



# Hettinger Public School

## My Safety Plan

Student's Name: \_\_\_\_\_ Grade: \_\_\_\_\_ Date: \_\_\_\_\_

### Triggers and warning signs that tell me when to use my safety plan:

Thoughts, feelings, behaviors, or experiences that have been or could become dangerous (Examples: feeling tense, thoughts of dying)

### Warning signs that others can see that show them I need help:

(Examples: scared face, clenched fists, isolating)

### Reasons for living:

Things to look forward to (Examples: Be with family/friends/pets, life goals)

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

### The one thing that is most important to me and worth living for:

### Coping strategies that I can do on my own to safely feel better:

Things that take my mind off my problems (Examples: Practice relaxation skills, listen to calming music)

### Coping statements:

Positive self-talk:

What do I really want someone else to tell me right now?

1. \_\_\_\_\_

What would it help me to tell myself?

2. \_\_\_\_\_

What would I tell someone else right now who wanted to die by suicide for the same reasons that I do?

3. \_\_\_\_\_

**STOP!** These thoughts are not good for me. They are not healthy or helpful thoughts, and I have decided to move in a better direction and learn to think differently.

I am safe. This will pass.

That is my depression talking, not me.

I will get through this.

I don't really want to die, I just want the pain to end.

I'm going to be all right. My feelings are not always rational. I'm just going to relax, calm down, and everything will be all right.

Never give up.

My suicidal thoughts are not rational.

Take a deep breath.

I am a work in progress.

### People/places/activities that provide distraction:

**Making my environment safe:**

Ways to reduce the risk of harm in places that I spend the most time with the help of a designated, responsible family member, friend or agency (Examples: Preventing access to sharp objects, weapons, medications, and/or illegal substances)

**People that I can call for help and to feel safe:**

Examples: Parent, grandparent, or trusted adult

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

**Professionals/Agencies that I can call for help and to feel safe**

1. Call or Text 988 Suicide & Crisis Lifeline
2. Call 211 or Text ND4ME to 898-211
3. Emergency: 911

**Hettinger Public School staff that I can go for help and to feel safe while at school:**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_



**I have participated in the development of this safety plan.**

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Hettinger Public School Representative: \_\_\_\_\_ Date: \_\_\_\_\_

Hettinger Public School Representative: \_\_\_\_\_ Date: \_\_\_\_\_

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*FOR ANY SAFETY CONCERNS, CALL 911 OR GO TO THE NEAREST EMERGENCY ROOM*

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cc: the student; the parent/guardian; Hettinger Public School