

Wellness and Housing Crisis Plan

Well-Being Crisis Plan

Daily Maintenance Plan	
I take these actions to maintain my well-being daily	My PSHA Case Manager can support my wellbeing by:
Harm Reduction Plan	
In the past, the following has negatively impacted my well-being:	The following strategies have supported me in preventing things from escalating further:
1. 2. 3. 4.	1. 2. 3. 4.
The following are situations that could lead to me struggling more:	These are signs/things I, or those around me may notice when I'm struggling:
1. 2. 3. 4.	1. 2. 3. 4.
Crisis Support Plan	

If I'm in crisis it might look like:	Some things I can do to support myself are:
1. 2. 3.	1. 2. 3.
My PSHA case manager can best support me by:	Some of the safe people that I can reach out to are:
1. 2. 3.	1. 2. 3.
Who are the people I want notified:	Other?:
1. 2. 3.	1. 2. 3.
Post-Crisis Plan	
I need the following things to support me post crisis:	My PSHA case manager can do the following things to support be post-crisis
1. 2. 3.	1. 2. 3.

Housing Crisis Plan

Daily Maintenance Plan	
I take these actions to maintain my housing daily / regularly:	My PSHA Case Manager can support my housing stability by:

1.	1.
2.	2.
3.	3.
Crisis Prevention Plan	
In the past, the following has created barriers for me to maintaining housing:	In the past the following strategies have supported me in preventing things from escalating further:
1.	1.
2.	2.
3.	3.
4.	4.
The following are things that may create barriers or jeopardize my housing in the future:	following are effective strategies for me to manage if these things arise:
1.	1.
2.	2.
3.	3.
4.	4.
These are signs/things I will notice when my housing may be at risk	The following are thing that my PSHA case manager, may observe when things are escalating for me in ways that could jeopardize my housing
1.	1.
2.	2.
3.	3.
Crisis Support Plan	
If I am at immediate risk of losing my housing, I can: (examples could include strategies to retain subsidies or landlord references)	My PSHA case manager can do the following:
1.	1.

2. 3.	2. 3.
Some of the safe people that I can reach out to are:	Who I want notified from my care team:
1. 2. 3.	1. 2. 3.
If I need to leave my housing immediately, I would like the following to happen: (consider pets, personal items, etc.)	Other:
1. 2. 3.	1. 2. 3.

All people participating in the development of this housing support plan and crisis plan should date, print and sign their name below, including the tenant, family/friends, community service providers, housing support team members, etc.

Printed Name and Title/Relationship to Tenant

Signature of Person & Date

1. _____

2. _____

3. _____

Emergency contact _____

All people participating in the development of this housing support plan and crisis plan should date, print and sign their name below, including the tenant, family/friends, community service providers, housing support team members, etc.

Printed Name and Title/Relationship to Tenant

Signature of Person & Date

1. _____
2. _____
3. _____