CREATING MY CARE PLAN

Directions

1. Complete the sentences
2. When you discover something you would like to do, write your action step in the action plan at the end of this Care Plan.

My Spiritual Health Plan

1. Because I know spiritual health is essential to my ministry, I currently…
2. If I needed Pastoral Care, I would contact:
3. When sin overtakes some area of my life, the person I trust the most to share my struggles with is …
4. I am most able to hear God’s voice when I….
5. My plan for reading scripture is….
6. My plan for praying is…
7. When I experience spiritual attack, I ….
8. To strengthen my spiritual health, I need to…

My Emotional Health Plan

1. My vacation plan for this year is…
2. For fun, I currently….
3. When I am totally stressed out, I usually…
4. If I were to need a psychologist, I would contact…
5. If I were to need a psychiatrist, I would contact…
6. To strengthen my mental health, I need to…

My Community Health Plan

1. My friends are…
2. The groups I enjoy are
3. My church family is
4. When I feel threatened or scared in my community, I contact….
5. To strengthen my community, I need to…

My Physical Health Care Plan

1. My primary doctor is
2. I know I need specialists in some fields. They are…
3. My medical insurance is with \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. My ID is \_\_\_\_\_\_\_\_\_\_\_\_\_. I know my family is covered by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. I have access to the medications I need because…
5. My exercise plan is….
6. To strengthen my physical health, I need to…

My Ministry Plan

1. My coach is \_\_\_\_\_\_\_\_\_\_\_ and we talk every week/two weeks/monthly/less
2. My Support Group Leader is….
3. My vision is
4. My mission is
5. My values are
6. I know when I am making progress by….
7. To help me better manage my ministry, I ….
8. To help me be a better team member, I …..
9. To help myself get along better with other people, I ….
10. My next steps in ministry are to…
11. I have filled out the on-line assessments provided by Bridges Y/N
    1. Missionary skills Y/N
    2. Discipleship Activity Y/N
    3. Discipleship Qualities Y/N
    4. Characteristics of Christ-following Communities Y/N
    5. Participation in ACTS Services Y/N

My Continuing Education Plan

1. My study leave plan for this year is….
2. The last seminar or conference I went to was…
3. The next seminar or conference I am attending is…
4. I am working towards a degree or certificate in….
5. I am currently reading….
6. In the last year, I have learned…
7. This next year, I plan to learn…

My Family Health Plan

1. To create safe and holy space for my spouse and/or children, I …..
2. Our family vacation is ….
3. For fun, we …..
4. To make family decisions, we usually….
5. I think my spouse needs…
6. I think my child/children need….
7. My marriage needs…

My Housing and Transport Plan

1. If I stopped feeling safe in my home, I would….
2. If my home got too small for my family, I would…
3. If my car stopped running, I would…
4. Because I know my car will need to be replaced, I am…

My Financial Plan

1. Because I know I will one day retire, I am currently or plan to….
2. Because I know I may suddenly not be able to pay my monthly bills for three months, I am currently or plan to…
3. Because I know I could become temporarily too sick to work or serve, I am currently or am planning to…
4. If my current financial support level is not at 100% of my needs including saving for retirement and covering insurance, I know that I can…
5. If I were to suddenly need $5,000 to $10,000, I would….
6. I have an account with Bridges Y/N
7. If I needed help learning how to develop more financial partners for my ministry, I would contact…
8. If I needed help learning more about personal finances, budget keeping, and investing, I would contact…
9. If I needed help with making investments, I would contact….
10. To strengthen my financial health, I need to…

MY ACTION PLAN

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| My Next Steps | By Whom? | Date to Start? | Date to Follow Up? | Date Actually Finished? | Notes:  Obstacles? How I felt? What happened? |
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