[Insert organisation name/logo]

# CLIENT SAFETY PLAN TEMPLATE

This safety plan is an agreement between:

Client
 **[insert client name]**

and staff member:

on date:

When I feel like harming myself I will instead:

1. Try to identify exactly what is upsetting me.
2. Write out and review more helpful responses to my suicidal thoughts, including thoughts about myself , others and the future
3. Refer to my ‘Keep Safe Strategies’
4. Do the things that help me feel better for at least 30 minutes (things such as listen to music, exercise, focus on nature, call my best friend). For me these things are:

|  |
| --- |
|  |
|  |

1. If the thoughts continue, contact my drug and alcohol worker on **[insert organisation number]**
2. Contact the Lifeline service on **13 11 14.**

I, agree to use these strategies when I feel things are becoming too overwhelming.

I agree to go to the

emergency department or call **000** if, after using these strategies, my feelings are still unbearable.

|  |  |
| --- | --- |
| **Client signature**  |  |
| **Staff member signature**  |  |

Reference:

Suicide Assessment Kit (SAK). Deady, M., Ross, J. & Darke, S. (2011) Sydney, National Drug and Alcohol Research Centre (NDARC).