



Heartprints Counseling LLC

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Crisis Prevention Plan	
Prevention	What are you going to do daily to keep yourself from being overwhelmed with feeling stressed/angry/depressed/sad? (circle one or more)
1.)	
2.)	
3.)	
Triggers	What do you know starts you feeling stressed/angry/depressed/sad?
1.)	
2.)	
3.)	
Red Flags	How would we/I know if you were feeling stressed/angry/depressed/sad? What would we/I see?
1.)	
2.)	
3.)	
Avoid Saying	Is there anything we/I should avoid saying when you are feeling this way?
1.)	
2.)	
Intervention	What are some ideas that work to help snap you out of how you are feeling? What are activities that you love to do that make you feel better?
1.)	
2.)	
3.)	
Trusted Peeps	Who are people that you can call or talk with that you trust? Name Phone Number What do you want them to do?
1.)	
2.)	
3.)	

4.)	Clark County 24/7 Crisis Line 1-800-626-8137/360-696-9560
Misc.	Anything else we/I should know to help keep you safe? (i.e. drug use/access to weapons)
1.)	
2.)	
3.)	

Disclaimer: This form does not guarantee the safety of any party. It is intended to be used as a tool to help support individuals in crisis. Call 911 or seek mental health support in case of emergency.

By signing below, I am promising to use the above plan to prevent and intervene when feeling unsafe. I promise to contact the above listed people before I do anything to hurt myself or someone else.

Participant

Date

Witness

Date