



## My Summer Wellness Plan

Complete this in coordination with a school counselor, psychologist, or therapist.

**Name:**

**Date:**

### School Year Reflection

Before diving into summer, take a few minutes to reflect on the past school year.  
In which ways have you grown? What lessons have you learned that you plan to take forward with you?

School Year Reflection	
Before diving into summer, take a few minutes to reflect on the past school year. In which ways have you grown? What lessons have you learned that you plan to take forward with you?	
Ways I grew this year:	Lessons I learned this year:

### Summer Planning & Expectations

What am I looking forward to this summer?

- 
- 
- 

What am I nervous about for summer?

- 
- 
-

## Support System

Here are the people I know I can call or go to (family, friends, or community) who will help support me when I'm feeling high stress or when in crisis. Sometimes asking for help is the bravest thing we can do.

*(Provide Name, Phone Number, and Address, if possible)*

- 1.
- 2.
- 3.
- 4.

## Therapy Plan and Supports

Do you have any upcoming therapy appointments this Summer?  
If so, when and where will you be attending the next appointment?  
*Please also include other outside supports you might have.*

Next Appointment:

Additional Outside Support Available:

## Daily Summer Routine

Create a daily schedule that includes mealtimes, chores, outdoor time, time with friends and family, and bedtime. Research shows that structured routines can help support our mental health. Interested in learning more? Click [here](#).

Morning	Afternoon	Evening

### Stressors

Identify potential summer stressors, such as being home alone, parents fighting, issues with siblings, etc.

--

### Coping Strategies and Strengths

“When I feel \_\_\_\_\_, I know I can...”

*(Identify your warning signs, such as feeling angry, stressed, sad, etc. to fill in the blank. Then, make a list of coping strategies such as listening to music, drawing, going outside, writing in a journal, taking deep breaths, etc)*

When I feel...	I know I can...

### Fun Activities

What are some fun activities I'm looking forward to this summer?

*Include some stress-relieving activities such as exercise, being in nature, doing things with friends, family, or neighbors, reading a book, trying something new, and more*

--

## Keeping myself healthy and safe

“When I need to calm down, I know my safe places are...”

*(Identify safe places you can go to feel safe and calm, such as a favorite room of the house, an area outdoors you enjoy spending time and can easily get to, or a trusted adults' home)*

**“When I’m struggling to resolve my crisis, I know I and/or my parents/caregivers can follow these steps:”**

My Safe Places: 1.

2.

3.

### Steps to take if I notice I’m struggling or am in crisis and need help:

1. Tell your parent/caregiver or other trusted adult that you feel unsafe.
2. Tell the adult how you are feeling. This might be a good time to review your Summer Wellness Plan.
3. **If you're in need of help, reach out to your therapist or ask a trusted adult to help you connect with care.** Remember: You don't need to do this on your own. There is help available - even in the summertime!
4. If I need additional assistance:
  - a. **Call Psychiatric Intake Response at Cincinnati Children's: (513) 636-4124;** The staff will help you decide the most effective level of intervention
  - b. **Call or Text 988 Lifeline;** 988 is the national 24/7 suicide hotline; free and confidential support for anyone
  - c. **Best Point Urgent Care: (513) 527-3040;** Open Monday-Friday 9:30 am to 6 pm
5. If after you've tried numbers 1-4 above and you feel you cannot stay safe, call 911 or have an adult take you to the nearest emergency room.