

## Safety Planning During the COVID-19 Pandemic

The current outbreak of COVID-19 may significantly impact Veterans' ability to engage in previously identified coping strategies on a Safety Plan (i.e., socializing with family or friends, seeking out public locations, etc.). It is important to review and modify Safety Plans with Veterans to identify additional resources for coping and maintaining safety during this challenging time.

This document contains reminders and suggestions for facilitating a discussion with a Veteran about modifications to their Safety Plan during the COVID-19 outbreak. The information provided below is considered to be supplemental to the detailed instructions described in *The Safety Planning Intervention Manual: Veteran Version* (Stanley, Brown, MacRae, Rotolo, Hughes, Mina & Barry, 2018; see [www.suicidesafetyplan.com](http://www.suicidesafetyplan.com) for more information).

### **Step 1 of the Safety Plan: Warning Signs**

- Are there new warning signs associated with COVID-19 (such as extreme fear of illness, coping with illness in self or with others, social isolation or loneliness or increased family conflict) that indicate beginning or escalation of a suicidal crises?
- Determine if there are any other warning signs that indicate an escalation of a crisis and serve as a reminder to use the Safety Plan as described in the Safety Planning manual.

### **Step 2 of the Safety Plan: Internal Coping Strategies**

- Ensure that internal coping strategies are still feasible under COVID-19 restrictions (e.g., stay-at-home orders). Modify strategies as needed or develop new ones.
- Make sure that internal coping strategies do not inadvertently increase suicide risk (such as watching the news or browsing social media).
- As with all coping strategies listed on the Safety Plan, make sure that strategies are individualized, feasible, and likely to be helpful for decreasing risk; explore barriers.
- Remind Veteran of the [Virtual Hope Box](#) app or describe how to create a physical Hope Box to keep in their home.

### **Step 3 of the Safety Plan: Social Contacts who may Distract from a Suicidal Crisis**

- Given physical distancing and stay-at-home recommendations, check with the Veteran to see if they understand how to contact friends and/or family via the phone and explore other potential communication methods such as Skype, FaceTime, Instant Messaging, Zoom, texting, interactive online games/hobbies, etc. Encourage these virtual options whenever it is feasible to do so.
  - Help to brainstorm ideas for virtual distraction and normalize that many people are home now feeling isolated and therefore may also welcome a distraction.
  - Help Veteran brainstorm ideas for virtual meeting spaces they may not have considered in the past or that didn't exist prior to COVID-19.
    - Alcoholics Anonymous (<https://www.aa.org>)
    - A. A. Online Intergroup ([www.aa-intergroup.org](http://www.aa-intergroup.org))
    - Narcotics Anonymous ([www.na.org](http://www.na.org))
    - Self-Management and Recovery (<https://www.smartrecovery.org/community/calendar.php>)
    - Online church or spiritual services
  - Help Veteran to identify places outside of their home they can safely access while practicing social distancing.
    - Parks, hiking trails, other walking areas with wide sidewalks and a limited number of pedestrians

- Grocery stores and pharmacies (if practicing social distancing and using proper precautions with hand washing)

#### **Step 4 of the Safety Plan: Family Members or Friends Who May Offer Help**

- Explore alternative methods of communication for reaching out to family members or friends; Test and troubleshoot methods to determine feasibility and barriers.

#### **Step 5 of the Safety Plan: Mental Health Professionals**

- Explore Telehealth or virtual health care services with patient's providers and assess feasibility.
- Review all methods of contact for reaching out to providers, Veteran Crisis Line, or hospitals; determine preferred method of contact.
  - Remind the Veteran of the procedure for accessing Urgent Care and/or Emergency Department (ED) if needed and discuss any changes to expect with COVID-19 screening at the hospital entrances.
- Obtain feedback about the feasibility or expectations of going to the hospital, ED or urgent care setting.
  - Reassure the Veteran that the hospital remains open and review best practices in your clinic for accessing you or a team member if you'll be working from home.

#### **Step 6 of the Safety Plan: Keeping the Environment Safe**

- Review safe storage options for all potential lethal means including firearms and medications as described in the Safety Planning manual. For firearms, safe storage includes keeping firearms locked and unloaded and storing ammunition in separate location.
- Assess whether the patient is following recommended guidelines to reduce risk of COVID infection and whether patient is engaging in any unnecessary risk-taking behavior.

#### **Implementation of Safety Planning**

- Discuss options for secure delivery of the completed Safety Plan, including mail, secure/encrypted email, MyHealthVet (for Veterans receiving VA care), or Safety Plan App.
- Discuss locations of written and virtual Safety Plans so that they are easily accessible.
- Assess the Veteran's expectations regarding the likelihood that the Safety Plan will be used or help and explore any barriers.
- Discuss sharing of Safety Plans with family members or friends and how the plans will be shared.
- Arrange for Telehealth follow-up to determine if the Safety Plan has been used, was helpful or needs revision, and to review whether action plans for safe storage of lethal means have been followed.

#### **Provider Resources**

##### **Suicide Risk Management (SRM) Consultation Program**

<https://www.mirecc.va.gov/visn19/consult/>

##### **Safety Plan Feature in PTSD Coach App**

[https://www.ptsd.va.gov/appvid/mobile/ptsdcoach\\_app.asp](https://www.ptsd.va.gov/appvid/mobile/ptsdcoach_app.asp)

##### **Mobile Behavior Design Lab**

<http://www.myvaapps.com/>