

New Heights Clinic

NO SELF-HARM CONTRACT

I willingly commit with *New Heights Clinic* to use the following skills if I feel at risk of harming myself in any way.

___ **1. Use Distraction Skills:**

Count down from 100, Count Colors, Read, Watch TV, Observe & Describe Skill, Diaphragmatic Breathing, Watch a Funny Movie, Hold Ice in Your Hand, Exercise, Stretch, Take a Walk, Listen to Music, Drink Tea, Stand Under a Hot/ Cold Shower, Take a Mental Time Out, Clean the House, etc.

___ **2. Use Self-Soothe Skills:**

Encourage Yourself, Positive Self-Affirmations, Repeat, "I can stand it. It won't last forever. I will make it out of this. I'm doing the best I can do". Take a Bubble Bath. Light Candles. Positive Thinking.

___ **3. Call a Friend,** _____, **phone:** _____

___ **4. Call Mentor,** _____, **phone:** _____

___ **5. Call the Clark County Crisis Line: (360) 696-9560 24-hours-A-Day, 7-days a Week**

___ **6. Call 911**

___ **7. Go To the Emergency Department at hospital**

___ **8. Other special conditions:**

Client's Signature

Date

Counselor's Signature

Date

Name: _____

Client ID#: _____

DOB: _____