Low mood setback plan

Keep the learning visible. Match each early sign with a practical response rather than waiting for a difficult week.

Editable PDF: replace or delete the fictional examples. Blank PDF: print and write. Guidance follows.

What I have learned

e.g. Small activities helped bring structure and contact.

If I notice...	A small response I can use	Support / when to review
e.g. Missing meals and withdrawing.	e.g. Use a small activity and seek support.	e.g. Review with my clinician.

Helpful habits to keep

e.g. Basic care, contact and realistic activity.

Clinical support / when to seek a review

e.g. Contact my clinician if functioning or basic care deteriorates.

Urgent help if I cannot stay safe

e.g. Use my agreed urgent support route if I cannot stay safe.

This is not an urgent safety plan. Seek urgent help if you cannot stay safe or basic care is deteriorating.

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Using this resource

Low mood setback plan

What this helps with

Depression can return, especially during stress or major changes, and one difficult day does not tell you what the next month will be like. A maintenance plan helps you recognise your particular early signs and respond before withdrawal or hopelessness becomes more established. It brings together routines, meaningful activity, support and treatment arrangements. The aim is to make help easier to access when energy is low. This sheet complements clinical care; it is not a substitute for an individual safety plan when one is needed.

How to use it

1. Record what helped, including treatment, support and practical changes rather than only personal effort.
2. Identify early warning signs and the difference between a bad day and a continuing pattern.
3. Choose a small response for each sign, with realistic support.
4. Write when and how you will contact a clinician if symptoms worsen or daily functioning falls.
5. Keep any prescribed treatment plan and review date; seek urgent help for immediate safety concerns.

A fictional worked example

After improvement, Erin notices that her first warning signs are cancelling plans, leaving meals until late and spending longer asking why things feel pointless. Her plan begins with one familiar meal routine and a short check-in with someone she trusts. If the pattern continues or basic care becomes harder, she will contact her GP or therapist to review support rather than wait until she can manage alone. She records what made previous help useful and where to find appointment details. She keeps medication decisions with her prescriber. The plan also makes clear that thoughts she may act on require urgent support, not another week of self-help.

Keep in mind

Seek urgent support if you may act on thoughts of harming yourself or cannot stay safe. Increasing difficulty eating, drinking, sleeping or caring for yourself needs clinical attention. Do not change medication independently. Agree an individual safety plan with your care team when needed.

Sources and attribution

NICE (2022). Depression in adults: treatment and management (NG222).

Martell, C. R., Dimidjian, S., & Herman-Dunn, R. (2022). Behavioral activation for depression: A clinician's guide (2nd ed.). Guilford Press.

Original material informed by the sources above. No outside organisation endorses this worksheet.

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