a difference for me but I just kept doing it to her anyway. I was angry that I had to quit and, the longer I could keep the focus on her, the longer I could avoid being responsible for my actions. If I didn't quit, it was someone else's fault. After Sheila started coaching me, I was still in control but I quickly realized I was also responsible. That was the goal and why Sheila wanted to become more of a coach than an expert. Ironically, the more Sheila succinctly gave me information and then elicited my thinking about what she had just said, the more respect I gave her as an expert because I could feel something important happening to me.

Sheila Petty, MPH, Health Net, Inc., coordinates a tobacco control program for five community health centers in the greater Indianapolis area, providing both group and individual tobacco cessation services.

**Coaching point:** The intention of Intrinsic Coaching™ is to increase capacity to think better about choices. Even when it's necessary to provide a lot of information, the support methodology that will get you the best results is one that focuses on thinking better instead of focusing primarily on knowing more.

Want to have great conversations like the one you just read?  
*Become an Intrinsic Coach™ like Sheila.*

Call 480-515-5220 or email [totallycoached@totallycoached.com](mailto:totallycoached@totallycoached.com).

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