

Safety Planning Worksheet

It is our desire that you do this worksheet with an advocate or with someone who has a good working knowledge of safety planning rather than do this alone.

In this space, write the top five or six things that you think they will do. No need for explanation here; we get to that next.

- | | |
|----|----|
| 1. | 4. |
| 2. | 5. |
| 3. | 6. |
-

In this space, list the reasons why you are fearful they will do what you believe they will do.

- | | |
|----|----|
| 1. | 4. |
| 2. | 5. |
| 3. | 6. |
-

In the remaining space fill in the following sentence for each of the above-listed behaviors they may do. ex: If they do (what is in #1), I will _____

- | | |
|----|----|
| 1. | 4. |
| 2. | 5. |
| 3. | 6. |
-