

**Personal Health Plan****You: Discovering Your Health Goals**

You are the ultimate owner of your life and your health. Being in the driver's seat requires a good map. It is important to know your starting point and your destination. This means knowing what your health is like now and what you would like your health to be going forward. This may be a new way to think about your health. Many of us are used to thinking about our health only when we are sick. Whole person health and well-being means understanding what your life goals are and what contributes to your sense of wellness over time.

A personal health inventory will follow this introduction. Please take time to think about where you are now and where you want to be. Your health coach will review this personal health inventory with you and use it as a tool to help you plan for your health in a way that fits your unique life and goals.

# WHEEL OF HEALTH



-  You
-  Mindful Awareness
-  Self-Care
-  Professional Care



## Personal Health Plan

### Personal Health Inventory

For: \_\_\_\_\_

Date: \_\_\_\_\_

The first step in creating your plan is to complete a personal health inventory to assess where you are now and where you want to be.

#### **1. How do I picture my best health?**

*How would I like to feel and look? What activities would I like to be able to do?*

#### **2. What is most important as I think about the picture of my best health?**



## Personal Health Plan

3. For each area, please take a moment to think about where you are now and where you would like to be. Please complete as many of the boxes as you can. You may want to start with the areas that are most interesting to you at this time. It is okay to just circle a number for each box, if you prefer.

<p><b>Mindful Awareness</b>          Awareness of the present moment; paying attention to what you are doing while you are doing it.</p>	
<p>Where are you now?  <i>On a scale of 1 (low) to 10 (high), how would you rate this area of your life?</i></p> <p>1 2 3 4 5 6 7 8 9 10</p> <p>Why did you choose this number?</p>	<p>Where would you like to be?</p> <p>1 2 3 4 5 6 7 8 9 10</p> <p>What changes could you make to help you get there?</p>
<p><b>Movement, Exercise and Rest</b>          Activities of daily living such as cleaning and gardening; exercise activities such as dancing, yoga, walking, running, and cycling; adequate rest and relaxation.</p>	
<p>Where are you now?  <i>On a scale of 1 (low) to 10 (high), how would you rate this area of your life?</i></p> <p>1 2 3 4 5 6 7 8 9 10</p> <p>Why did you choose this number?</p>	<p>Where would you like to be?</p> <p>1 2 3 4 5 6 7 8 9 10</p> <p>What changes could you make to help you get there?</p>



## Personal Health Plan

<p><b>Nutrition</b> Eating a balanced, healthy diet.</p>	
<p>Where are you now? <i>On a scale of 1 (low) to 10 (high), how would you rate this area of your life?</i></p> <p>1   2   3   4   5   6   7   8   9   10</p> <p>Why did you choose this number?</p>	<p>Where would you like to be?</p> <p>1   2   3   4   5   6   7   8   9   10</p> <p>What changes could you make to help you get there?</p>
<p><b>Personal and Professional Development</b> Growing and developing your abilities, talents, and interests, both in your personal life and at work; living with both in balance.</p>	
<p>Where are you now? <i>On a scale of 1 (low) to 10 (high), how would you rate this area of your life?</i></p> <p>1   2   3   4   5   6   7   8   9   10</p> <p>Why did you choose this number?</p>	<p>Where would you like to be?</p> <p>1   2   3   4   5   6   7   8   9   10</p> <p>What changes could you make to help you get there?</p>



## Personal Health Plan

<p><b>Physical Environment</b>          Spaces where you live and work (including safety, light, noise, toxins, and color), as well as landscapes surrounding those spaces.</p>	
<p>Where are you now?  <i>On a scale of 1 (low) to 10 (high), how would you rate this area of your life?</i></p> <p>1   2   3   4   5   6   7   8   9   10</p> <p>Why did you choose this number?</p>	<p>Where would you like to be?</p> <p>1   2   3   4   5   6   7   8   9   10</p> <p>What changes could you make to help you get there?</p>
<p><b>Relationships and Communication</b>          Spending time with family, friends, and/or co-workers who are supportive and with whom you communicate effectively.</p>	
<p>Where are you now?  <i>On a scale of 1 (low) to 10 (high), how would you rate this area of your life?</i></p> <p>1   2   3   4   5   6   7   8   9   10</p> <p>Why did you choose this number?</p>	<p>Where would you like to be?</p> <p>1   2   3   4   5   6   7   8   9   10</p> <p>What changes could you make to help you get there?</p>



## Personal Health Plan

<p><b>Spirituality</b> Seeing purpose and meaning in something larger than yourself. This might include religious affiliation or other areas such as nature or the arts.</p>	
<p>Where are you now? <i>On a scale of 1 (low) to 10 (high), how would you rate this area of your life?</i></p> <p>1 2 3 4 5 6 7 8 9 10</p> <p>Why did you choose this number?</p>	<p>Where would you like to be?</p> <p>1 2 3 4 5 6 7 8 9 10</p> <p>What changes could you make to help you get there?</p>
<p><b>Mind–Body Connection</b> Paying attention to the connection between the mind and body and the effects they have on each other. Using techniques such as breathing and stress reduction practices to help the body relax and heal.</p>	
<p>Where are you now? <i>On a scale of 1 (low) to 10 (high), how would you rate this area of your life?</i></p> <p>1 2 3 4 5 6 7 8 9 10</p> <p>Why did you choose this number?</p>	<p>Where would you like to be?</p> <p>1 2 3 4 5 6 7 8 9 10</p> <p>What changes could you make to help you get there?</p>



## Personal Health Plan

<p><b>Professional Care: Prevention and Intervention; Conventional and Complementary Approaches</b></p> <p>Routine screenings such as mammograms, prostate screenings, colonoscopies, pap tests and dental exams, along with prescribed use of vitamins and supplements. Following treatments recommended by your conventional medical care providers as well as recommended complementary approaches such as acupuncture, massage, hypnosis, and osteopathy.</p>	
<p>Where are you now? <i>On a scale of 1 (low) to 10 (high), how would you rate this area of your life?</i></p> <p>1   2   3   4   5   6   7   8   9   10</p> <p>Why did you choose this number?</p>	<p>Where would you like to be?</p> <p>1   2   3   4   5   6   7   8   9   10</p> <p>What changes could you make to help you get there?</p>

**4. What stands out for you as significant about where you currently are in any given area of the Wheel of Health?**



## Personal Health Plan

**5. If nothing changes in your health and well-being choices, what do you think your health will be like three years or ten years from now? What would be the worst-case scenario?**

**6. If you make significant health behavior changes, what do you think your health will be like three years or ten years from now? What would be the best-case scenario?**

**Personal Health Plan**

7. Place an X in the column that indicates when you would like to begin working on that area. If you do not anticipate a change in any given area, place an X in the last column.

Area of Wheel of Health	Within the next three months	Within the next year	Next one to three years	No changes desired
Mindful Awareness				
Movement, Exercise, and Rest				
Nutrition				
Personal and Professional Development				
Physical Environment				
Relationships and Communication				
Spirituality				
Mind–Body Connection				
Professional Care: Prevention and Intervention				