ATTACHMENT 18: SAMPLE SAFETY PLAN

Student Name: _____ **Date:** _____

SAFETY PLAN

Start at the beginning of this plan. Go through each step until you are safe. Remember: Suicidal thoughts can be very strong. It may seem like they will last forever, but they come and go. You can get through this difficult time, and know that you are not alone. It is important to reach out for help and support as you need it. Since it can be hard to focus and think clearly when you feel suicidal, please copy this and put in places where you can easily access it.

Personal Stressors/Warning Signs

1. _____
2. _____
3. _____

Do the following activities to calm/comfort myself: (this is primarily for distraction; ensure these locations and strategies are accessible and safe)

What can I do for myself?	Where can I go?
1. _____	1. _____
2. _____	2. _____
3. _____	3. _____

Remind myself of my reasons for living:

Call/text/contact a friend or family member: (this is primarily for distraction, not to ask for help)

1. Name/Contact Info: _____
2. Name/Contact Info: _____
3. Name/Contact Info: _____

Call/text/contact a trusted adult: (these individuals should be made aware of what to do if the student shares that he/she is feeling unsafe)

1. Name/Contact Info: _____

2. Name/Contact Info: _____
3. Name/Contact Info: _____

Call/contact a care provider (e.g., therapist, school mental health professional): (goal is to have mental health supports inside and outside of school)

1. Name/Contact Info: _____
2. Name/Contact Info: _____
3. Name/Contact Info: _____

Call, text, or visit my local or national crisis resources: (make sure these numbers are also in the student's phone)

1. Local County Crisis Name/Contact Info: _____
2. National Suicide Prevention Lifeline: 988/988lifeline.org
3. Crisis Text Line: Text PA to 741-741
4. TrevorLifeline (for LGBTQ youth): 1-866-488-7386
5. Local emergency room at nearest hospital: _____
   *Call 911 if transportation to the hospital is needed.

Safety Plan Template adapted from Samra & Bilsker (2007)
Retrieved from http://www.comh.ca/publications/resources/pub_cwst/cwst.pdf

Student has copy of safety plan: yes/no

_____ hard copy _____ photo/in phone _____ in app on mobile device

Safety plan was shared with parent(s): yes/no Date: _____

Discussed with parents keeping the environment safe (e.g., removing or monitoring firearms and medication): yes/no

Notes: _____

Key Considerations for the Development and Implementation of the Safety Plan:

- The safety plan should be developed collaboratively with the student and shared with the parents/guardians to support the student's use of the plan when needed. The family also has an important role in helping to keep the student safe by making sure the environment is safe when the student is in crisis (e.g., removing firearms/ammunition from the home, locking up medications, etc.). Be sure to note any concerns.

- The mental health professional that develops the safety plan with the student should have training and background on how to do so.
- Key contacts included in the student's safety plan should be made aware that they may be contacted by the student when in crisis, and they should be informed of local and national crisis resources.
- It is important to identify any barriers to the steps outlined in the safety plan, revising the plan as needed. Role play may be utilized to support student's use of the safety plan, particularly with regard to the internal/external strategies that they identified, as well as in later steps of the plan, such as how they will get to an emergency room if needed.