

## **Guide for Health Professional or Support Person to Assist Someone to Complete Manawa - My own suicide survival plan**

### **Suicide Safety Plan**

A six step **clinical intervention** that generates a one-page document for managing and decreasing suicidal feelings and for staying safe when these feelings emerge.

- Plan developed collaboratively – guide the service user (SU) to generate their own ideas before suggesting yours (balance collaboration with directive approach);
- Include obstacles to carrying out the steps and problem solving around them;
- Can be done in one session and refined over time.

### **The Safety Plan covers the following areas:**

1. Recognising warning signs
2. My reasons to live
3. Keeping safe - Reducing potential for use of lethal means
4. What can I do by myself - Using internal coping strategies (without contacting another person)
5. Who can I connect with - Socialising with others as a way of distraction
6. My supporters - Contacting family members, friends, or professionals to help resolve crisis
7. Helplines

Establish the foundation for safety planning by asking the SU to tell the story of their suicide attempt or suicidal crisis.

- Beginning of the story
  - When was the major decision point associated with suicide crisis/attempt/risk?
  - What was the strong emotional reaction to a specific event (either external or internal)
  - Follow backward in time

- Ask the SU to describe events, situations, and their reactions to events, in as much detail as possible.
- It is important to understand the function of suicidal behavior and thinking from the SU's perspective
- Empathize with strong feelings and desire to reduce distress
- Avoid immediate problem-solving without understanding the details and motivation for the suicide attempt and/or suicidal crisis

### **Introduce the Safety Plan**

- Introduce the safety plan as a way to help recognise warning signs and take action to reduce risk or prevent it escalating.
- Describe how suicidal thoughts come and go; that suicidal crises pass and that the safety plan helps one to not act on feelings, giving suicidal thoughts time to diminish and become more manageable.
- Explain how using the strategies enhances self-efficacy and a sense of self control
- Describe that the development of the plan is collaborative

### **Explain - How to Follow the Steps**

- Progress through each step on the plan. If following step one is not helpful in reducing risk, go to the next step.
- That if the suicide risk has subsided after a step, then the next step is not necessary.
- That skipping steps is likely to result in them acting on their suicidal feelings.

### **Step 1: Identify Warning Signs**

- Explain that the purpose of identifying warning signs is to help recognise when the crisis may escalate so that they know to refer to their plan and take action to reduce risk.
- Ask "What do you experience when you start to think about suicide or feel distressed?" If the warning signs are vague, say, "Let's try to be more specific." Explain that it is important to be specific so that they are more likely to recognize the beginning of the crisis. Use their words. Help with suggestions from their suicide narrative.
- Write down warning signs in the SU's own words...
  - Thoughts, emotions, behaviour, physical sensation, external cues.

## **Step 2: Reasons to Live**

- Ask "When you're feeling bad, what are the things you can remember that are worth living for?"
- These may be things or people who are important to you, or things you want to do in the future that you are looking forward to such as travel or starting a family.

## **Step 3: Keeping safe - Making the Environment Safer**

- If SU identifies a potentially lethal method to kill themselves, ask, "Do you have access to this method?" Be aware of the view that having access to a lethal means to kill oneself may be a strategy used to cope with crises.
- Express concern about the SU's safety.
- Explain that making the environment safer will help to lower risk of acting on suicidal feelings (delays urge to act on suicidal thoughts)
- For some SU's who attempt suicide, the interval between thinking about and acting on suicidal urges is only a matter of minutes.

**For each lethal method, ask "How can we go about developing a plan to make your environment safer so that you'll be less likely to use this method to harm yourself?"**

- "How likely are you to do this? What might get in the way? How can we address the obstacles?"

**If doubt is expressed about limiting access, ask:**

- "What are the pros of having access to this method and what are the cons?"
- "Is there an alternative way of limiting access so that it is safer?"
- "What does it mean to you to limit access?"

## **Step 4: What can I do by myself? Identify Internal Coping Strategies**

Explain how distracting oneself from the suicidal thoughts helps to lower risk

- Ask "What can you do, on your own, if you become suicidal again, to help yourself not to act on your thoughts or urges?" Identify at least three specific strategies unless SU declines.
- Provide suggestions if they cannot think of any. Determine whether the strategies are safe and will not increase distress.
- Ask "How likely do you think you would be able to do this during a time of crisis?" or "Is it feasible?"
- 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 identify alternative coping strategies that are more feasible.

## **Step 5: Who can I connect with? Identify Social Contacts and Social Settings**

Explain that if Step 4 does not lower risk, then go to Step 5. Explain that people are generally helpful distractors and that, in this step, you do not inform them that you are suicidal or upset.

- Ask "Who would help you take your mind off your problems for at least for a little while? "Who helps you feel better when you socialise with them?" Identify at least two people.
- Ask "Where can you go to be around people to distract you from your suicidal feelings?"
- For each response, ask "How likely do you think you would be able to do talk with someone/go somewhere during a time of crisis?" "Is it feasible and safe?"
- If doubt is expressed, ask "What might stand in the way of you thinking of contacting someone or going to a social setting?" Identify ways to resolve roadblocks or identify alternatives.

## **Step 6: Identify Family Members or Friends**

Explain that if Step 5 will not lower risk, then go to Step 6.

- 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 or feeling suicidal?" Identify at least three people with phone numbers unless SU declines.
- Ask "How likely is it that you would be able to reach out to each person?"
- If doubt is expressed about contacting others, ask "What might get in the way of reaching out to this person? Resolve roadblocks or brainstorm others to contact.

## **Identify Professionals and Agencies**

- Ask "Who are the mental health professionals that we should identify to be on your safety plan? List names and numbers." Identify at least one professional unless SU declines.
- Explain how to contact the relevant help lines.
- Ask "Where is the hospital or urgent care setting you can go in an emergency?" List address.
- Assess the likelihood they will contact each professional, agency, or crisis line; identify potential obstacles, and problem solve.

## **Implementation of the Safety Plan**

1. **Assess** the likelihood of the plan being used – "what are the barriers that might get in the way of using this plan?"
2. **Discuss** where the plan will be kept so it is easily accessible in a crisis.
3. **Evaluate** whether the format is appropriate for the SU's capacity and circumstances.
4. **Review and revise** the plan regularly:
  - Determine if the safety plan has been used.
  - Identify what has been helpful and what isn't helpful and why not? For example, forgetting to use it, how to use it, or where to find it.
  - Always review access to means and whether there is a need to remove means.

- Revise plan as indicated - remove unhelpful items, discuss with individual what may be more helpful. Note the changes on the plan or generate a new one if the changes are extensive.

## **Reviewing the Plan - Questions for Improving Steps**

### **Warning Signs:**

Can the warning signs be changed or revised to be more specific so that you will remember to use it?

Can you review the Safety Plan on a regular basis so that you will remember to use it?

Can the Safety Plan be placed somewhere so that it is more visible and serve as a reminder to use it?

### **Reasons to Live**

Are there new reasons to live that can be identified?

### **Keeping safe - Making the Environment Safer:**

Have you been able to make the environment safer by removing or restricting access to anything that could be potentially harmful to you?

Is removing alcohol or other drugs when you are feeling unsafe in your plan?

Is there anything else that could be done to make your environment safer?

### **What can I do by myself - Internal Coping Strategies:**

Are there new internal coping strategies that would be more effective or more feasible distractors?

Are there any coping strategies listed on your Safety Plan that should be removed because they weren't that helpful?

### **Who can I connect with - Social Contacts and Social Settings:**

Are there new people or social settings that would be more effective or feasible distractors?

Are there some people or social settings listed on your Safety Plan that should be removed because they weren't that helpful?

**My supporters - Social Support for Help with Crises:**

Are there other family members or friends who should be added?

Are there people listed on your Safety Plan who should be removed because they were unhelpful or unavailable?

**Professionals and Agencies:**

Are there other professionals or agencies that should be added or removed?

Were there any problems you experienced when you tried to contact a professional or agency for help?

*Remind them that thoughts about killing yourself are just thoughts.*

*You don't have to act on them, no matter how overwhelming they are or how often you have them.*

*You won't always have these thoughts. They are not who you are.*