



Therapeutic Time, Inc.

Safety Plan

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Client Name: _____ **DOB:** _____

Know When to Get Help: What are the warning signs that you are beginning to struggle with your problem? These can include thoughts, feelings, or behaviors.

Use Coping Skills: What can you do, by yourself, to take your mind off the problem? What obstacles might there be to using these coping skills?

Reach Out to Social Support: If you are struggling to handle your problem alone, contact trusted family members or friends.

Name

Contact Information

Seek Help from Professionals If your problem persists or if you have suicidal thoughts, reach out for professional support:

Local emergency number:
Call **911** for an immediate emergency or crisis.

Palmdale Sheriff: (661) 272-2400 Lancaster Sheriff: (661) 948-8466

My mental health provider: _____

They are available 24/7:

***California Youth Crisis Line- 1-800-843-5200**

***National Suicide Prevention Lifeline- 1-800-273-8255**

***Crisis Text Line: text "home" to 741741**

***LA County Department of Mental Health: 1-800-854-7771**

Talk to someone now in the United States: • Call 988 • If you are deaf or hard of hearing, call 711 then 988 • For online chat, visit <https://988lifeline.org/chat>.

Your signature below indicates that you have read the information in this document and agree to its terms.

| | | | |
|------------------------------|------|------------------------------|------|
| Signature of Parent/Guardian | Date | Signature of Parent/Guardian | Date |
|------------------------------|------|------------------------------|------|