

# Treatment Plan for Self-Harm

## Patient Information

Name:

Age:

Gender:

Date:

## Presenting Concerns

Self-harm Behaviors (frequency, methods, urges):

Triggers or Associated Emotions:

History of Self-harm and Past Treatment Attempts (if any):

## Assessment

Client's Mental Health Diagnosis (if any):

Results from Relevant Assessments:

## Goals

Short-term Goals:

Long-term Goals:

## Interventions

Individual Therapy:

Safety Planning:

Coping Skills Training:

Collaboration:

## Progress Monitoring

How progress towards goals will be measured:

## Resources

*Include a list of resources for the client, such as crisis hotlines, self-help websites, and support groups.*

## Additional Notes