

### Problem / Issue

#### Level of support

Self-manage without support

Self-manage with support from your GP or other healthcare professional

Manage with specialist support

Goals

My Progress: Rating

My Progress: Date

### Actions/strategies to achieve your goals

**Education** What I will do to self-manage

Shared care plan with support

## Problem / Issue

Medications What I will do to self-manage

Shared care plan with support

**Lifestyle and nutrition** What I will do to self-manage

Shared care plan with support

# Problem / Issue

**Referrals** What I will do to self-manage

Shared care plan with support