



SAFE PLAN

Name _____

Address _____

Date of Birth _____



safe plan 1

Use this plan in advance for possible events/situations that may cause you distress and identify steps you and others can take to help you stay safe and well.

Safe places for me are...

Things that make me feel safe are...

People I trust to help keep me safe are...

What soothes and relaxes me is...



penumbra

Name _____ Date _____



safe plan 2

TRIGGERS

Describe the possible triggers/crisis/event that might occur that cause you to hurt yourself

WHAT I CAN DO

Describe what you can do to help yourself avoid or minimise the crisis before and after

WHAT OTHERS CAN DO

Describe that others can do to help avoid or minimise the crisis before and after. If you include anyone in your SOS plan you should let them know.

SOS!

In an emergency to keep myself safe I will:



penumbra

Name _____ Date _____