Make Action Plans Tool 15

Overview

An action plan, created together by the patient and clinician, outlines one or more easy steps a patient can take to attain a health goal such as losing weight or improving self-management of a chronic condition. This tool will guide clinicians through the process of creating and using action plans in collaboration with their patients.

TIPS

Use action plans to help patients:
- Implement dietary changes
- Stop smoking
- Increase physical activity
- Reduce stress
- Improve sleep habits
- Take medicines correctly

Actions

Watch an action plan video.

- This 6-minute American College of Physicians Foundation Video shows three examples of patients and clinicians creating action plans for management of diabetes.

Create action plans with patients.

- Ask permission to talk about health behaviors. For example,
  - “Would it be OK if we talked about improving your blood sugar level?”
  - “Would it be OK to talk a bit about your weight?”
- Determine motivation. Does the patient express the motivation to change? If patients do not show interest in making changes (i.e., a score of 5 or less), explore what barriers might stand in their way and what they see as possible benefits of changing their lifestyle.
- Have patients choose the goals. In order for the plan to be successful, the goal must be important to the patient, and he or she must be motivated to change. Ask patients, “What matters to you?” Have a list of goals to give patients ideas on what they could work on and help them decide on changes they are motivated to make.
- **Help patients break down goals into manageable steps.** Have patients pick one specific step they are likely to do. Steps should be small and realistic to do over a short time (e.g., 1 week).

- **Fill out an action plan form.** Use a form to outline exactly what the patient will do. The simple Action Plan Form in the Appendix can be modified to fit your needs. This visually appealing Action Plan Form from the University of California at San Francisco Center for Excellence in Primary Care is available in English and Spanish.

![MY ACTION PLAN](image)

- **Assess confidence.** Assess the patient’s confidence by asking, “On a scale of 1 to 10, how sure are you that you can follow this action plan?” Research shows that a confidence level of 7 or above increases the likelihood that the patient will carry out the plan. If they are not, the clinician and patient should explore ways to revise the plan so the patient feels more confident.

- **Identify barriers.** Ask the patient “What might stop you from following this action plan?” Problem solve about how to overcome barriers.

- **Make a copy of the action plan.** Give a copy to the patient and place a copy in the patient’s medical record. If your practice has an EHR, determine how to standardize documentation, since there may be more than one place to capture action planning.
Follow up after the visit. Follow up lets patients know that you are interested in helping them achieve behavior change. Ideally, set up a time to follow up a week or two after the patient’s visit. See Tool 6: Follow Up with Patients for more guidance.

- If the goal wasn’t met, help patients develop a plan that can be achieved.
- If the goal was achieved, celebration and praise are in order. Work with patients to plan the next step. Each small step gets patients closer to the ultimate goal of improving their health-related behaviors.
- Update the medical record to reflect the current plan the patient is following.

Track Your Progress

Have clinicians record in the medical record whether an action plan was created. After 1 or 2 weeks, identify the percentage of patients for whom an action plan was created. You may be able to look at all patients if you have EHRs. Otherwise, choose a sample of 20 patients seen in the last week. Check again in 2 months, 6 months, and 12 months to see if there has been an increase in that percentage.

Look at the records of 20 patients with action plans. See how many have notes on whether initial steps have been completed, additional steps have been added, and goals have been achieved. Repeat in 2 months, 6 months, and 12 months to see if there has been an increase in the percentage of patients with updated action plans.

Resources

Find more details about how to conduct action planning during a primary care visit in the following document: “Brief Action Planning to Facilitate Behavior Change and Support Patient Self-Management.”

TIPS

- It can be tempting to make suggestions, but action plans need to come from the patients. Try having a menu of options (e.g., lists of exercises, foods to cut down on) that can give patients ideas for specific steps they can take. Healthfinder.gov has lots of suggestions for making healthy changes.
- Ask patients when they want to start. Having a concrete date sets patients in motion.
- Ask patients whose help they can enlist in completing their action plan. Support at home is an important determinant of success.