

Personal Wellbeing Plan

Name:		DOB	
Address:		NHS No:	

What are the changes that you notice in yourself when you are feeling stressed or unwell?

Hint: You may notice changes to your appetite, sleep, thought patterns, communication, energy levels, level of engagement with services, temper, emotions, etc.

What can you do to help yourself through this period?

Who makes up your support network?

Hint: Include family, friends, work colleagues, tutors, doctor/s, nurses, social workers, counsellors, keyworker/linkworker, church/faith organisation, clubs/societies, internet communities, etc.

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What help would you like others to provide?

Name/Group of people	Support I would find helpful

Who would you like to share this plan with?

Signature		Date completed	
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