

4500 N. LEWIS AVE SIOUX FALLS, SD 57104 Patient Name: Patient 1, Test

DOB: 01/01/2024 **Sex:** Female/Male

Facility: City, State - Facility Name

F#: (605) 606-0402 **P#**: (855) 346 7763

Safety Plan

Can patient complete the Safety Plan?

Yes

Warning Signs

Conflict with others, isolating more often

Coping Skills

Going for a walk, talking to a friend, watching Friends Episodes

Reasons for Living

Plans for the Future, Spiritual Reasons

Social Support

System

Sister, Friend John, Pastor

Crisis and Professional

Service

Call My Doctor

Call/Text Crisis Hotline: 988

Safety Plan Collaboration

Individual agrees to remain clean and sober until crisis passes

Individual agrees to call and talk to mental health provider, hotline, 911, or other responsible person in case of crisis

Individual agrees to accept responsibility of this safety plan

Safeguard Your Home Following these simple steps can help protect you or your family member when experiencing a mental health crisis

Firearms: Ask a trusted family member or friend to keep firearms until the situation improves. Medications: Store all medications in a lock box or locked medicine cabinet. Dispose of unused medications at your local pharmacy.