Safety Plan Cheat Sheet

Reviewed by the BastionGPT Clinical Advisory Board · July 2026

A safety plan is a brief document a clinician and client build together during or after a suicidal crisis: warning signs, coping strategies, people and places that help, professional and crisis contacts, and steps to make the environment safer. The client keeps a copy. The dominant format is the six-step Stanley-Brown Safety Planning Intervention, often with an optional reasons-for-living step, every entry in the client's own words.

Step 1: Warning signs the cue to open the plan
Do: record the personal thoughts, moods, situations, or behaviors that tell this client a crisis may be building.
Pitfall: generic entries like "feeling sad." A warning sign only works if the client recognizes it as theirs.

Step 2: Internal coping strategies alone, tonight, at home
Do: list things the client can do without anyone else to let the surge pass: shower, playlist, walk, paced breathing.
Pitfall: strategies the client cannot actually reach at 2 am. Test each one before it goes on the plan.

Step 3: People & places for distraction no disclosure needed
Do: name social contacts and settings that take the client's mind off the crisis without requiring them to say anything is wrong.
Pitfall: collapsing this into step 4. Distraction and asking for help are different jobs, kept separate on purpose.

Step 4: People I can ask for help disclosure, by choice
Do: record family or friends the client is willing to tell "I am in crisis," with phone numbers.
Pitfall: names without numbers, or contacts the client would never actually call.

Step 5: Professionals & agencies numbers that answer at midnight
Do: list the clinician with after-hours instructions, the crisis line (988 US · 9-8-8 CA · 13 11 14 AU), and the nearest ED.
Pitfall: listing only the office line. A plan used at midnight needs a number that answers at midnight.

Step 6: Making the environment safer the step reviewers look for first
Do: record agreed means-safety steps as protective actions, with who is helping and a review date; document the conversation even if the client declines.
Pitfall: skipping or vaguing out this step. The developers call means safety a key component of the intervention.

Step 7: Reasons for living optional; used by the VA adaptation
Do: capture what makes life worth living for this client, in their words; the official form has six steps, and many clinicians add this one.
Pitfall: filling it in for the client. A borrowed reason persuades nobody.

Documentation wrapper what the chart must show
Do: record collaborative completion, the copy given to the client and where they keep it, consented sharing, and a review date.
Pitfall: a plan that lives only in the EHR. The copy in the client's hands is the intervention; the chart note proving it is the documentation.

Before you sign

- [ ] Entries in the client's own words, specific and reachable
- [ ] Every contact has a number, including after hours
- [ ] Means-safety step recorded as agreed protective actions
- [ ] Copy given to client documented, location noted
- [ ] Sharing with supports recorded with consent
- [ ] Review date set and tied to the next contact
- [ ] Signed with credentials, dated promptly

Drafting with AI

Capture 30 seconds of bullets after the conversation: warning signs in the client's words, coping strategies that passed the 2 am test, contacts with numbers, agreed means-safety steps, reasons for living.

"Draft a safety plan from these session bullets, keeping every entry in the client's first-person words: …"

Never paste client-identifying information into consumer AI tools. BastionGPT is HIPAA-compliant with a signed BAA on every plan.

150–400 words	**20–45 min with the client**	**Post-crisis · discharge · risk change**	**Client · care team · surveyors**
typical length	clinical team estimate	when completed	who reads it

Full guide, sample plan, and compliance notes:
bastiongpt.com/template/safety-plan

BastionGPT drafts safety plans from bullets, dictation, or a transcript. Free 7-day trial.

Safety Plan Template

Copy or print for your practice · Adapt fields to your organization's, payer's and jurisdiction's documentation requirements.

Client (initials): Date: Completed with (clinician, credentials):

Step 1. Warning signs a crisis may be building
My thoughts, moods, situations, or behaviors, specific to me

Step 2. Internal coping strategies
What I can do on my own to let the surge pass

Step 3. People and places that provide distraction
Name or place, plus contact; I do not have to say anything is wrong

Step 4. People I can ask for help
Name and phone; I will tell them I am in crisis

Step 5. Professionals and agencies I can contact in a crisis
My clinician with after-hours instructions, and the nearest emergency department with address

Crisis line: **988** call or text (US) · **9-8-8** (Canada) · Lifeline **13 11 14** (Australia)

Step 6. Making my environment safer
Agreed protective steps, who is helping, and when we will review them

Step 7. Reasons for living (optional)
In my own words

Copy given to client: ☐ yes Kept where: Shared with (consent): Review date:

Clinician signature / credentials: Date signed:

Full guide, sample plan, and compliance notes:
bastiongpt.com/template/safety-plan

BastionGPT drafts safety plans from bullets, dictation, or a transcript. Free 7-day trial.