

# SMART Goals for Diabetes Worksheet

## Introduction

This worksheet is designed to help individuals with diabetes set and achieve specific, measurable, achievable, relevant, and time-bound (SMART) goals. It aims to provide a structured approach to diabetes management, ensuring progress and accountability.

## Personal Information

Name: \_\_\_\_\_

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

Healthcare Provider's Name: \_\_\_\_\_

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## S: Specific Goals

Define a clear, specific goal related to your diabetes management, such as achieving a particular blood sugar level or following a specific diet plan.

### Goal 1:

Description:

Reason for choosing this goal:

### Goal 2:

Description:

Reason for choosing this goal:

## M: Measurable Outcomes

Identify how you will measure your progress. What metrics will you use? This could include daily blood glucose readings, HbA1c levels, or tracking your physical activity.

**Goal 1:**

Key Metrics (e.g., blood glucose levels, HbA1c):

Desired Outcome (quantitative target):

**Goal 2:**

Key Metrics:

Desired Outcome:

## **A: Achievable Steps**

Consider what resources or support you need to achieve your goal. Is your goal realistic considering your current lifestyle, commitments, and health condition.

**Resources Needed for Goal 1:**

Tools (e.g., glucose meter, fitness tracker):

Support Systems (e.g., dietician, support groups):

**Action Plan for Goal 1:**

**Resources Needed for Goal 2:**

## Action Plan for Goal 2:

### **R: Relevance to Overall Health**

Explain why this goal is important for your overall health and diabetes management. How does achieving this goal help you in the broader context of your health and life

**Connection of Goal 1 to Overall Health:**

**Connection of Goal 2 to Overall Health:**

### **T: Time-bound Targets**

Set a realistic deadline for your goal. Break down the goal into smaller milestones with their own time frames to make it more manageable

**Deadline for Goal 1:**

Milestones (with dates): \_\_\_\_\_

**Deadline for Goal 2:**

Milestones (with dates): \_\_\_\_\_

### **Monitoring and Tracking**

**Tracking Tools (Apps, Logs, Charts):**

**Frequency of Monitoring (daily, weekly, monthly):**

### **Additional Support and Resources**

**Educational Materials:**

**Support Groups or Forums:**

**Healthcare Provider Consultation Schedule:**


## **Personal Notes and Reflections**

**Challenges Anticipated:**

**Motivational Strategies:**

### **Signature**

**Participant's Signature:** \_\_\_\_\_

A handwritten signature in black ink, consisting of several loops and a long horizontal stroke, positioned above a horizontal line.

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

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*This worksheet is a personalized guide and should be adjusted as per individual health needs and in consultation with healthcare providers.*