Safety Planning Tips for Remote* Suicide Risk Assessment with Youth

HOPElab

*Remote environments include online communication platforms (e.g., Zoom, Teams) and/or the phone.

When conducting a remote suicide risk assessment (e.g., via Teams, Zoom, phone):
- The basic steps are the same as for in-person risk assessment
- Some pre-planning is required to make a smooth transition to remote assessment

Before Safety Planning

- Determine risk level
- If risk is not immediate, establish a safety plan

If approved by your division, consider virtual safety planning tools such as the My3 app

Establishing a safety plan

- Ensure mutual collaboration

Consider screen sharing

- Ensure youth and caregiver have a copy of the safety plan

Share the safety plan in a way that is accessible for youth/caregiver and complies with school division policy

Consider

- Access to lethal means (e.g., medication, firearms)
- Additional COVID-19 related risk factors (e.g., social isolation, family financial stress)
- Coping strategies that can be done during COVID-19 (e.g., virtual activities, virtual connection with friends)
- Including contact information for 24-hour resources

Caregiver Considerations

- Follow school division policy for caregiver involvement
- Provide clear guidelines on how caregivers can manage risk at home and make sure they know how to seek appropriate help
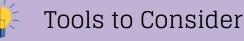- Consider planning with caregivers on how they can access support for themselves

Maintaining a safety plan

- More frequent check-ins may be necessary in the remote environment
- Check-ins can be used to review and update the safety plan

Tools to Consider

- A short screener for monitoring risk remotely
- Pre-established times for check-ins
- An app to rate mood/suicidal ideation daily

Safety Planning and Risk Assessment with Priority Populations

Male Youth

- Use male friendly language (e.g., action based, focus on goals)
- Emphasize a problem-solving focus

Rural youth

- Be aware of unique stressors (e.g., isolation, lethal means)

Indigenous Youth

Understand youth's connection to Indigenous culture and **when appropriate:**

- Use holistic health language (e.g., medicine wheel)
- Consider physical, mental, emotional, and spiritual aspects of well-being
- Consider balance across different aspects of well-being
- Consider individual, family, community, and societal factors
- Consider views on suicide among local Indigenous communities
- Follow DSM-5 guidelines for working with culturally diverse peoples

Unique risk factors
- Discrimination, isolation on reserves and suicide clusters
- Structural risk factors (e.g., racism, discrimination)
- Intersecting identities (e.g., for a two-spirit Indigenous youth) can be a risk or protective factor

Newcomer, immigrant and refugee youth

- Consider screening tools that are culturally relevant for refugees
- Consider factors that can impact refugee communities (e.g., language barriers, PTSD)
- If appropriate for the youth, incorporate family-based mental health support

LGBTQ2SIA+ youth

- Stigma can precede distress for LGBTQ2SIA+ youth
- Consider intersecting identities (e.g., two-spirit Indigenous youth)
- Consider individual differences, cultural diversity, and sexual preferences
- Understand unique risks and protective factors in their social context