

MY WELLNESS TOOLBOX & CRISIS ACTION PLAN



This plan is to help me if I have thoughts about killing myself. If I have these thoughts, I agree to take each of the following steps until I am safe.

"Crisis can be an overwhelming ces me that I am a burden to o eminds me what tools and support from my suicidal though	g fog v others port I I thts an	where I don't see options, or ways to or that there is no one who cares for ave to get through this difficult tind receive help to find a way to live ssful events that tell me a crisis materials. Intense worry/anxiety Feel angry/aggressive	o solv or me ne. If anoth	ve a problem. Sometimes crisis or is willing to help. My safety I follow this plan, I may feel ner day." brewing and it's time to use not a manage of the common and the c
"Crisis can be an overwhelming ces me that I am a burden to o eminds me what tools and supply he relief from my suicidal though are of warning signs, triggers, contains a lot ange in appetite rease use of alcohol/drugs ate/close off from others	g fog vothers port I I shts an or stre	where I don't see options, or ways to or that there is no one who cares for ave to get through this difficult tind receive help to find a way to live ssful events that tell me a crisis material intense worry/anxiety. Feel angry/aggressive	o solv or me ne. If anoth	ve a problem. Sometimes crisis or is willing to help. My safety I follow this plan, I may feel ner day." brewing and it's time to use not a manage of the common and the c
ces me that I am a burden to open independent of the relief from my suicidal though re of warning signs, triggers, contains a lot large in appetite rease use of alcohol/drugs ate/close off from others	others port I I thts an or stre	or that there is no one who cares for ave to get through this difficult tind receive help to find a way to live ssful events that tell me a crisis materials. Intense worry/anxiety Feel angry/aggressive	or mene. If anoth	or is willing to help. My safety I follow this plan, I may feel her day." brewing and it's time to use n Anniversary of trauma
a lot ange in appetite rease use of alcohol/drugs ate/close off from others		Intense worry/anxiety Feel angry/aggressive		Anniversary of trauma
a lot ange in appetite rease use of alcohol/drugs ate/close off from others		Feel angry/aggressive		-
ange in appetite rease use of alcohol/drugs ate/close off from others		Feel angry/aggressive		-
rease use of alcohol/drugs ate/close off from others				Financial/legal problems
ate/close off from others		Miss doctor appts		Too many responsibilities
•		Think "I can't cope"		Health problems
		Overreact to minor things		Family arguments
or hygiene		Divorce		Difficulty in school/work
lost in thought		Relationship break-up		Being scolded or screamed at
☐ Get lost in thought☐ Feel restless, fidgety		Death of someone close		Feel humiliated/ashamed
_		-	-	_
editate, do yoga		Play a game		Read a newspaper, magazine
ok a meal		Exercise or get physically active		or book
ay with a pet		Take a long bath		Go to a community center
sit online support group		Volunteer to help someone		Attend a place of worship
ke photographs		Watch TV		Plan a getaway
rite in a journal		Watch my favorite old movie		Pamper myself with a new
eate art/something new		·		haircut or massage
- No consider	what I can do on my own that stive and relaxing activities are editate, do yoga ok a meal y with a pet it online support group see photographs ite in a journal	what I can do on my own that may heretive and relaxing activities and placed that each of the control of the co	what I can do on my own that may help me feel better or distract me for tive and relaxing activities and places I can go to get away, and use the editate, do yoga Play a game ok a meal Exercise or get physically active y with a pet I to online support group I to online support	what I can do on my own that may help me feel better or distract me from particle and relaxing activities and places I can go to get away, and use those to editate, do yoga

4. Activate my support network by contacting the following family members, friends, community or professional supports, and/or emergency numbers.

Contact Number

What I Need Them to Do

Date

Type of Support

Therapist Signature _

What/Who

Type of Support	vviiat/ vviio	Contact Number	What I Need Them to Do
Resource	Specific names,	Best ways to reach them	Ex. Listen, help make doctor's appt., store
	agencies, locations		gun until crisis passes
Personal Resources			
Family/Trusted Adult			
Family/Friend			
Family/Friend			
Community Resources			
Emergency	Hospital/Police	9-1-1, ask for CIT Officer	
Hotline	National Suicide Prevention Lifeline	1-800-273-TALK(8255)	
Resources	Information & Referral	2-1-1	
Counselor/Therapist			
Case Manager			
Crisis Unit/Hospital			
Primary Care Doctor			
Other Resources			
Healthy, Safe Place			
Healthy, Safe Place			
Make sure other rDo not use drugs		de are out of reach and safe	ely stored (or have others remove them)
		ky driving, promiscuity, etc.)
. Read my "LINC to Life" :	statement.		
Create one now by aski	ng yourself: What has kep	ot me alive so far? What do	I look forward to in the future?
i I have thoughts shout b	illing or harming musclf	agrae to go through each	etan until Lam cafa
_	e, and I am waiting for hel	agree to go through each s p to arrive, I will continue to	o work through my plan by going back to
lient Signature			Date
arent Signature			Date

Congratulations for working hard on this important step in taking care of yourself.