**Whole Health Training: Personal Health Behavior Change Activity**

**The personal health of a medical provider plays an important role in his/her patient encounters. During your training, we would like you to work on understanding and improving your own personal health habits. You can focus on any area of health you choose: physical activity, stress reduction, nutrition, sleep, etc.**

**You will have two personal sessions with a health coach who can help you choose an appropriate behavior to change based on your personal interests, needs, etc. Please outline your goal using the SMART rubric provided on the next page and complete a Step by Step Plan for reaching your long term goal.**

As a part of your behavior change project, we would like you to engage in at least one self-monitoring activity. Research has shown self-monitoring to be an effective method in changing personal health habits. Please use a tracking tool of your choice (pen & paper or online/electronic log) to monitor physical activity, nutrition, sleep, or another health behavior.

**Goal Setting Worksheet (SMART)**

Long Term Goal: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **Specific**  What exactly would you like to achieve? |  |
| **Measurable**  How will you know you achieved your goal? |  |
| **Action-Oriented**  What are you going to do to achieve it? (first step here) |  |
| **Realistic**  What could get in your way of achieving your goal? |  |
| **Timely**  When will you reach this goal? |  |
| **With Help from…** |  |
| **Celebrate!** |  |

How confident are you that you can attain this goal? 0=Not at all, 10=Extremely confident

0 1 2 3 4 5 6 7 8 9 10