

Safety Plan: Guidance Notes

Overview

It is important to be aware of how to help keep someone safe when they are at risk of suicide or self-harm. If you are supporting someone and they tell you that they are thinking about harming themselves then it may be appropriate to co-develop a safety plan to help them keep safe.

These guidance notes will help you understand the safety plan so that you feel better prepared to introduce the resource to someone who is at risk of suicide.

What is a Safety Plan?

A safety plan is a resource to help someone who has thoughts of self-harm or suicide to keep themselves safe from acting on their suicidal feelings.

The safety plan asks people to think of personal triggers or warning signs to suicidal thinking and to identify a range of specific plans and actions that will help to distract them from acting on suicidal feelings or urges. These include identifying internal coping strategies that they can use when they need to and thinking of people they can contact for support when in crisis. It finally encourages the person to consider how they can keep the environment around them safe.

A safety plan is designed to be straightforward and convenient to use so that it can be accessed easily when someone needs it most.

Who is a Safety Plan for?

A safety plan is for people who have thoughts of suicide or self-harm.

A safety plan can be used with younger people too. Younger people may be less experienced at coping with distressing thoughts and they could be more likely to engage in risky behaviour.

Who is a Safety Plan not for?

A safety plan is not for someone at imminent risk of suicide. For example, someone who feels they cannot keep themselves safe in the immediate future, such as the next few minutes or hours. In this case, emergency support should be contacted. This includes calling ambulance or police, attending A&E, or phoning the individual's GP.

A safety plan is not for people with cognitive impairments.

How can a Safety Plan help a person who has thoughts of self-harm or suicide?

In short, a safety plan acts as an 'emergency plan' designed to remind people that there are alternatives to acting on suicidal feelings. It offers personalised coping strategies and helps to prevent someone acting on suicidal thoughts or urges.

For most people suicidal thoughts tend to be short in duration, and these urges can come and go (although it depends on the person). The safety plan is a short-term resource to distract from thoughts of suicide until the person's urges ease and their typical day-to-day-mood returns. Therefore, a safety plan keeps the person safe in the moment when suicidal thoughts are at their most intense.

What does a Safety Plan consist of?

The safety plan has six steps. It is simple and easy to understand.

However, people can use their safety plan in different ways and each safety plan will be different and will only be relevant to only the person who owns it.

Some people may find it helpful to follow steps 1 to 6, in order. While others may skip steps or go back and forth. A good tip is to seek out the safety plan when warning signs of suicidal thoughts start to emerge. Step 1 of the safety plan helps the person identify what their personal warning signs are.

It is important to make sure the person can access their safety plan in a way that suits them when they need it most. Some people might want to take a picture on their phone, others might want to keep a printed copy.

The safety plan is not designed to be set in stone and it can be adjusted or changed over time.

What is a Safety Plan not?

The safety plan should not be a form filling exercise. A safety plan is entirely person-centred. Therefore, each and every safety plan will be different and relevant only to the person who owns it.

A safety plan is also not a long-term tool for mood monitoring.

Introducing the Safety Plan

If someone has told you they are having thoughts of suicide, you should first check that the person is not at imminent risk of suicide. If they feel they can keep themselves safe in the immediate future, you can introduce the safety plan.

When introducing the safety plan, you should explain what it is, explain the benefits of using one and emphasise that it can help to keep a person safe from acting on suicidal thoughts/urges.

If the person agrees, and it is within your role to do so, you can help to co-develop the safety plan.

You can access a blank copy of a safety plan on the Suicidal Behaviour Research Lab (SBRL) website. You may want to print some copies to have easily to hand.

Co-developing the Safety Plan

Usually, a plan should be co-developed between the person in crisis and a professional. You can help complete the safety plan if it is within your role to do so.

Co-developing a safety plan should be person-centred and completed collaboratively and compassionately.

Before starting the safety plan, you should try to understand the individual's story which led to suicidal thoughts. Teasing out what happened in the previous 24 hours will help to identify warning

signs, as well as specific strategies or behaviours that may help to alleviate the crisis. This discussion will help you to collaboratively identify what to write down for each step of the safety plan.

You should talk through each step with the person and check in regularly to make sure they are feeling okay.

When making a safety plan, you should try to encourage the person to think of any barriers to the strategies and supports they have identified. It is important that there are as few obstacles as possible to them using their safety plan.

Sharing information with other relevant services or individuals

At each stage of responding to someone in distress, the individual should be fully informed to enable them to make the best decision they can about whether they would like to involve others.

Some individuals may feel it would be helpful to share a copy of their completed safety plan with their support network. It is good practice to ask if the person is willing to share a copy of their safety plan with the individuals they list in Step 4 of the safety plan. This is because they are the contacts that the person has identified as safe and trusted and who they would feel comfortable talking to about their suicidal thoughts.

It is important to remember that a safety plan should only be completed if there is no urgent risk of suicide. If the person is imminently intending to harm themselves then you should seek emergency support. Such as calling ambulance or police, attending A&E, or phoning the individual's GP.

Next steps...

Initially it may feel daunting to help someone develop a safety plan. This is normal. One way to help overcome this is to role play. You may want to try role playing introducing and co-developing a safety plan with a colleague. Role-playing is a good way of practising, and it can often make you feel more comfortable when it comes to a real interaction.

It is also important to take care of yourself after supporting someone else, so please remember to engage in self-care.

Further guidance

If you feel like you need further guidance on co-developing a safety plan you can access further advice via:

- The Samaritans website [here](#)
- This guidance is based on *When It Is Darkest. Why People Die by Suicide and What You Can Do To Prevent It* by Professor Rory O'Connor
- Staying Safe from Suicidal Thoughts website [here](#)

My Safety Plan

Safety plan tip: It is important that the person feels they have ownership over each part of their safety plan. Take a person-centred approach and try to make sure the actions the person sets out are written in their own words and are do-able for them.

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

1. Lack of sleep
2. I start to feel defeated
3. I isolate myself from my friends

Ask the person what sorts of things they notice when they begin to feel suicidal? Consider thoughts, mood, and behaviour

Step 2: Internal coping strategies - things I can do to take my mind off my problems (relaxation, activity)

1. I walk my dog
2. I watch Friends on Netflix
3. I take a relaxing bath

These are strategies the person can use on their own, without needing help from anyone else. Ideally, think about internal strategies that are easily accessible regardless of location or time of day

For step 3, try to identify people and social settings that can act as distractions to suicidal thoughts/urges. These don't have to be contacts that the person feels comfortable knowing about their suicidal feelings or emotions

Safety plan tip: try to encourage the person to avoid writing down people or places that are unhelpful and could make things worse. For example, bars or nightclubs, environments where alcohol or drugs are in use/available, or gambling settings.

Step 3: People and social settings that provide a distraction

Name Have coffee with my friend Mark

Phone

Name I go to the gym

Phone

Step 4: People who I can ask for help

Name My best friend Amy

Phone

Name My mum

Phone

Step 4 asks people to write down support contacts who they would feel comfortable speaking to about their suicidal feelings. These should be safe and trusted individuals who they can talk to while in crisis.

Safety plan tip: Some people will have limited personal support options available to them, therefore the safety plan tool should be used sensitively with a person experiencing distress.

Step 5 is a list of professionals and agencies the individual can contact when suicidal thoughts start to develop.

Safety plan tip: It is important at each stage to check whether there are barriers and what the likelihood is that the person will use each strategy during a crisis.

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

Name	<i>NHS Crisis Service</i>	Phone	
Emergency Contact			
Crisis Service Phone			
Crisis Service Address			

Step 6: Making the environment safe

1. *Lock away all ties or potential ligature material*
2. *Keep my prescription drugs on a high shelf*
3. *Avoid the route home where I pass the bridge*

Helpline support (freephone): **Samaritans 116 123**

Breathing Space **0800 83 85 87**

You may want to introduce step 6 by having a conversation about what the person may use to hurt themselves when in a suicidal crisis and explore whether these things are available to them. How can we make these things safer? For example, removing items or restricting access.

Safety plan tip: The more detailed this section, the more likely the individual will be able to stick to it and ultimately keep themselves safe