Action Plan

Using your answers on the Ready for Change worksheet, pick a goal to work on. Take a few minutes to think of some of the things about your diabetes care you would like to change. Write down your goals.

1. ______________________________________
2. ______________________________________
3. ______________________________________
4. ______________________________________
   Put an * beside the one you would like to start on.

Write down some of the action steps to meet your goal

1. ______________________________________
2. ______________________________________
3. ______________________________________
   Put an * beside the one or two you would like to work on.

This week I will __________________________ (what)
______________________________ (how much)
______________________________ (when)
______________________________ (how often)

0 1 2 3 4 5 6 7 8 9 10
Not Confident  Confident

How confident are you that you can do your plan? Score: __

Signature ___________________________________ Date _____________