Clinical Nutrition Assessment Form

New client

*All information collected below will remain strictly confidential. Read full confidentiality disclosure at the end of this document.*

|  |  |
| --- | --- |
| Name | Today’s date |
| Click or tap here to enter text. | Click or tap to enter a date. |

# Contact information

|  |  |
| --- | --- |
| Email | Cell phone |
| Click or tap here to enter text. | Click or tap here to enter text. |

# Personal Data

|  |  |  |
| --- | --- | --- |
| Gender | Choose an item. | |
| Date of birth | Click or tap to enter a date. | |
| Age | Enter age | |
| Height | Enter feet | Enter Inches |
| Current weight | Enter lbs | |
| Weight 6 months ago (if known) | Enter lbs | |

# Goals

|  |  |
| --- | --- |
| What is your main health goal | Choose an item. |
| Other goals or concerns | Click or tap here to enter text. |

# Challenges

|  |  |
| --- | --- |
| Please check all that apply |  |
| Emotional/stress eating |  |
| Lack of planning |  |
| Cravings |  |
| Snacking when not hungry |  |
| Eating too quickly |  |
| Sweet tooth |  |
| Eating out frequently |  |
| Large portions |  |
| Time to prepare meals |  |
| Wine/alcohol |  |
| Don’t know what I should eat |  |
| Dislike cooking/don’t know how |  |
| Family/per pressure/unsupportive environment |  |

# Medical information

|  |  |
| --- | --- |
| Do you take any medications | Click or tap here to enter text. |
| Do you take any supplements | Click or tap here to enter text. |
| Did your doctor provide any guidance regarding foods to avoid or recommended? | Click or tap here to enter text. |
| Have you already met with a nutritionist? | Choose an item. |

# Health history

|  |  |
| --- | --- |
| Any serious illnesses/hospitalizations/injuries | Click or tap here to enter text. |
| How is/was the health of your mother | Click or tap here to enter text. |
| How is/was the health of your father | Click or tap here to enter text. |
| What is your ancestry | Click or tap here to enter text. |
| Any pain, stiffness, swelling | Click or tap here to enter text. |
| Constipation/Diarrhea/Gas | Click or tap here to enter text. |
| Any known allergies or sensitivities | Click or tap here to enter text. |
| Are your periods regular | Click or tap here to enter text. |
| Reached or approaching menopause | Click or tap here to enter text. |
| At what point in your life did you feel best | Click or tap here to enter text. |

# Food

|  |  |  |
| --- | --- | --- |
| Please describe your **current** eating habits | | |
| How many meals and snacks do you eat on a typical day? | Meals: Enter number | Snacks: Enter number |
| Describe your meals on a typical day in as much detail as possible: | | |
| Breakfast: Click or tap here to enter text. | | |
| Lunch: Click or tap here to enter text. | | |
| Dinner: Click or tap here to enter text. | | |
| Snacks: Click or tap here to enter text. | | |
| Liquid intake - What is your average daily consumption of: | | |
| Water Enter number of cups cups | | |
| Coffee/tea Enter number of cups cups | | |
| Wine Enter number of ounces oz | | |
| Hard liquor Enter number of ounces oz | | |
| Sugar-sweetened beverages Enter number of cups cups | | |
| Diet sodas Enter number of cups cups | | |
| Other Enter beverage type Enter number of cups cups | | |
| Eating patterns | | |
| Do you cook? Click or tap here to enter text. | | |
| What percentage of your food is home-cooked Click or tap here to enter text.% | | |
| How many times per week do you eat at a restaurant or get take-out food? Enter number | | |
| What style of restaurant do you like? Click or tap here to enter text. | | |
| Where in your home do you typically eat your meals and snacks? Click or tap here to enter text. | | |
| Are there any situations or times of day when you find it more difficult to make healthy food choices or when you consume more food than you had planned? Click or tap here to enter text. | | |
| Do you have any particular food dislikes/likes? Click or tap here to enter text. | | |
| How often do you go grocery shopping ? Click or tap here to enter text. | | |
| Do you crave sugar, coffee, cigarettes, alcohol or have any major addiction? Click or tap here to enter text. | | |
| How willing are you to make changes in what, how or how much you eat in order to eat healthier? (Choose the number that best describes how you feel) Very willing = 5 4 3 2 1 = Not at all willing Choose a value. | | |

# Physical exercise

|  |  |
| --- | --- |
| What type of exercise do you do | Click or tap here to enter text. |
| How often & how long | Click or tap here to enter text. |

# Sleep

|  |  |
| --- | --- |
| How many hours sleep do you get in average | Click or tap here to enter text. |
| Do you wake up at night | Click or tap here to enter text. |
| What makes you wake up at night | Click or tap here to enter text. |

# Social information

|  |  |
| --- | --- |
| Relationship status | Click or tap here to enter text. |
| What environment do you currently live in | Choose an item. |
| How many other people live in your household | Click or tap here to enter text. |
| Relationship + age of other household members | Click or tap here to enter text. |
| Pets | Click or tap here to enter text. |
| Occupation | Click or tap here to enter text. |
| Hours of work per week | Click or tap here to enter text. |
| Do you have an active social life | Click or tap here to enter text. |
| Will family and/or friends be supportive of your desire to make food and/or lifestyle changes | Click or tap here to enter text. |

# Anything else you’d like to share

|  |
| --- |
| Click or tap here to enter text. |

# Data sharing agreement

|  |
| --- |
| By signing your name below, you agree to share with us your Food diary on the app of your choice (MyNetDiary™ or MyFitnessPal™). The data will be shared via a closed private group composed of 2 members only: you as client and your coach. |

# Print your name

|  |
| --- |
| Click or tap here to enter text. |

# Health & wellness coach scope of practice

Health and wellness coaches work with individuals and groups in a client-centered process to facilitate and empower the client to develop and achieve self-determined goals related to health and wellness. Coaches support clients in mobilizing internal strengths and external resources, and in developing self-management strategies for making sustainable, healthy lifestyle, behavior changes. While health and wellness coaches per se do not diagnose conditions, prescribe treatments, or provide psychological therapeutic interventions, they may provide expert guidance in areas in which they hold active, nationally recognized credentials, and may offer resources from nationally recognized authorities such as those referenced in NBHWC’s Content Outline with Resources. As partners and facilitators, health and wellness coaches support their clients in achieving health goals and behavioral change based on their clients’ own goals and consistent with treatment plans as prescribed by individual clients’ professional health care providers. Coaches assist clients to use their insight, personal strengths and resources, goal setting, action steps and accountability toward healthy lifestyle change.

# National board of health and wellness coaching code of ethics

*(Updated February 1, 2017)* NBHWC is committed to maintaining and promoting excellence in coaching. Therefore, NBHWC expects all credentialed health and wellness coaches (coaches, coach faculty and mentors, and students) to adhere to the elements and principles of ethical conduct: to be competent and integrate NBHWC Health and Wellness Coach Competencies effectively in their work.

The NBHWC Code of Ethics is designed to provide appropriate guidelines, accountability and enforceable standards of conduct for all NBHWC Credential- holders. In line with the NBHWC definition of coaching, all NBHWC Credential-holders commit to abiding by the following Code of Ethics.

**Part One: Definitions**

* Health and Wellness Coaching: Health and Wellness Coaches partner with clients seeking self-directed, lasting changes, aligned with their values, which promote health and wellness and, thereby, enhance well- being. In the course of their work health and wellness coaches display unconditional positive regard for their clients and a belief in their capacity for change, and honoring that each client is an expert on his or her life, while ensuring that all interactions are respectful and non-judgmental.
* NBHWC Coach: A health and wellness coach certified by the NBHWC (after the National Certification Examination is available); and who thereby agrees to practice within the NBHWC Health and Wellness Coach Scope of Practice and Competencies and who pledges accountability to the NBHWC Code of Ethics.
* Professional Coaching Relationship: A professional coaching relationship exists when coaching includes an agreement (including contracts) that defines the rights, roles and responsibilities of each party.
* Roles within Coaching Relationships: In order to clarify roles in the coaching relationship it is often necessary to distinguish between the client and the sponsor. In most cases, the client and sponsor are the same person and are therefore jointly referred to as the client. For purposes of identification, however, the NBHWC defines these roles as follows:
  + Client: The “client” is the person(s) being coached. (May also be referred to as “coachee,” “patient,” or “member” in some settings.)
  + Sponsor: The “sponsor” is the entity (including its representatives) paying for and/or arranging for coaching services to be provided. In all cases, coaching agreements should clearly establish the rights, roles and responsibilities for both the client and sponsor if the client and sponsor are different people.
  + Student: The “student” is someone enrolled in an NBHWC-approved coach training program or working with an NBHWC-approved faculty member or coach mentor, in order to learn the coaching process or to develop and enhance his /her coaching skills.
  + Faculty: An individual who provides primary instruction/training to students enrolled in an NBHWC-approved coach training program.
  + Mentor: An individual who conducts coaching skills performance audits and provides feedback to coaching students/coaches for the purpose of developing and enhancing health and wellness coaching skills.
  + Conflict of Interest: A situation in which a coach has a private or personal interest sufficient to appear to influence the objective of his or her professional role or responsibilities as a coach, faculty, or mentor.

**Part Two: The NBHWC Standards of Ethical Conduct**

* + **Section 1: Professional Conduct at Large** – As a health and wellness coach, I:
    - Conduct myself in accordance with the NBHWC Code of Ethics in all health and wellness coaching interactions, including coach training and coach mentoring activities.
    - Commit to take the appropriate action with the coach, faculty member, or coach mentor and/or will contact NBHWC to address any ethics violation or possible breach as soon as I become aware of such situation, whether it involves me or others.
    - Communicate and create awareness in others, including organizations, employees, sponsors, coaches, clients, potential clients, and others who might need to be informed of the responsibilities established by this Code.
    - Refrain from unlawful discrimination in occupational activities, including age, race, gender orientation, ethnicity, sexual orientation, religion, national origin or disability; and consistently demonstrate dignity and respect in all professional relationships.
    - Make verbal and written statements that are true and accurate about what I offer as a health and wellness coach, the coaching profession, and the NBHWC.
    - Accurately identify my coaching qualifications, expertise, experience, training, certifications and NBHWC credentials.
    - Recognize and honor the efforts and contributions of others and only claim ownership of my own material. I understand that violating this standard may leave me subject to legal remedy by a third party.
    - Strive at all times to recognize any personal issues that may impair, conflict with or interfere with my coaching performance or my professional coaching relationships. I will promptly seek the relevant professional assistance and determine the action to be taken, including whether it is appropriate to suspend or terminate my coaching relationship(s) whenever the facts and circumstances necessitate.
    - Recognize that the Code of Ethics applies to my relationship with coaching clients, students, mentees, sponsors, and other coaches.
    - Conduct and report research with competence, honesty and within recognized scientific standards and applicable subject guidelines. Research I participate in will be carried out with the informed consent of those participating and the approval of all regulatory bodies as indicated. Such research efforts will be performed in a manner that complies with the applicable laws and regulations of the jurisdictions involved.
    - Maintain, store and dispose of any records, including electronic files and communications, created during my coaching engagements in a manner that promotes confidentiality, security and privacy and complies with any applicable laws, regulations and agreements.
    - Use NBHWC credentialed coach contact information, such as email addresses and telephone numbers, only in the manner and to the extent authorized by the NBHWC.
  + **Section 2: Conflicts of Interest** – As a coach, I:
    - Seek to be conscious of any conflict or potential conflict of interest, openly disclose any such conflict to all stakeholders involved, and offer to remove myself when a conflict arises.
    - Clarify roles for health and wellness coaches, set boundaries and review with sponsors and stakeholders conflicts of interest that may emerge between coaching and other role functions. Disclose to all clients the exact nature of the coach’s role within the company or organization, and the limitations and expectations thereof.
    - Disclose to my client and the sponsor(s) all anticipated compensation from third parties that I may receive for referrals of clients or pay to receive clients. Compensation from the sale of products or non-coaching services to clients must be disclosed fully before coaching begins. The quality of coaching services and the quantity of coaching sessions as defined in the coaching agreement must not be dependent in any way upon the purchase of any additional products or services by the client.
    - Honor an equitable coach/client relationship, regardless of the form of compensation.
  + **Section 3: Professional Conduct with Clients** – As a coach, I:
    - Ethically speak what I know to be true to clients, prospective clients or sponsors about the potential value of the coaching process or of me as a coach.
    - Make clear to any employer/sponsor and to the client what activities fall within the scope of practice within an NBHWC-certified health and wellness coach, as well as the outcomes that can be reasonably be expected.
    - Adhere to all ethical standards of practice for his/her respective health care licensures and credentials.
    - Carefully explain and strive to ensure that, prior to or at the initial meeting, my coaching client and sponsor(s) understand the nature of health and wellness coaching, the nature and limits of confidentiality, financial arrangements, and any other terms of the coaching agreement.
    - Have a clear coaching service agreement with my clients and sponsor(s) before beginning the coaching relationship and honor this agreement. The agreement shall include the roles, responsibilities and rights of all parties involved.
    - Hold responsibility for being aware of and setting clear, appropriate and culturally sensitive boundaries that govern interactions, physical or otherwise, I may have with my clients or sponsor(s).
    - Avoid any sexual or romantic relationship with current clients, sponsor(s), students, mentees or supervisees. Further, I will be alert to the possibility of any potential sexual intimacy among the parties including my support staff and/or assistants and will take the appropriate action to address the issue or cancel the engagement in order to provide a safe environment overall.
    - Respect the client’s right to terminate the coaching relationship at any point during the process, subject to the provisions of the agreement. I shall remain alert to indications that there is a shift in the value received from the coaching relationship.
    - Strive to protect the health, safety, and welfare of the client. I will encourage the client or sponsor to make a change if I believe the client or sponsor would be better served by another coach or by another resource, and I will support my client seeking the services of other professionals when deemed necessary or appropriate.
  + **Section 4: Confidentiality/Privacy** – As a coach, I:
    - Maintain the strictest levels of confidentiality with all client and sponsor information unless release is required by law, specifically adhering to all applicable state and federal regulations.
    - Have a clear agreement about how coaching information will be exchanged among coach, client and sponsor, including mobile health/electronic health data collected by the client.
    - Have a clear agreement when acting as a coach, coach mentor, coaching supervisor or trainer, with both client and sponsor, student, mentee, or supervisee about the conditions under which confidentiality may not be maintained (e.g., illegal activity, pursuant to valid court order or subpoena; imminent or likely risk of danger to self or to others; etc.) and make sure both client and sponsor, student, mentee, or supervisee voluntarily and knowingly agree in writing to that limit of confidentiality. Where I reasonably believe that because one of the above circumstances is applicable, I may need to inform appropriate authorities.
    - Require all those who work with me in support of my clients to adhere to the NBHWC Code of Ethics, Number 26, Section 4, Confidentiality and Privacy Standards, and any other sections of the Code of Ethics that might be applicable.
  + **Section 5: Continuing Development** – As a coach, I:
    - Commit to the need for continued and ongoing development of my professional skills.

**Part Three: The NBHWC Pledge of Ethics:**

* + - As a Health and Wellness coach, I acknowledge and agree to honor my ethical and legal obligations to my coaching clients and sponsors, colleagues, and to the public at large. I pledge to comply with the NBHWC Code of Ethics and to practice these standards with those whom I coach, teach, mentor or supervise.

Adapted with permission from the ICF Code of ethics. Available at www.coachfederation.org/about/ethics. Accessed July 26, 2016. Adopted by the NBHWC Board of Directors February 1, 2017.