

PROVIDER & CAREGIVER ONLY SECTION

A safety plan for:	
Date created (or updated):	
Created by:	
Follow-up (who and when):	

REMEMBER: Page 1 is ONLY reviewed with the caregiver.

- Provider and caregivers from all homes collaborate to address the top 3 means (firearms, medications, and suffocation/hanging) in addition to any other means identified by the youth.
- Removal or safe storage of medications should include prescriptions and ALL over-the-counter medications, including vitamins, especially Ibuprofen and Tylenol.
- Provide educational resources for caregivers about where to locate tools to reduce access to means (firearm locks, lock boxes for firearm components or medications).
 - Suggested resources: [AACAP Suicide Safety: Precautions at Home](#) and [Project Child Safe Safety Kit](#)

Reducing Access to Lethal Means
<input type="checkbox"/> Firearms are taken out of the house or locked and secured. Who will do this and when?
<input type="checkbox"/> All over-the-counter & prescription medication is secured and monitored. Who will do this and when?
<input type="checkbox"/> Items used for hanging or suffocation are removed and secured. Who will do this and when?
<input type="checkbox"/> Sharp objects like knives and scissors are locked and secured. Who will do this and when?
<input type="checkbox"/> Poisons and chemicals are locked and monitored. Who will do this and when?

Supervision & Support Considerations

Supervision Plan:

Who will supervise the youth and when? Who will be with them during nighttime hours (if needed)?

Who are the family and friends who can provide breaks and respite? Include contact information.

Who will provide supervision in other settings? (School, travel to/from school, etc)

Resource & Referral Information

Follow-up plan with the provider and/or mental health services:

Other community resources:

YOUTH SAFETY PLAN

A safety plan for:	
Date created (or updated):	
Created by:	
Follow-up (who and when):	

REMEMBER: If I start to have the thoughts or feelings I listed in Section 5, it might be time to call or text 988.

Section 1: When I'm feeling down, ways I can feel better (more examples here):		
People in my life	Activities with others	Things I can do by myself
<i>Examples: Be with positive friends, family, or trusted adults</i>	<i>Examples: sports, board games, pets, exercise, playing music together</i>	<i>Examples: relaxation exercises, list things I'm thankful for, journal, art/crafts</i>

Section 2--When I start to have thoughts of suicide, ways to distract myself:		
People in my life	Activities with others	Things I can do by myself
<i>Examples: Be with people who help me laugh, friends who are easy to hang out with, family</i>	<i>Examples: walk my dog, video games with friends, be in the same room with others</i>	<i>Examples: mindfulness activity, writing, read a book, exercise, cleaning, coloring</i>

Section 3--When my thoughts of suicide feel overwhelming, ways to interrupt, relax or regulate:		
People in my life	Activities with others	Things I can do by myself
<i>Examples: Talk to a trusted adult, mentor/coach, close friends, or family</i>	<i>Examples: Text a friend, cook a meal with or someone, watch movies together</i>	<i>Examples: take a shower, pray, yoga, stretching, listening to music, crying</i>

Section 4--Who to reach out to when I need more support:

Trusted adults who will help me find more support (teacher, counselor, social worker, medical provider, family member or caregiver who knows what's happening):

Name/Email/Phone	
Name/Email/Phone	
Name/Email/Phone	

Caregiver(s) and the youth should add all contacts on this page to their phones or write them down in a place that is accessible.



These thoughts feelings, or actions are warning signs that tell me I need more support:

Other crisis numbers:

- Which caregiver would you prefer your provider talk to about your safety?
- What needs to happen to make your school and home environments safer?
- What type of supervision plan is needed to increase your safety?
- Follow-up plan (who, what, where, and when):