

# Safety Planning Livestream

8<sup>th</sup> June 2020

# Acknowledgement of Country

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## Acknowledgement of People with a Lived Experience

## Support services

### Adult

**Lifeline:** [13 11 14](tel:131114)

[lifeline.org.au](http://lifeline.org.au)

**Suicide Call Back Service:** [1300 659 467](tel:1300659467)

[suicidecallbackservice.org.au](http://suicidecallbackservice.org.au)

**Beyond Blue:** [1300 224 636](tel:1300224636)

[beyondblue.org.au/forums](http://beyondblue.org.au/forums)

**MensLine Australia:** [1300 789 978](tel:1300789978)

[mensline.org.au](http://mensline.org.au)

### Youth

**Kids Helpline:** [1800 551 800](tel:1800551800)

[kidshelpline.com.au](http://kidshelpline.com.au)

**headspace:** [1800 650 890](tel:1800650890)

[headspace.org.au](http://headspace.org.au)

**ReachOut:** [ReachOut.com](http://ReachOut.com)

### Other resources

**Head to Health:** mental health portal

[headtohealth.gov.au](http://headtohealth.gov.au)

**Life in Mind:** suicide prevention portal

[lifeinmindaustralia.com.au](http://lifeinmindaustralia.com.au)

**SANE:** online forums [saneforums.org](http://saneforums.org)

[healthinonet.ecu.edu.au](http://healthinonet.ecu.edu.au) - Aboriginal and Torres Strait Islander

[1800 184 527](tel:1800184527) [qlife.org.au](http://qlife.org.au) - Lesbian, gay, bisexual, trans, and/or intersex

[mhima.org.au](http://mhima.org.au) - Culturally and linguistically diverse



**Mindframe**

An initiative of



**EVERYMIND**



**@MindframeMedia**

**[mindframe.org.au](http://mindframe.org.au)**

# Mind Health

## New Low Intensity Mental Health Service

MindHealth is a free phone and online counselling service for the people of the Hunter New England and Central Coast regions who are feeling the pressures and stresses of everyday life. We have professionally trained counsellors who will listen and help you to develop strategies to manage what is causing you to feel stressed or overwhelmed.

### **Our free counselling service can help with:**

- Worry and Anxiety
- Anger
- Hopelessness and Depression
- Drug and Alcohol Abuse
- Grief and Loss
- Isolation and Loneliness
- Relationship and Family Problems
- Suicidal Thoughts
- Wellbeing
- Work Stress.



You can call us between 7am and 9pm Monday to Saturday on **1300 092 131** or register for online counselling at [mindhealth.org.au](http://mindhealth.org.au)

You don't need a referral, so you can make the call at a time that suits you.

# Background to Webinar

[www.sbs.com.au › news › australia-s-suicide-rate-could...](http://www.sbs.com.au/news/australia-s-suicide-rate-could-surge-due-to-economic-fallout-of-coronavirus)

**Australia's suicide rate could surge due to economic fallout of ...**  
May 7, 2020 - Lifeline have seen a 25 per cent **increase** in calls compared to last year, while Beyond Blue has seen a 40 per cent **rise** since the pandemic ...

[www.theaustralian.com.au › nation](http://www.theaustralian.com.au/nation)

**Coronavirus Australia: suicide's toll far higher than virus**  
May 7, 2020 - **Suicide rates** in **Australia** are forecast to **rise** by up to 50 per cent due to ... are expected to be particularly vulnerable to an **increase** in **suicide**.

**SBS News Australia**  
**Coronavirus crisis spurs more Australians to reach out for mental health services**

24 April 2020

**Mental health services need to prepare for a rise in suicides due to COVID-19**

The mental health system is urging governments around the world to prepare in case there is an increase in numbers of suicides due to the global pandemic.

NEWS

**Sharp suicide increase expected due to pandemic**

This has led to calls for urgent government attention amid fears it could spawn a 'generational mental health crisis'.

# Introduction of Presenters

- **Dr Katie McGill**  
Suicide Prevention Research Manager – Hunter New England LHD
- **Dr Kathy O’Grady**  
General Practitioner (GP)
- **Jane**  
Lived Experience Representative
- **Danielle Adams**  
Operations Manager, The Way Back Support Service

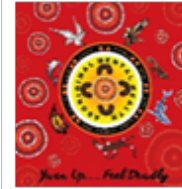
# Questions and Feedback for Tonight's Livestream

Join at **slido.com**  
with code

# SPSP1



**slido**



# Safety Planning for Suicide Prevention

## HNECC Primary Health Network Livestream

### July 2020

Dr Katie McGill  
Towards Zero Suicides Team  
Hunter New England Mental Health Service

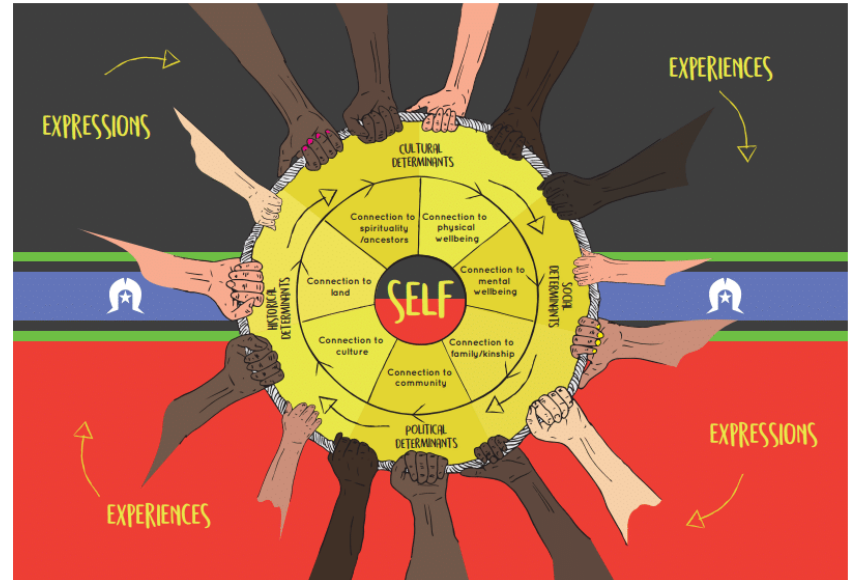




# Welcome



- Acknowledgements
- Introduction
- Plan
  - What is a safety plan?
  - When do you do a safety plan?
  - Why do you do a safety plan?
  - How do you do a safety plan?
  - Tips and tricks



Gee, Dudgeon, Schultz, Hart & Kelly, 2013 on behalf of the Australian Indigenous Psychologists Association.  
Adapted by Jacob Komesaroff from original art by Tristan Schultz, RelativeCreative

# HealthPathways- suicide intent & ideation



- Suicide intent and ideation
- Orientation to what to do including:
  - When to ask
  - What to ask about
  - How to ask
  - Available supports

The screenshot displays the Hunter New England Community HealthPathways website. The browser address bar shows the URL: <https://hne.communityhealthpathways.org/27773.htm>. The page title is "Suicide Ideation and Intent". The left sidebar contains a navigation menu with categories like "Home", "COVID-19", "About HealthPathways", "Daily Updates", "Acute Services", "Allied Health Referrals", "Child Health", "Care in the Last 12 Months of Life", "Investigations", "Lifestyle & Preventive Care", "Medical", "Mental Health", "ADHD in Children and Young People", "Anxiety in Adults", "Bereavement", "Bipolar Disorder", and "Borderline Personality Disorder (BPD)". The main content area is titled "Suicide Ideation and Intent" and includes a "Red flags" section with a list of warning signs: "A plan with or without preparations or a recent attempt", "Inability to identify supports", "Recent bereavement, particularly from suicide", "Recent hospital admission for mental health treatment", and "Substance use and/or in process of withdrawal". Below this is a "Background" section with a link "About suicidal ideation and intent" and an "Assessment" section with a "Practice point" and "Limitations of suicide risk assessment". The right sidebar contains "ABOUT THIS PAGE" information, including "Contributors", "Sources", "Page information", and "Topic ID: 52616". The bottom of the page shows a Windows taskbar with the date and time: 10:22 PM, 6/07/2020.

# What is a safety plan?



- **Collaboratively developed structured plan** for responding to suicidal thoughts/ feelings/ distress
- Includes a list of strategies that **help to keep someone safe when they are suicidal**
- It is NOT:
  - A contract
  - A guarantee of safety
  - Helpful if not done collaboratively

# Who are safety plans relevant for?



- Everyone!
- But particularly people who are feeling suicidal or experiencing urges to hurt themselves.



# Why are safety plans recommended?

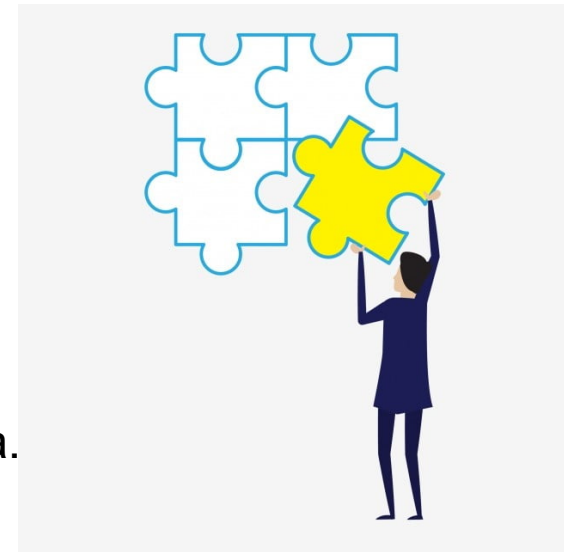


- Associated with **reduced suicidal/self-harm behaviours** at follow-up (when completed with people who have presented to ED).
- **Part of treatments shown to be effective** in reducing suicidality or reducing suicidal behaviours (e.g. CAMS)
- “Lethal means counselling” part of **clinical guidelines** for supporting people who are suicidal

# How do you do a safety plan?



- Should be **part of care** but should not be the only care provided.
- Should be created at a time when the person is relatively well and calm (i.e. **not in acute crisis**).
- Is **done collaboratively** between a health professional and the person.
- Will only be effective if person is **engaged** with the idea.
- Should be **reviewed and modified** regularly
- Should be **realistic and easy to access** in real life.



# So what's involved in developing a safety plan?



- **Warning signs & triggers** e.g. having trouble sleeping, withdrawing socially
- **Reasons to live** e.g. a pet, special person
- **Creating a safe environment** e.g. having someone else in charge of medication, removing anything that could be used to harm a person
- **Personal (internal) coping strategies** (to distract, soothe, connect) e.g. listening to music, baking, activity with a friend
- **Support people who can offer help** e.g. friends, family
- **Professional support** e.g. GP, Mental Health Service, private Psychologist
- **Crisis support lines** e.g. Lifeline, Suicide Call Back Service



# What do they look like?



## You're good to go!

Get started with your plan so that you can use it the next time you're feeling unsafe.

**Patient Safety Plan Template**

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

1. Persistent dreams about past traumatic life events
2. Continuous, uncontrollable pre-occupation w/ past memories
3. Major life events, family deaths/losses that can trigger my PTSD

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. Prepare a big homemade meal & invite friends over
2. Go for a walk & listen to my favorite tunes
3. Create bead art

Step 3: People and social settings that provide distraction:

1. Name: Pie w/ Andrea	Phone: _____
2. Name: Coffee & Bead time w/ Tracy	Phone: _____
3. Place: Chickasaw Cultural Center	4. Place: Roadtrip w/ _____

Step 4: People whom I can ask for help:

1. Name: Johnna	Phone: _____
2. Name: Jennifer	Phone: _____
3. Name: Christopher	Phone: _____

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

1. Clinician Name: _____	Phone: _____
Clinician Pager or Emergency Contact #: _____	Phone: _____
2. Clinician Name: _____	Phone: _____
Clinician Pager or Emergency Contact #: _____	Phone: _____
3. Local Urgent Care Services: _____	
Urgent Care Services Address: _____	
Urgent Care Services Phone: _____	
4. Suicide Prevention Lifeline Phone: 1-800-273-TALK (8255)	

Step 6: Making the environment safe:

1. Always dispose of leftover prescription medications
2. Limit exposure to negative/toxic people - keep relationships healthy

Safety Plan Template ©2008 Barbara Stanley and Gregory K. Brown. It is reprinted with the express permission of the authors. No portion of the Safety Plan Template may be reproduced without their express, written permission. You can contact the authors at [bsl@columbia.edu](mailto:bsl@columbia.edu) or [gkbrown@u.washington.edu](mailto:gkbrown@u.washington.edu)

The one thing that is most important to me and worth living for is:  
Family - I want to honor my family & be a good ancestor for my descendants

**My safety plan**

### 1. My warning signs

Warning signs are changes that let you know you're heading into a crisis. Knowing your warning signs can help you act early.

Here are some examples of warning signs

- I feel hopeless
- sleeping is hard
- I don't want to talk to anyone
- I feel like a burden
- I'm struggling to keep up with my normal routine
- I'm fighting with people
- I feel like I don't belong, or I won't be accepted.

If you're finding it tricky to identify your warning signs, it might be helpful to talk this through with someone you trust.



# Developing a safety plan 1- RISK TIMES



## Personal triggers

- Are there any specific situations or people that you find stressful or triggering, or that contribute to your suicidal thoughts?
- e.g. fighting with partner



## Warning signs

- What are some of the difficult thoughts, feelings or behaviours that you experience leading up to a crisis?
- e.g. having trouble sleeping





## Reasons to live

- What's the most important thing in your life?
- What things in your future do you look forward to?
- e.g. a pet



# Developing a safety plan 3- SAFE ENVIRONMENT



## Creating a safe environment

- What things do you have access to that are likely to be used in a suicide attempt?
- What could be put in place to limit your access to these means?
- e.g. having someone else in charge of medication



## Limiting substance use

- What would help reduce your use of alcohol and/or other drugs?
- e.g. not keeping any alcohol at home



# Developing a safety plan 4 - COPING STRATEGIES



## Individual

- What can you do to help take your mind off your problems, even for a short amount of time?
- e.g. breathing exercises

## Social

- Who helps you to feel good when you socialise with them?
- e.g. watching TV with a friend
- Where can you go and be around other people in a safe environment?

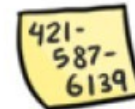
e.g. A coffee shop

## EMERGENCY CARE WALL

for sadness

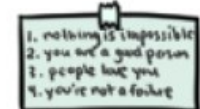


for loneliness



best friend's  
phone #

for self-doubt



list of reasons  
why you can

for anger



for worry



for other



# Developing a safety plan 5- SUPPORTS



## Supports

- Family and friends
- Who could you talk to when you're having suicidal thoughts?
- Professional supports
- Which services could you turn to for support?
- e.g. GP
- 24/7 crisis lines e.g. Lifeline

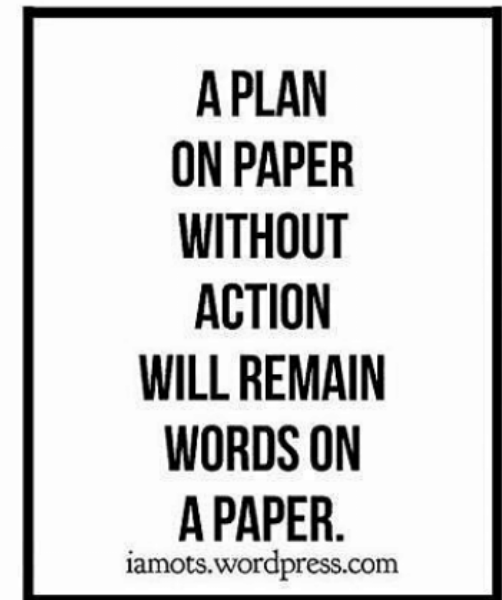


24/7 Mental Health Services	
<b>Beyond Blue</b> <i>Anyone feeling anxious or depressed</i> beyondblue.org.au 1300 22 4636	<b>Kids Helpline</b> <i>Counselling for young people aged 5 to 25</i> kidsline.com.au 1800 55 1800
<b>MensLine Australia</b> <i>Men with emotional or relationship concerns</i> mensline.org.au 1300 78 99 78	<b>Open Arms</b> <i>Veterans and families counselling</i> openarms.gov.au 1800 011 046
<b>Lifeline</b> <i>Anyone having a personal crisis</i> lifeline.org.au 13 11 14	<b>Suicide Call Back Service</b> <i>Anyone thinking about suicide</i> suicidecallbackservice.org.au 1300 659 467
<b>Is it an emergency?</b> If you or someone you know is at immediate risk of harm, call triple zero (000)	
healthdirect	

# Remember...



- Only useful if person is **engaged** in the development and uses the plan
- Only useful if the plan includes **feasible & available/ accessible options**
- Can be a good way to **assess safety and cover relevant info**
- **Good bridge** before linking in with a mental health professional
- Should be **shared** with all the key supports (e.g. family member, GP, mental health professional)



Repost @motivation.js

# After the plan is done....



- **Make sure the person has a copy** handy
- Take a copy and **put it in the clinical notes**
- **Share it** with the relevant people (and/or test it)
- **Do follow up if needed** (e.g. making environment safe)
- Make sure you **review it** when you next see them- what worked, what didn't, what should be modified

# Resources



- BeyondNOW- safety planning app
- <https://stayingssafe.net/>
- Information resources:
  - RACGP- Suicide safety planning in general practice
  - GPMH Standards Collaboration resource  
<https://www.racgp.org.au/FSDEDEV/media/documents/Education/GPs/GPMHSC/Suicide-prevention-and-first-aid-a-resource-for-GPs.pdf>
  - BMJ Best Practice article
- Education & Training:
  - Black Dog Institute's Advanced Training in Suicide Prevention & Talking About Suicide in General Practice
- Advice:

GP Psychiatry Line 1800 16 17 18





# Safety Planning in Practice

Dr Kathy O'Grady

# June 2018

- ▶ Case: Molly 16 year old
  - ▶ 6 month history of MDD treated with Fluoxetine
  - ▶ Presented to ED after an overdose of 3xFluoxetine + alcohol
  - ▶ Low mood, hopelessness, feeling a burden to loved ones – few hours duration



# Case Study Molly

- ▶ Management – psychoeducation
  - ▶ Warning signs
  - ▶ Help seeking
  - ▶ Locking up meds
  - ▶ Referral to CAMHS

# July 2018

- ▶ Presented to GP with suicidal ideation
- ▶ Safety planning commenced



# Safety Plan

## ► Support People

- Mum
- Billie
- Kellie
- Danielle

## ► Limiting Means

- Locked box for Medications
- Put away razors

## ► Warning Signs

- Feeling negative about self
- Negative thinking

## ► Helpful Strategies

- Take dogs for a walk
- Watch TV
- Calling friends
- Driving

## ► Reasons to Live

- Family

# October 2018

- ▶ Overdose Fluoxetine x 20 caps
- ▶ Fight with mum
- ▶ Death of friend in MVA
- ▶ Didn't think about Safety Plan
- ▶ Ambivalent about surviving



# Review of Safety Plan

## ► Support People:

- Mum
- Billie
- Kellie
- Nan

## ► Triggers:

- Mum being angry
- Not enough sleep
- People asking if I'm OK
- Conflict

## ► Warning Signs:


- Feeling negative about self
- Negative thinking

## ► Helpful Strategies:

- Taking dogs for a walk
- Watching TV
- Calling friends
- Driving
- Listening to music
- Sitting out the back with the dogs
- Eating
- Crystals

## ► Reasons to live:

- Family
- Becoming a beauty therapist
- Having a family
- Best friend Kellie

- 
- ▶ Over the following months, no suicidal ideation or intent despite triggers – fighting with mum, breaking up with boyfriend, friendship and work difficulties



# June 2019

- ▶ 3<sup>rd</sup> Fluoxetine overdose
- ▶ Broke up with boyfriend
- ▶ Home alone and distressed

# Revised Safety Plan

## ► Support People:

- Kellie
- Mum
- Billie
- Jonah
- Dave

## ► Reasons to live:

- Family
- Work in childcare
- Having a family
- Best friend Kellie

- Focus on what stopped her contacting her emergency contacts before overdose
- Impulsivity



# Sept 2019: Updated Safety Plan:

## ▶ Support People:

- Kellie
- Sascha
- Mum
- Zane

## ▶ Triggers:

- Mum being angry
- Being unhappy at work

## ▶ Warning signs:

- Feeling negative about self
- Negative thinking
- Panicking
- Despair about the future

## ▶ Reasons to live:

- Family
- Travel
- Having a family
- Having an enjoyable job

# Safety Planning – what works

- ▶ ↑ Confidence and ↓ anxiety for both Practitioner and Client/Patient
- ▶ Gives hope
- ▶ Builds understanding of triggers, warning signs and strategies that help
- ▶ Empowers client/patient and builds autonomy



# Practical Pitfalls

## Client/Patient

- ▶ Remembering the Safety Plan exists
- ▶ Having the confidence to use it
- ▶ Having clear expectations for the role of each support person
- ▶ Reticence to work on the plan when Client/Patient is feeling good

## Clinician

- ▶ Keeping the Safety Plan up to date
- ▶ Communication between professionals
- ▶ Reticence to work on the plan when Client/Patient is feeling good