

Patient Name:

DOB:

MR #:

UW Health
(University of Wisconsin Hospitals and Clinics Authority)
PEDIATRIC SAFETY PLAN

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Date: _____

's Safety Plan

(name)

1. My Reasons for Living

Some people find it helpful to focus on reasons for living when feeling stressed or suicidal. Think about your most important reasons for living. List one thing that gives you meaning or purpose in life.

List one of your future goals/aspirations.

List one person whose life you make better.

2. Things that Make me Feel Bad

Knowing your stressors (also known as triggers) is an important step in helping yourself avoid a suicidal crisis. What is currently causing stress in your life? What triggers you to feel unsafe or like you want to die? Examples could be situations, thoughts, moods, or behaviors.

3. Ways I Can Help Myself

Staying busy is a great way to keep your mind off your stressors and prevent suicidal thoughts from getting worse. What can you do to take your mind off your problems without contacting another person?

4. Who I Can Spend Time With

Make a list of people you can spend time with and/or places you can go to help distract you from suicidal thoughts.

5. People Who I Can Ask for Help

Who can help you when you are feeling stressed, sad, or unsafe? Make a list of responsible adults who you can contact when you are starting to feel unsafe or suicidal.

- _____ Phone: _____
- _____ Phone: _____
- _____ Phone: _____

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6. Mental Health Professionals I Can Contact for Help

- Clinician: _____ Phone: _____
- Clinician: _____ Phone: _____
- Local Emergency Department: _____
- Suicide Prevention Lifeline: 1-800-273-TALK (8255) or text "HOME" to 741741

7. How I Can Keep the Home Safe

What steps can you take to make your home a safe place and limit your ability to hurt yourself?

List some things you can do to remove harmful objects or substances from your surroundings. If possible, work with your parent/guardian to help you follow through with this plan.

8. Helpful Resources

Kohl's Safety Center

Located on the first floor of the American Family Children's Hospital. They can provide tools to keep you safe such as medicine lockboxes and gun locks.

MY3 App

This app ensures your safety plan is always available at your fingertips. It gives you quick access to your support contacts.

ReachOut.com

An information and support service created by teens and young adults *for* teens and young adults. You can find real life stories, fact sheets, videos, peer-to-peer discussion forums and more resources to help you, or someone you care about, get through tough times.

Suicide Prevention Resource Center (sprc.org)

Check out this website for suicide prevention resources, safety planning tips, online training courses, and educational articles.

Signature of Patient/Representative: _____ Date: ____/____/____ Time: _____

If signed by person other than the patient, print name and state relationship and authority to do so.

Print Name: _____ Relationship: _____

- Patient is: ☐ Minor ☐ Incompetent/Incapacitated
- Legal Authority: ☐ Legal Guardian ☐ Parent of Minor
☐ Health Care Agent ☐ Other: _____

Reviewed by: _____ Date: ____/____/____ Time: _____