Stress Less!
Personal Essentials

Best Care EAP Can Help!
For free, confidential support for you and your dependent family members, contact us today.
402-354-8000 | 800-801-4182
www.BestCareEAP.org

Username: bcCODEe – Password: CODE

“It’s astounding how much one’s stress level goes down with the simple act of switching from skinny jeans to yoga pants.” – Source: someecards

My Stress Signs

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

My Stress Solutions

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
**Stress Less!**

**My Job Stresses**

______________________________________________________________

______________________________________________________________

**The Three C’s**

1. Control - People who believe they are in control of their lives

2. Challenge - People who feel challenged by their work and see it as an opportunity to learn and grow

3. Commitment - People who feel a sense of commitment to their work feel good about what they do and feel they are making a difference in the lives of the people around them

**Reframe**

1. Take Control – What can I do to take control?

2. Seek Out the Challenge – What about my situation can be seen as a worthy challenge for me to overcome?

3. Renew My Commitment – What or who am I committed to?

**Tips to Stress Less!**

<table>
<thead>
<tr>
<th>Take action</th>
<th>Meditate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Get organized</td>
<td>Yoga (or other exercise)</td>
</tr>
<tr>
<td>Get a Head Start</td>
<td>Get social</td>
</tr>
<tr>
<td>Breathe</td>
<td>Call Best Care EAP!</td>
</tr>
</tbody>
</table>

**My Action Plan to Stress Less!**

Stop:

Start:

Continue:
Stress Less!

Best Care Webinar Evaluation

Program Title: ___________________________ Date: ___________________________
Your Employer: ___________________________ Facilitator: ___________________________

Thank you for participating in today’s webinar. Please share your impressions below and then fax to Best Care EAP at (402) 354-8046 or scan and email to EAP@BestCareEAP.org.

<table>
<thead>
<tr>
<th>Question</th>
<th>Strongly Disagree</th>
<th>Somewhat Disagree</th>
<th>Neutral</th>
<th>Somewhat Agree</th>
<th>Strongly Agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. The material covered in this program will benefit me personally and/or professionally.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>2. The facilitator was knowledgeable and effective and used clear examples.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>3. I plan to apply what I learned.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>4. Best Care EAP’s services and benefits were reviewed.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>5. I would recommend this training to coworkers/colleagues.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>6. What was particularly helpful about the training?</td>
<td></td>
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<tr>
<td>7. What would you recommend changing about the training?</td>
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<td>8. If you would like to receive email updates about ongoing Best Care training opportunities, please give us your work email address:</td>
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BEST CARE EAP