



Introduction to Safety Planning Intervention

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Self Assessment

- Situation:
My client expresses suicidal intent
- My Automatic Thoughts:

Coronavirus and Suicide Prevalence

- In the United States, suicide rates are at their highest since WWII
- Factors, such as
 - Economic stress
 - Social isolation
 - Reduced access to religious services
 - Overall National anxiety

What is Safety Planning Intervention?

- The Safety Planning Intervention Tool (SPI) is a clinical intervention that results in development of a one-page document clients can use when a suicidal crisis is emerging.
- This document can be re-used when future suicidal ideation returns
- This document may decrease future suicidal ideation and behaviors

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Rationale

- Uses Evidence-Based Risk Reduction Strategies
- Using the SPI may reduce further suicidal behavior
- The SPI is unique in that it is systematic and comprehensive
- Can be used in context of ED visit, ongoing outpatient treatment or inpatient care
- Recommended as best practice by Suicide Prevention Resource Center

Suicide Prevention Framework



Safety Plan

Step 1: Warning signs (thoughts, images, mood, situation, behavior) that a crisis may be developing:

1. _____
2. _____
3. _____

Step 2: Internal coping strategies – Things I can do to take my mind off my problems without contacting another person (relaxation technique, physical activity):

1. _____
2. _____
3. _____
4. _____

Step 3: People and/or social settings that provide distraction:

1. _____
2. _____
3. _____
4. _____

Step 4: People whom I can ask for help:

1. Name _____ Phone _____
2. Name _____ Phone _____
3. Name _____ Phone _____

Step 5: Professionals or agencies I can contact during a crisis:

1. Clinician/Agency Name _____ Phone _____
2. Clinician/Agency Name _____ Phone _____
3. Suicide Prevention Lifeline Phone: **1-800-273-TALK (8255)**
4. Crisis Text Line: Text **TWT** to **741741**

Step 6: Making the environment safe:

1. _____
2. _____
3. _____

Administration Method/Process

- Implement following a comprehensive suicide risk assessment
- Developed collaboratively with client
- 20-45 minutes to complete
- Make a copy and upload to chart, give original to client
- Becomes a tool that can be referred to at subsequent visits

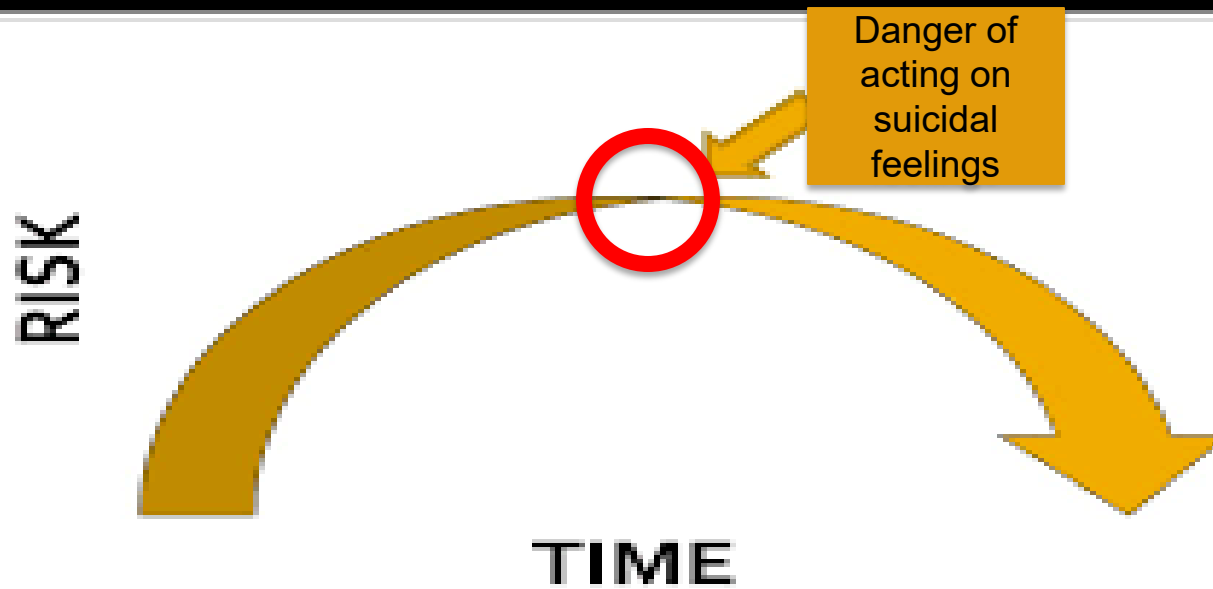
SPI Overview

- Written list of coping strategies and resources for use during suicidal crisis.
- Helps provide sense of control for individual.
- Uses brief, easy-to-read format that uses individual's own words.
- Can be used as single-session intervention or incorporates into ongoing treatment.
- Uses steps to increase level of intervention.
- Can advance steps w/o “completing” previous step
- Individual stops when suicidal feelings subside.

What it is NOT

- Not a substitute for individual psychotherapy
- Not for an individual in imminent danger of attempting suicide.
- Not a “no-suicide contract”.

Risk fluctuates over time



- Suicide risk fluctuates over time.
- Problem solving capacity diminishes during crisis.

Safety Plan Intervention skills for clinician

- Obtain a description of a recent suicidal crisis
- Review suicidal risk curve with individual
- Provide rationale for the Safety Plan Intervention
- Describe the development of the safety plan as a collaborative process
- Explain how to follow steps of safety plan
- Discuss the location, sharing, barriers and likelihood of use.

Components/Steps of SPI

- Recognize warning signs
- Employ internal coping strategies
- Utilize social contacts as distraction
- Contact family members/friends who may help
- Contact mental health professionals
- Reduce potential use of lethal means
- Identify reason for living (optional)

Identify Warning Signs

- What is occurring when beginning to experience suicidal thoughts or extreme distress?
 - Thoughts
 - Emotions
 - Behavior
 - Physical sensations
 - Avoid using external cues

Internal Coping Strategies

- Useful to have clients attempt to cope on their own with their thoughts, even if only briefly
- Enhances client's self-efficacy
- Can create sense that suicidal thoughts can be mastered
- Clinicians use problem-solving approach to ensure potential road blocks to using strategies are identified

Socialization

- If internal coping ineffective, move to this step
- Crisis may be alleviated if clients feel more connected or a sense of belonging
- Coffee shops, places of worship, AA meetings
- Distracting from thoughts and worries
- Not a place to seek specific help

Asking Social Contacts for Help/Support

- Fourth step
- Inform family members or friends of crisis
- Directly asking for help or support
- Weigh pros and cons with client of who best to involve
- Contact information

Professional Agencies & Clinicians

- Clinician names and phone numbers
- Suicide hotline/Crisis Text line
- Discuss client expectations and roadblocks

Means Restriction

- Even if no specific suicide plan is identified, important to eliminate access
- Explain rationale for this step
- Collaboratively identify ways to secure or limit access
- Routinely ask about access to firearms regardless if this is a “method of choice”
- Discuss length of time (1 month, 2 weeks)

SPI Quality

- Safety plans often are of poor quality
- Individuals have reported that plans are more helpful when done with clinician
- Higher quality plan = fewer psychiatric hospitalization
- Needs to be revised as needed in order to remain effective
- Higher quality = more effective

SPI User Feedback

- 100 % recalled completing the plan
- 97% were satisfied with plan
- 88% could identify its current location/where it was kept
- 61% reported using it
- Aspects of Plan that were Frequently Identified as Helpful...
 - Social Contacts/Distractions (52%)
 - Social Support for Crisis Help (47%)
 - Contacting Professionals (45%)
 - Internal Coping Strategies (27%)

Video: Safety Planning Intervention/Part
One

<https://vimeo.com/355995975>

Video: Safety Planning Intervention/Part Two

<https://vimeo.com/355997966>

Video: Safety Planning Intervention/Part Three

<https://vimeo.com/355998927>

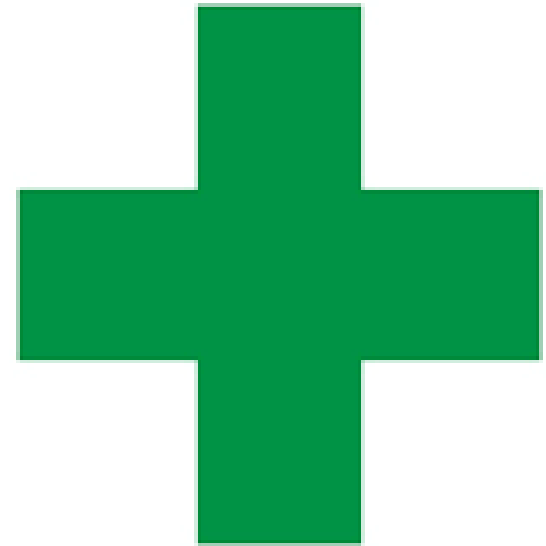
Safety Plan Apps



Safety Plan Apps

Safety Plan

By Two Penguins Studios, LLC



Questions?

Resources

- Stanley B & Brown GK, A Brief Intervention to Mitigate Suicide Risk. Cognitive and Behavioral Practice, 19:2, May 2012, 256-64.
- Safety planning in the VA (Stanley & Brown VA Safety Planning Manual, 2008).
- SPI designated as a Best Practice by the SPRC/AFSP Registry of Best Practices for Suicide Prevention.