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| **NM High-Fidelity Wraparound ~** **SAFETY and STABILITY PLANNING GUIDE AND FORM** |

A safety and stability event can be defined as a situation that exceeds one’s coping mechanism and puts them or others at risk. A Safety and Stability plan is designed to keep people safe when there is a safety and stability event. These events usually follow a cycle characterized by three stages that can be used to develop a Safety and Stability plan:

* **Predict:** This stage is one where information is gathered to understand an individual’s strengths, supports, and what gets triggered inside of them? (Wraparound calls it the cognition or underlying need.)
* **Prevent:** This stage is characterized by connecting strength-based interventions and supports to safety and stability event triggers to deescalate potential safety and stability events.
* **Protect:** This is a proactive stage to minimize the results of an escalated safety and stability events. It answers the question of “What steps to take when a situation escalates to a safety and stability event?” It alerts the individual’s supports as to how to keep that person and themselves safe and how to help to bring that person back to baseline.

**Developing a Safety and Stability Plan**

* Developing a safety and stability plan is not unlike the process of gathering the family story and action planning. It starts with understanding the narrative the family has about past safety and stability events, both their history and current manifestations. The more the plan can come from authentic conversation, the more effective the plan will be.
* A Safety & Stability Plan should be completed:
	+ Within 15 days of enrollment
	+ Within 48 hours of a safety and stability event occurring. This is done at an emergency team meeting.
	+ Whenever a new safety and stability concern is identified. Use the Safety and Stability Planning Risk Assessment (located on page 2) as a guide to determine when a plan is needed.
* Any plan must be reviewed and updated in the Team Meeting and added to the Safety Domain on the Action Plan. Team meetings occur at a minimum of every 30 days.
* Depending on the needs of the youth or family, there may be local, state, or national hotlines that could be useful. Research and check out any that may be helpful and share with your family. The number can then be put in the safety plan.

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| **If a Safety and Stability Event Occurs** |

* If a team is in place, it should convene within 48 hours (as many team members as possible should participate– on phone if necessary) to review what happened and update the plan.
* If the safety and stability event occurs during engagement, before a team is in place, the facilitator should complete an immediate plan with the youth/family and then develop the preventive plan to be reviewed at the first Team Meeting. While the wording of this plan is directed at youth, the plan can be completed for any family member when safety and stability of the household are of concern.

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| **Safety/Stability Planning Risk Assessment** |
| **Describe the behavior that causes safety or stability concerns, then assess where it fits on the grid below.** |
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| **Likelihood of Occurrence** | **Impact/Severity** |  |
| **Major Life Changing** | **Very Serious** | **Marginal** | **Minimal** |
| **Predictable** |  |  |  |  |
| **Probable** |  |  |  |  |
| **Possible** |  |  |  |  |
| **Remote** |  |  |  |  |
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| **Safety/Stability Plan Required Immediately** | **Safety/Stability Plan Required within 15 days** | **Safety/Stability Plan updated at the next team meeting** | **Hidden Strength**  |
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| **NM High-Fidelity Wraparound ~ Safety and Stability Planning Narrative** |

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| **PREDICT** |
| 1. **What behaviors do you engage in (or that happen to you) that might be considered a Safety & Stability event or unsafe to yourself or others? (e.g.: cutting, drugs, running away, fighting, etc.)**
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| 1. **Are there any medical concerns or conditions related to your safety concerns (e.g.: recent injuries, surgeries, med changes, serious allergies, pregnancy, etc.)**
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| 1. **What are some past events that were triggers for thoughts that have led to the behaviors you identified? (e.g.: getting a bad grade, friend mad at you, fighting with parents, etc.)**
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| 1. ***Early cognitive warning signs:* What are the *thoughts* & feelings you experienced before you engaged in the behaviors you identified? (e.g. invalidated, sad, angry, shamed, lonely, etc.)**
 |
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| **PREVENT** |
| 1. ***Early behavioral warning signs:* What are some behaviors you might display before you engage in the “unsafe” behaviors you identified? (e.g. getting mad more easily, irritable, isolating, not eating, etc.)**
 |
|  |
| 1. **What are some of your strengths that help you get through difficult times like this?**
 |
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| 1. **Who can help to prevent things from escalating? Who are you most likely to reach out to? What have they done that was helpful?**
 |
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| **PROTECT** |
| 1. **Who can help deescalate if a safety and stability event occurs? Who are you most likely to reach out to? What have they done that was helpful? (e.g.: sitting with you, listening to you, distracting you, etc.)**
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| 1. **Is there something that others have done in the past in a safety and stability event that did not feel helpful? (e.g.: telling you to get over it, yelling at you, being intrusive, etc.)**
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| 1. **How would others know when the safety and stability event was over? (What would they be able to observe?)**
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| **NM High-Fidelity Wraparound – Safety and Stability Plan** |

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| **What current events in your life may lead to unsafe behavior or a Safety and Stability Event?** **(For example, how Box 3 led to Box 1)** | **What gets triggered inside of you? (Wraparound calls it the cognition or underlying need)** **\*refer to box 4** | **What actions can you and others do to diffuse what was triggered inside of you? (number them starting with the least restrictive and least intrusive, include contact information if relevant)** **\*refer to box 6 and 7 as one of many sources** | **If what was triggered is not diffused what can I and others do to create safety and to prevent things from getting worse. (number them starting with the least restrictive and least intrusive, include contact information)** **\*refer to box 8, 9 and 10 as one of many sources** |
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| **NM High-Fidelity Wraparound ~ Safety and Stability Planning Narrative** **Completed Example** |

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| **PREDICT** |
| 1. **What behaviors do you engage in (or that happen to you) that might be considered a Safety & Stability event or unsafe to yourself or others? (e.g.: cutting, drugs, running away, fighting, etc.)**
 |
| Sometimes I cut on my arms too deeply and it becomes dangerous |
| 1. **Are there any medical concerns or conditions related to your safety concerns (e.g.: recent injuries, surgeries, med changes, serious allergies, pregnancy, etc.)**
 |
| A couple of years ago I got an infection from cutting. Nothing now.  |
| 1. **What are some past events that were triggers for thoughts that have led to the behaviors you identified? (e.g.: getting a bad grade, friend mad at you, fighting with parents, etc.)**
 |
| When someone has disrespected meWhen I broke up with my girlfriend |
| 1. ***Early cognitive warning signs:* What are the *thoughts* & feelings you experienced before you engaged in the behaviors you identified? (e.g. invalidated, sad, angry, shamed, lonely, etc.)**
 |
| I think I am nothing and nobody and worthlessI think that my life is hopelessI feel numb and like I am an empty shell |
| **PREVENT** |
| 1. ***Early behavioral warning signs:* What are some behaviors you might display before you engage in the “unsafe” behaviors you identified? (e.g. getting mad more easily, irritable, isolating, not eating, etc.)**
 |
| WithdrawalI push everyone awayI play my music extra loudI look for reasons to argue or fight |
| 1. **What are some of your strengths that help you get through difficult times like this?**
 |
| I can talk about me feelings in the right setting. I have a couple of good friends who know how to talk to me when I get like this. Also, I have good team members who I trust.I can express some of my darker feelings by writing poetryI can distract myself and change my feelings by playing guitarI am disciplined about taking care of myself. For example, I like to work out at the gym (not a member now because of no money) |
| 1. **Who can help to prevent things from escalating? Who are you most likely to reach out to? What have they done that was helpful?**
 |
| My friends Carlos and Jason know how to talk and listen to me and are always up to take a walkMy therapist Kelly Green is supportive and does not judge me and will return my callsMy wrap facilitator Arturo Calderon knows what to do, but I don’t feel pushed into doing things I don’t want to do. |
| **PROTECT** |
| 1. **Who can help deescalate if a safety and stability event occurs? Who are you most likely to reach out to? What have they done that was helpful? (e.g.: sitting with you, listening to you, distracting you, etc.)**
 |
| My aunt Evie talks to me without making me feel worse than I already doMy mom will leave work and come home. She is a good cookCarlos is taking EMT classes and has first aid trainingArturo is good at having ideas |
| 1. **Is there something that others have done in the past in a safety and stability event that did not feel helpful? (e.g.: telling you to get over it, yelling at you, being intrusive, etc.)**
 |
| Constantly asking if I am ok or not.Needing me to talk about what I am feelingTelling me that I need to exercise self-controlTelling it is not a big deal and that everything will be ok |
| 1. **How would others know when the safety and stability event was over? (What would they be able to observe?)**
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| They would see me relaxed and more willing to talkI would be hanging around outside my apartment |

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| **NM High-Fidelity Wraparound – Safety and Stability Plan****Completed Example** |

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| **What current events in your life may lead to unsafe behavior or a Safety and Stability Event.** **(For example, how Box 3 led to Box 1)** | **What gets triggered inside of you? (Wraparound calls it the cognition or underlying need)** **\*refer to box 4** | **What actions can you and others do to diffuse what was triggered inside of you? (number them starting with the least restrictive and least intrusive, include contact information if relevant)** **\*refer to box 6 and 7 as one of many sources** | **If what was triggered is not diffused what can I and others do to create safety and to prevent things from getting worse. (number them starting with the least restrictive and least intrusive, include contact information)** **\*refer to box 8, 9 and 10 as one of many sources** |
| “If someone disrespects me, like ghosting me or if someone criticizes me in a mean way it makes me want to cut on my arms”  | “I start thinking my dad was right when he told me I was worthless” | “When I start to think that I am worthless…l” 1. I will get out my guitar and play songs that make me feel better
2. I will get my journal out and write poetry
3. I will ask my mom if we can bake together
4. I will ask a friend (either Jason or Carlos) to go for a walk with me. Jason (505) 123-4567, Carlos (575) 987-5612
5. I will call my therapist Kelly (505) 874-5612
6. I will call Arturo to help me change my thinking (505) 360-0280)
7. Mom will put away all the sharps.
8. I will call the NM Crisis line 1-855-NMCRISIS (662-7474)
 | 1. I will make sure I have a first aid kit in my apartment and will use it if I have to. I will ask Arturo (505) 360-0280 or Carlos (575) 987-5612 to help me pick out a good one
2. If I cut myself I will put a bandage on it. Then will call Carlos and have him come look at it. He knows about medical things. If he thinks I have cut too much I will go to doctor or call ambulance. If it is ok we will go for a walk.
3. If I can’t get Carlos, I will call Aunt Evie (505-247-4563) and ask her to come check on me. When she comes over we will have her plan on checking in with me every hour.
4. If I can’t reach them, I will call my mom and ask her to come home from work.
5. If none of this works or if I am bleeding badly I will call 911.
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