**This sample was provided by the Dakota Children’s Advocacy Center: Modify to fit your community and policies and procedures.**

**INSERT LOGO FOR CAC or AGENCY**

**SAFETY PLAN**

**Name Date**

**WARNING SIGNS:** What are the warning signs that you are beginning to struggle? These can be suicidal thoughts, feelings, or behaviors

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**THINGS I CAN DO TO FEEL BETTER:** What coping skills can you use to feel better.

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**GET SUPPORT:** If you are unable to deal with your distressed mood alone, contact trusted family members or friends.

|  |  |
| --- | --- |
| **NAME** | **CONTACT INFORMATION** |
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|  |  |

**GET HELP:**

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| --- | --- | --- |
| **AGENCY** | **NUMBER** | **HOURS OF OPERATION** |
| Customize to fit your CAC/Community |   |  |
| Crisis Text Line | Text HOME to 741741 |  24 hours/7 days per week |
| National Suicide Prevention Lifeline | 1-800-273-TALK(1-800-273-8255) |  24 hours/7 days per week |
| National Hopeline Network | 1-800-SUICIDE(1-800-784-2433) | 24 hours/7 days per week |
|  |  |  |

\* Y*ou can always call 911* **to** *ask for help. Tell the operator you are in suicidal danger.*

**ONLINE RESOURCES:**

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| --- | --- |
| **AGENCY** | **WEBSITE** |
| Customize to fit your CAC/Community |  |
| National Suicide Hotlines | <http://suicidehotlines.com/>  |
| National Suicide PreventionResource Center  | <http://www.sprc.org/>  |
| Yellow Ribbon | <http://www.yellowribbon.org/>  |

**NOTES:**

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Name Date

Clinician Date