



Healthy Habits

Name: _____

Date: _____

Part I: Review your progress

1. Think about the goals you have worked on during this program, and fill out the table below:

Some unhealthy habits I'm working to change are...	Some new healthy habits I have started are...	Things that have helped me make this change are...
<i>(Ex: Did not take my medication as prescribed)</i>	<i>(Ex: using a phone app to remind me to take my medications + discussing any changes to them with my MD)</i>	<i>(Ex: Asked my care coordinator with help getting access to a pill box)</i>

2. What are some health changes you are most proud of? List your top 3 below.

3. What are some good things that have come from adopting new, healthy habits?

Part II: Focus on the future!

4. What are some ways you can keep these healthy habits and avoid old unhealthy habits? How will you monitor your progress?

5. Who in your support circle can help you maintain these healthy habits? List 2 people and specific ways that each can help you.

6. It's great to celebrate especially when you have been working so hard! What are some HEALTHY ways you can reward yourself for maintaining healthy habits?

7. What are some new health goals you want to reach in 2020, or some goals you weren't able to reach but would like to continue working on?

8. Are there any resources you need to accomplish these goals? List things you would like to ask your care team to help you get access to. (ex. nutritionist referral)
