MY SAFETY PLAN

Adapted from Stanley-Brown Safety Plan (2021)	
tep 1: Warning Signs (things you think, feel, or do as harmful thoughts develop - e.g., irritable, heart racing, not sleeping well, etc.)	
Ask Yourself: How will you know when to use your safety plan?	
What is happening when you start to experience harmful thoughts or feel overwhelmed? How do you feel physically before you begin feeling suicidal or like harming yourself? (e.g., heart racing, not sleeping or eating well)	
now do you real physically before you begin realing suicidal of like harming yourself: (e.g., heart racing, not sleeping of eating well)	
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2	
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tep 2: Internal Coping Strategies (things to do on your own to help feel better in the moment - e.g., relaxation techniques, etc.)	
Ask Yourself: What can you do, on your own to help yourself stay safe?	
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tep 3: People/Settings That Distract Me (people and places that help m	as take my mind off my problems - a g toyt (talk to a friend etc.)
Ask Yourself: Which people or places help take your mind off your problems	
Who helps you feel better when you socialize with them?	at least for a fittle wrife:
,	
1. Name:	Contact:
2. Name:	Contact:
3. Place:	
4. Place:	
tep 4: People I Can Ask for Help (who I can talk to about what I'm goin	g through when in a crisis - e.g., caregiver, sibling, friend, etc.)
Ask Yourself: Who do you feel is supportive that you can talk to about what	you're experiencing?
Who would you talk to first? Second? Third?	
1. Name:	Phone:
2. Name:	Phone:
	Phone:
5. Name.	Phone:
tep 5: Professionals I Can Call (professionals and organizations I can c	
Ask Yourself: Who dare the mental health professionals you feel belong on y Which agencies and organizations, such as a mobile crisis tear	/our safety plan?
1. Clinician/Agency Name:	Phone:
Emergency Contact :	
2. Clinician/Agangy Names	Dhana
2. Clinician/Agency Name:	Priorie:
Emergency Contact :	
3. Local Emergency Department:	Phone:
Address:	
4. Suicide Crisis Helpline: 9-8-8	
tep 6: Making the Environment Safer (changes to delay or lower the ris	sk of harming or killing myself - e.g., dangerous items, etc.)
Ask Yourself: Do you have access to things, such as firearms or sharps, that	
What would make it harder for you to access and use firearms	, sharps, etc.?
1	
2.	
2.	
ne Thing That is Most Important to Me and Worth Living For: (e.g., family	y, friends, pets, etc.)
1,	
eople I Can Share My Safety Plan With (e.g., family, friends, therapist, counsellor, educator, etc.)	
Ask Yourself: Who can I trust to help keep me safe and accountable?	
1. Name:	Phone:
z. Name:	Phone:
3. Name:	Phone:

Resources

- 1. 988 Suicide Crisis Helpline
- 2. 24/7 Crisis Intervention (NBRHC): 1-800-352-1141
- 3. 24/7 CMHA Crisis Line: 1-888-893-8333
- 4. 24/7 Kids' Help Phone: 1-800-668-6868 (or text TALK to 686868)
- 5. 24/7 Amelia Rising Crisis Line: 705-476-3355
- 6. North Bay Police Service Dispatch/Mobile Crisis: 705-472-1234
- 7. Ontario Provincial Police Mobile Crisis Response Team: 1-888-310-1122
- 8. Hands Crisis Line: 1-844 287-9072
- 9. Hope for Wellness Helpline (Indigenous): 1-855-242-3310
- 10. Trans Lifeline: 1-877-330-6366 (Monday to Friday 1PM-9PM)
- 11. LGBT Youthline: 647-696-4275 (Text Sunday to Friday 4PM-9:30PM)
- 12. Black Youth Helpline: 1-833-294-8650 (9AM-10PM)
- 13. West Nipissing Alliance Centre: 705-753-3110 x288 (4PM-11PM)
- 14. One Stop Talk: 1-855-416-8255 (12PM-8PM Monday to Friday, 12PM-4PM Saturday)