

## 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 \_\_\_\_\_