

Safety Plan QUICK GUIDE

WHAT IS A SAFETY PLAN?

A Safety Plan is a prioritized written list of coping strategies and sources of support students can use who have been deemed to be at high risk for suicide. Students can use these strategies before or during a suicidal crisis. The plan is **brief**, is in the **student's own words**, and is **easy** to read.

WHO SHOULD HAVE A SAFETY PLAN?

Any student who has a suicidal crisis should have a comprehensive suicide risk assessment. Clinicians should then collaborate with the student on developing a safety plan.

HOW SHOULD A SAFETY PLAN BE DONE?

Safety Planning is a clinical process. Listening to, empathizing with, and engaging the student in the process can promote the development of the Safety Plan and the likelihood of its use.

IMPLEMENTING THE SAFETY PLAN

There are 6 Steps involved in the development of a Safety Plan.

IMPLEMENTING THE SAFETY PLAN: 6 STEP PROCESS

Step 1: Warning Signs

- Ask *"How will you know when the safety plan should be used?"*
- Ask *"What do you experience when you start to think about suicide or feel extremely distressed?"*
- List warning signs (thoughts, images, thinking processes, mood, and/or behaviors) using the student's own words.

Step 2: Internal Coping Strategies

- Ask *"What can you do, on your own, if you become suicidal again, to help yourself not to act on your thoughts or urges?"*
- Assess likelihood of use: Ask *"How likely do you think you would be able to do this step during a time of crisis?"*
- If doubt about use is expressed, ask *"What might stand in the way of you thinking of these activities or doing them if you think of them?"*
- Use a collaborative, problem solving approach to address potential roadblocks and ID alternative coping strategies.

Step 3: Social Contacts Who May Distract from the Crisis

- Instruct students to use Step 3 if Step 2 does not resolve the crisis or lower risk.
- Ask ***“Who or what social settings help you take your mind off your problems at least for a little while?” “Who helps you feel better when you socialize with them?”***
- Ask for safe places they can go to be around people (i.e. coffee shop).
- Ask student to list several people and social settings, in case the first option is unavailable.
- Remember, in this step, the goal is distraction from suicidal thoughts and feelings.
- Assess likelihood that student will engage in this step; ID potential obstacles, and problem solve, as appropriate.

Step 4: Family Members or Friends Who May Offer Help

- Instruct students to use Step 4 if Step 3 does not resolve crisis or lower risk.
- Ask ***“Among your family or friends, who do you think you could contact for help during a crisis?”*** or ***“Who is supportive of you and who do you feel that you can talk with when you’re under stress?”***
- Ask students to list several people, in case one contact is unreachable. Prioritize the list. In this step, unlike the previous step, patients reveal they are in crisis to others.
- Assess likelihood student will engage in this step; ID potential obstacles, and problem solve.
- Role play and rehearsal can be very useful in this step.

Step 5: Professionals and Agencies to Contact for Help

- Instruct the students to use Step 5 if Step 4 does not resolve the crisis or lower risk
- Ask, ***“Who are the mental health professionals that we should identify to be on your safety plan?”*** and ***Are there other health care providers?”***
- List names, numbers and/or locations of clinicians, local urgent care services, Suicide Prevention Hotline (1-800-273-TALK (8255)).

- Assess likelihood student will engage in this step; ID potential obstacles, and problem solve.

Step 6: MAKING THE ENVIRONMENT SAFE

- Ask students which means they would consider using during a suicidal crisis.
- Ask "***Do you own a firearm, such as a gun or rifle?***" and "***What other means do you have access to and may use to attempt to kill yourself?***"
- Collaboratively identify ways to secure or limit access to lethal means: Ask "**How can we go about developing a plan to limit your access to these means?**"
- For methods with low lethality, clinicians may ask students to remove or restrict their access to these methods themselves.
- Restricting the student's access to a highly lethal method, such as a firearm, should be done by a designated, responsible person-usually a family member or close friend, or the police.

WHAT ARE THE STEPS AFTER THE PLAN IS DEVELOPED?

- Assess** the likelihood that the **overall safety plan** will be used and problem-solve with the student to identify barriers or obstacles to using the plan.
- Discuss** where the student will keep the safety plan and how it will be located during a crisis.
- Evaluate** if the format is appropriate for the students' capacity and circumstances.
- Review** the plan periodically when student's circumstances or needs change.

REMEMBER: THE SAFETY PLAN IS A TOOL TO ENGAGE THE STUDENT AND IS ONLY ONE PART OF A COMPREHENSIVE SUICIDE CARE PLAN