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

A Comprehensive Approach to Suicide Prevention

- Enhance Life Skills
- Promote Social Networks & Connections
- Identify People at Risk
- Increase Help-Seeking
- Provide Access to Mental Health Services
- Establish Crisis Management & Prevention Procedures
- Restrict Access to Lethal Means

www.sprc.org
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”.
• 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 rational 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 rational 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
By Two Penguins Studios, LLC
Questions?
Resources


• 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.