



## Safety Plan How-To Guide for Clinicians

### General

- Safety plans are designed to reduce risk of future suicide attempts
- It can be helpful to have kids and parents work on this activity separately at first, but it is important to get everyone's input when creating a final version.

### Triggers

- Focus on triggers that are specific to suicidal crises (do not include triggers for irritation or minor difficulties)
- Clarify triggers, get specific. ("Being told 'no'" -> "Being told I can't go out with my friends when there is an important event"; "Homework" -> "A major long-term project is due, I am way behind and at risk of not passing.")
- When kids/parents are having difficulty identifying triggers/warning signs, you can help them by exploring exactly what led up to the most recent crisis/crises.

### Warning signs

- Draw as much as possible from past/recent crisis situations.
- Ask: "How will you know when the safety plan should be used?"
- Ask: "What do you experience when you start to think about suicide?"
- List warning signs (thoughts, images, feelings, and behaviors) using the patient's/family's own words.

### Parent/caregiver strategies

- You may need to help negotiate strategies parents can use to non-intrusively keep an eye on the youth (e.g., teen agrees to leave bedroom door open a crack so parents don't have to disturb him in order to verify safety; teen agrees to respond to texts within a certain time frame indicating he is safe, otherwise the parent will check on them).
- You may explore what forms of support or checking in are best received by the teen (e.g., a supportive text vs. repeated verbal questioning; is offering a hug ok?).

### Youth coping

- Draw on existing coping strategies/healthy activities, and/or suggest new ones.
- Assess how likely they are to actually use these when needed. Identify potential obstacles, problem-solve.

## People or social setting

- Being with others, or in a social setting, can help distract and reduce feelings of isolation without necessarily disclosing suicidal concerns.

## Who to call

- Typically helpful to include a crisis support line (teens may feel more comfortable calling a line staffed by teens).
- Include mental health providers if involved and appropriate.
- Include several supportive adults or friends, in case some are not reachable.
- Evaluate the likelihood the youth would actually call these contacts in a time of crisis. Consider role-play/rehearsal to increase chances of follow through.
- Make a plan for these numbers to be available/accessible when needed (e.g., enter in phone; keep Safety Plan/numbers in places they might be needed).

## Making the environment safe

- Learn about any suicide plans and remove lethal means.
- Secure/remove dangerous/lethal materials (firearms, knives, sharps, cleaners, OTC and prescription medications, materials that can be used for strangulation) in the home to reduce the likelihood that passing, impulsive thoughts would lead to lethal outcomes.
- Consider providing “General Home Safety Recommendations” handout, available on the CBT+ Notebook.

## One thing worth living for

- This can be motivating and protective during a crisis.

## How to support a teen who contacts you in crisis

- Ask if they have followed their Safety Plan. Praise for any parts of the plan they have followed. If they have not followed their plan, have them get it out and try the activities listed. Get them started on the phone and check back with them as appropriate.
- Involve family members and escalate support as needed if the plan does not resolve the safety concern.