

# Personalised Action Plan



Name _____	Programme _____	Date _____
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My reason for making changes

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## My priorities

Goal	Why it matters	First small step	When / where	Confidence /10										
1				<table border="1"> <tr><td>1</td><td>2</td><td>3</td><td>4</td><td>5</td></tr> <tr><td>6</td><td>7</td><td>8</td><td>9</td><td>10</td></tr> </table>	1	2	3	4	5	6	7	8	9	10
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1	2	3	4	5										
6	7	8	9	10										

People or tools that can support me

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

If-then plan

If \_\_\_\_\_ gets in the way,  
then I will \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Possible barriers and my solutions	
Possible barrier	My solution
_____	_____
_____	_____
_____	_____

## Weekly reflection

<p> What went well?</p> <p>_____</p> <p>_____</p> <p>_____</p>	<p> What got in the way?</p> <p>_____</p> <p>_____</p> <p>_____</p>	<p> What will I try next?</p> <p>_____</p> <p>_____</p> <p>_____</p>
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