

MY CARE PLAN

WARNING SIGNS How I will know that I am overwhelmed and need help:

- 1 _____
- 2 _____
- 3 _____

INTERNAL COPING STRATEGIES Things I can do to take my mind off what's going on without contacting someone else:

- 1 _____
- 2 _____
- 3 _____

EXTERNAL COPING STRATEGIES People and social settings that provide distraction:

Person 1's name: _____ Person 1's Phone Number: _____

Person 2's name: _____ Person 2's Phone Number: _____

Setting 1: _____ Setting 2: _____

MY SUPPORT SYSTEM People whom I can ask for help during a crisis:

Person 1's name: _____ Person 1's Phone Number: _____

Person 2's name: _____ Person 2's Phone Number: _____

Person 3's name: _____ Person 3's Phone Number: _____

MY SUPPORT SYSTEM Professionals or agencies I can contact during a crisis:

Name: _____ Contact: _____

Name: _____ Contact: _____

Name: _____ Contact: _____

My Local Urgent Care (Name, Address, + Phone Number): _____

My Local Pharmacy (Name, Address, + Phone Number): _____

My Local Emergency Department (Name, Address, + Phone Number): _____

SAPHE Hotline: 504-654-9543 The Line: 504-264-6074 Nurse Advice Line: 504-862-8121

Other useful resources to know: _____

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Consider the following questions in relation to being in a community of care.

If someone comes to you for help but you are not in a place to help them, who would you connect them with?

Once that person is connected to help, who would *you* reach out to for support?

What sorts of items or activities bring you comfort or help you cope?

How can the people around you best care for/support you? How will you let them know?

**What regular (daily, weekly, etc.) practices help you care for your wellbeing?
How will you prioritize them?**