

LOW BACK PAIN STRATEGY

Personal Action Planning for Patient Self Management

This tool provides 3 key questions for effective goal setting with your patient.

Patient Name: _____ Age: _____

Provider Name: _____

Provider: FP NP Date: _____

The 3 questions:

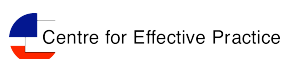
1. What is it about your current health that bothers or worries you?

2. How do you feel about this?

3. What is it that you can personally do about this issue?

This tool is a supporting tool in the Low Back Pain Toolkit for Primary Care Providers (January 2013). The toolkit has been developed as part of the Government of Ontario's Provincial Low Back Pain Strategy, by Centre for Effective Practice, with the review and advice of the Education Planning Committee and primary care focus groups. This tool and further information on the toolkit are available at www.effectivepractice.org/lowbackpain and ontario.ca/lowbackpain.

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Personal Action Planning for Patient Self Management

This tool provides a quick guide to engage your patient in defining a self-management action plan.

1. Something you want to change: ("what is your biggest concern")

2. Describe:

How:

What:

When:

Where:

How Often:

3. Barriers:

4. Plans to overcome barriers:

5. My confidence level rating should be 7 or higher to be successful:

I know I won't do it 0 1 2 3 4 5 6 7 8 9 10 I know I will do it

6. Follow-up plan I will review this plan of action on :

Date: _____

Via:

- Follow up call from clinic
- Follow up with appointment
- Follow up with group sessions
- other

