

**Your Relapse Prevention Plan** is an important part of your overall recovery plan. While relapse can be part of recovery, it doesn't need to be. By planning to prevent relapse, we are actively taking control of the unmanageability in our lives.

As part of relapse prevention, check off (☑) each element of recovery prevention capital as you build it and add it to your toolbox.

- Complete the Three Circles Packet
- Complete and use your Personal Crazyness Index (PCI) using the PCI Packet
- Complete the 8 Dimensions of Wellness Worksheet
- Complete the WRAP plan on the following pages in this packet
- Schedule a review of these documents every three months

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\_\_\_\_\_

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**Recoveree**

Reviewed on: \_\_\_\_\_ by \_\_\_\_\_

**Coach**

Reviewed on: \_\_\_\_\_ by \_\_\_\_\_









Write an action plan to deal with triggers and if you feel yourself slipping toward relapse.

If I feel like I am slipping toward relapse the six numbers I can call until I reach someone are (list in order):

	<b>Person</b>	<b>Relationship</b>	<b>Phone Number</b>
1		12 Step Sponsor	
2			
3			
4	SLAA Inspiration Story	Resource Line	215-574-2121
5			
6			
7		Recovery Coach	
8	SLAA Inspiration Line	Resource Line	215-574-2120

I can find additional resources at: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Other steps I will take when things feel like they are breaking down are:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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Use additional paper as necessary.

**Crisis Planning**

In spite of our best planning and assertive action, we may find ourselves in a crisis situation where others will need to take over responsibility for our care. We might feel like we are totally out of control.

Writing a crisis plan when you are well to instruct others about how to care for you when you are not, keeps you in control even when it seems like things are out of control. Others will know what to do, saving everyone time and frustration, while ensuring that your needs will be met. Develop this plan slowly when you are feeling well.

**The symptoms or behaviors that would indicate to others that they need action on your behalf are:**

_____	_____
_____	_____
_____	_____
_____	_____

**Who do you want to take action? (Names & Phone # in priority order)**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Medications you are currently taking that could help you while in crisis:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Medications/Substances to avoid:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Treatments that you prefer:** \_\_\_\_\_

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**Treatments to avoid:** \_\_\_\_\_

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**Three places you feel safe:** \_\_\_\_\_

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**Place you feel unsafe:** \_\_\_\_\_

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**Actions that others should take which would be helpful:** \_\_\_\_\_

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**If a supporter should confiscate your e-tablet, please initial here:** \_\_\_\_\_

**If a supporter should confiscate your phone, please initial here:** \_\_\_\_\_

**Actions that should be avoided:** \_\_\_\_\_

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**How will supporters know that the crisis has ended?** \_\_\_\_\_

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\_\_\_\_\_ I understand that if I indicate that I am placing myself or someone else in danger, my supporters will call 911 or relevant agencies.