

**VA**



U.S. Department  
of Veterans Affairs

# S.A.V.E. Training, Safe Messaging Best Practices, & Lethal Means Safety Counseling

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*Felicia Cummings, LCSW*

*Suicide Prevention Team*

*Oklahoma City VA HealthCare System*

# Suicide Prevention Team

**Selonda Moseley, LCSW**  
**Mental Health Crisis Supervisor**

**Alisha Fry, LCSW**  
**Suicide Prevention Coordinator**

**Leslie Franklin, LCSW**  
**Community Engagement & Partnerships Coordinator**

**Felicia Cummings, LCSW**  
**Community Engagement & Partnerships Coordinator**

# Goals

- Facts & Data about Suicide
- Common Myths vs. Realities
- The Steps of S.A.V.E.
- Lethal Means Safety Counseling
- Safe Messaging Best Practices
- Suicide Prevention 2.0: A Public Health Strategy
- Resources and References

# Objectives

## By participating in this training, you will:

- Have a general understanding of the scope of suicide within the United States.
- Know how to identify a Veteran who may be at risk for suicide.
- Know what to do when you identify a Veteran at risk.
- Understand the importance of lethal means safety and safety planning.
- Understand how to use safe messaging practices when addressing suicide prevention.
- Have a general understanding of the VA's public health strategy to address Veteran suicide.

## Before We Begin:

Suicide is an intense topic for some people.

*If you need to take a break, or step out, please do so.*

- Immediate Resources:
  - ✓ National Suicide Prevention Lifeline: 1-800-273-8255 or 988
  - ✓ Service members and Veterans: Press 1 to connect with the Veterans Crisis Line.

## Take a moment to consider...

When you ask how someone is doing and get the response “I’m good,” do you ever give it a second thought?

What are your biggest questions around suicide and talking to people in crisis?

# Facts About Veteran Suicide

# Suicide is a National Public Health Issue

- Suicide is a national issue, affecting both the Veteran and general population.
- Coronavirus Disease 2019 (COVID-19) pandemic has also placed additional strain on our Nation and on individuals and communities.
- Suicide is a complex issue, with no single cause.
- Suicide is often the result of a complex interaction of risk and protective factors at the individual, community, and societal levels.



# Veteran Suicide Prevention Initiatives Timeline



## CDC's Preventing Suicide Guidelines

2017

A Technical Package of Policy, Programs, and Practices to guide public health approaches to suicide prevention

## VA Suicide Prevention 2.0 (CEPC Program)

2020

Full launch of Community-Based Interventions for Suicide Prevention (CBI-SP) and NOW initiative

## VA National Strategy for Suicide Prevention

2018

10-year public health approach to end suicide

## PREVENTS

2021

President's Roadmap to Empower Veterans and End a National Tragedy of Suicide (PREVENTS)

# Veteran VHA Users Have Unique Experiences



## Economic Disparities

Veterans enrolled in VHA care were less likely to be employed and had lower income levels than Veterans not receiving VHA care.



## Service Connection

VHA patients with military service connected disability status may have lower risk of suicide than other VHA patients.



## Homelessness

VHA patients with indications of homelessness or who received homelessness-related services had higher rates of suicide than other VHA patients.



## Health and Well-Being

VHA Veterans who died by suicide were more likely to have sleep disorders, traumatic brain injury, or a pain diagnosis. Mental health diagnoses and prior treatment were also associated with greater likelihood of suicide.



## Social Connection

Among VHA patients, suicide rates have been found to be highest among those who were divorced, widowed, or never married and lowest among those who married.

# Risk and Protective Factors

## Risk

- Prior suicide attempt
- Mental health issues
- Substance abuse
- Access to lethal means
- Recent loss
- Legal or financial challenges
- Relationship issues
- Unemployment
- Homelessness

## Protective

- Access to mental health care
- Sense of connectedness
- Problem-solving skills
- Sense of spirituality
- Mission or purpose
- Physical health
- Employment
- Social and emotional well-being



**Goal:** Minimize risk factors and boost protective factors

**Key Findings:**  
***2022 National Veteran Suicide  
Prevention Annual Report***

# 2022 National Veteran Suicide Prevention Annual Report

- **Annual Report**
  - Reports on trends in Veteran suicide deaths from 2001-2020
  - Focuses on suicide counts and rates among various Veteran subpopulations
- **State Data Sheets**
  - Examines state-level Veteran suicide deaths and compares to national and regional trends
  - 53 data sheets available for all 50 states, D.C., Puerto Rico, and U.S. territories

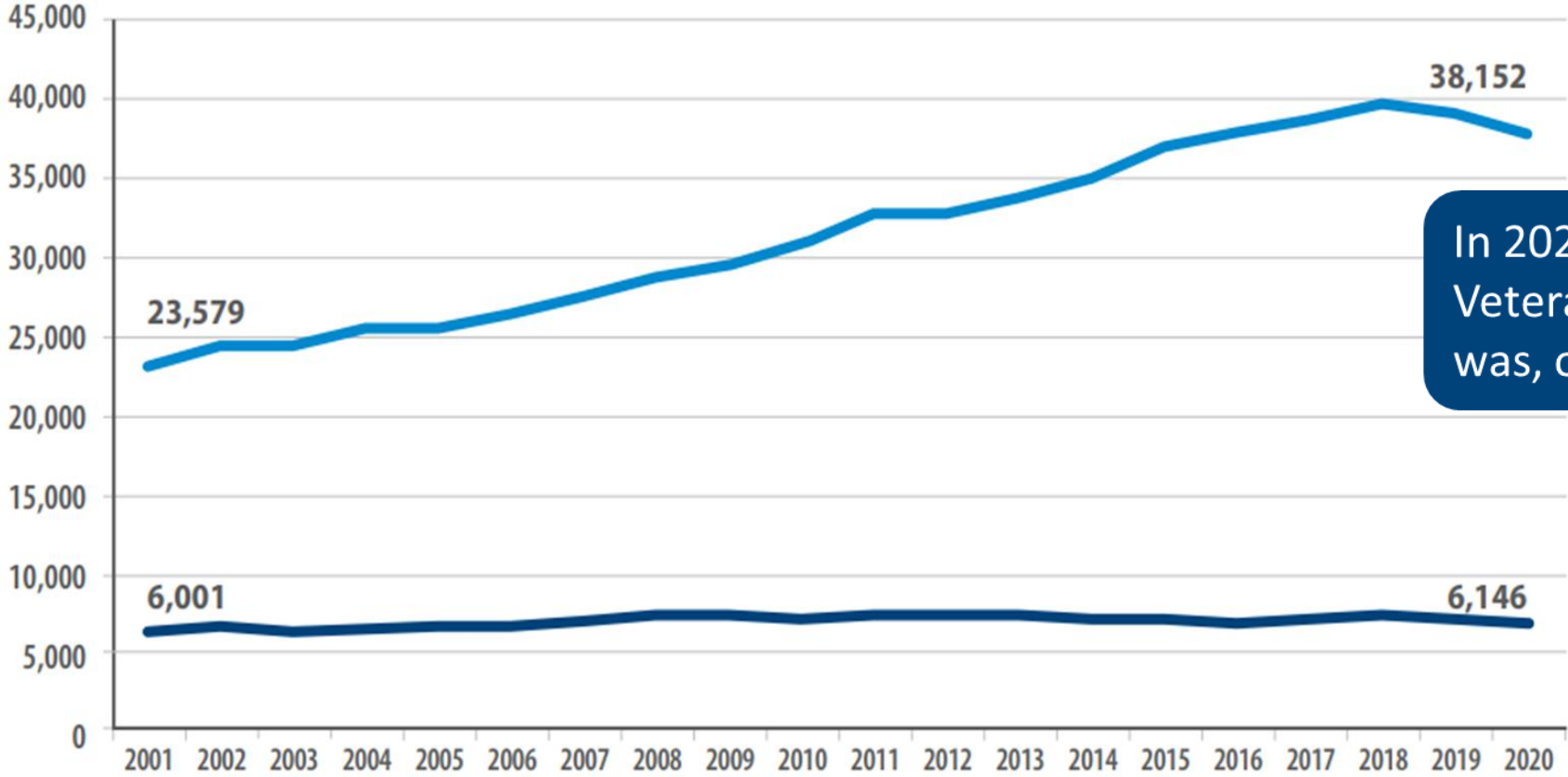


**Access the reports online:**

[www.mentalhealth.va.gov/mentalhealth/suicide\\_prevention/data.asp](http://www.mentalhealth.va.gov/mentalhealth/suicide_prevention/data.asp)

# Veteran Suicide Deaths, Comparison 2001-2020

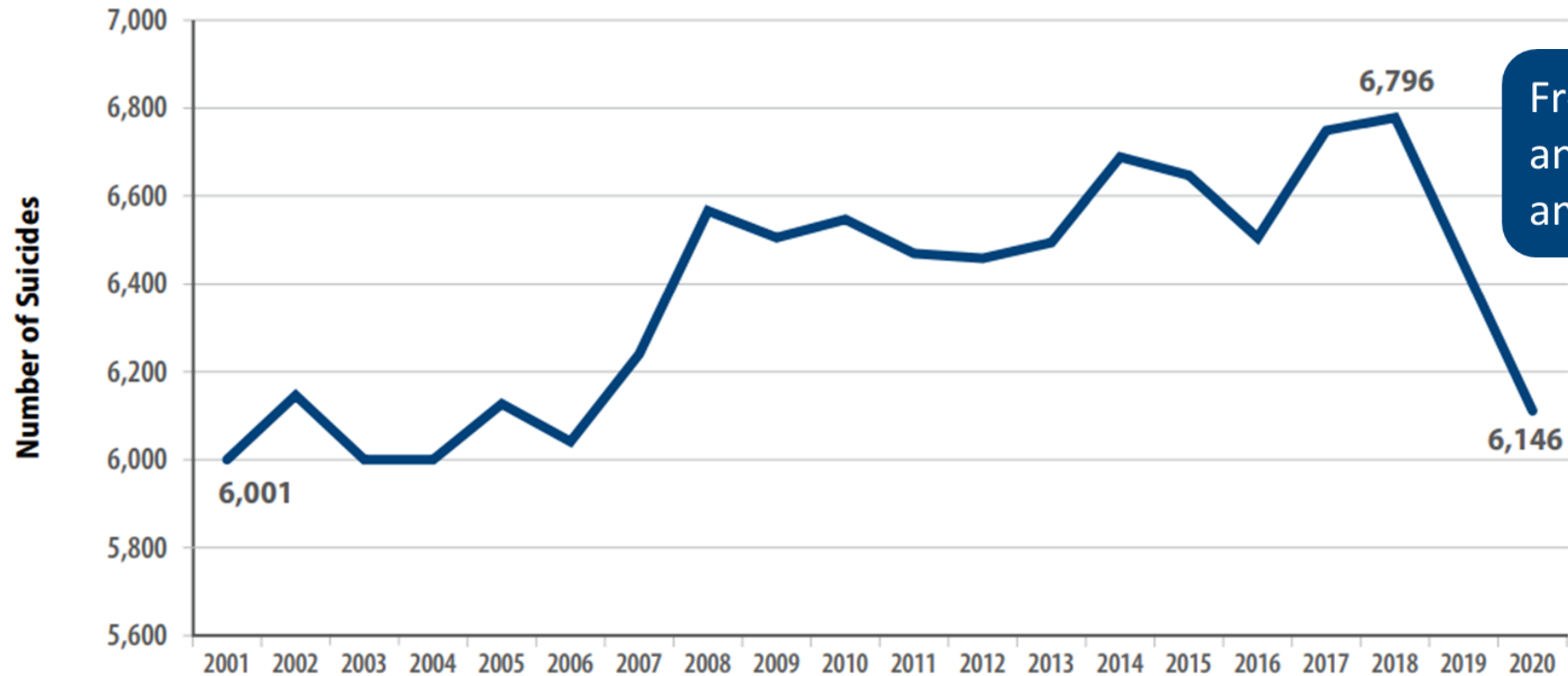
Figure 1: Suicide Deaths Among Veterans and Non-Veteran U.S. Adults, by Year, 2001–2020



In 2020, there were 343 fewer Veteran suicides than in 2019. This was, on average, 16.8 per day.

# Veteran Suicide Deaths, 2001-2020

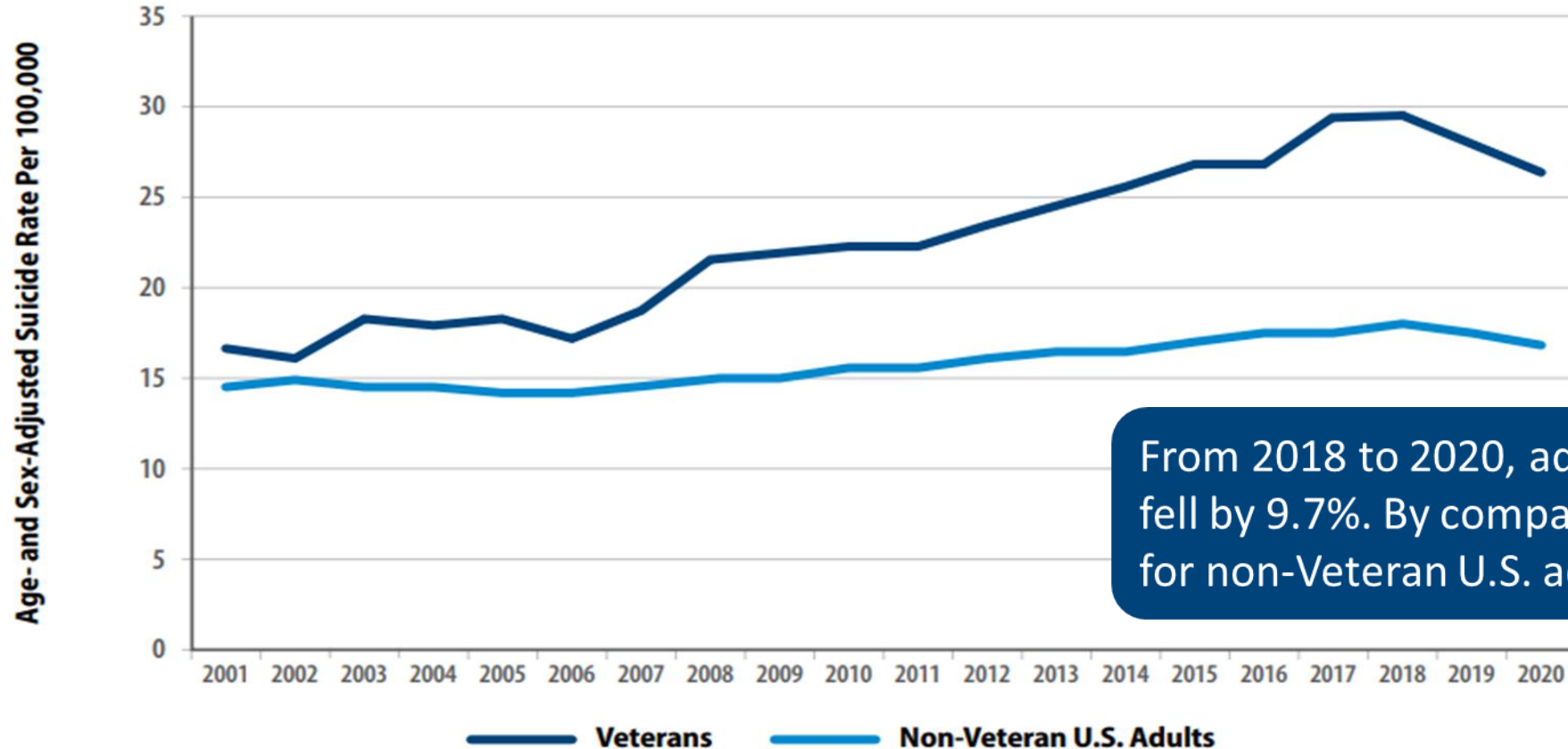
Figure 2: Veteran Suicide Deaths, 2001–2020



From 2019 to 2020, the age- and sex-adjusted suicide rate among Veterans fell by 4.8%.

# Age- & Sex-Adjusted Suicide Rates, Comparison 2001-2020

Figure 3: Age- and Sex-Adjusted Suicide Rates, Veterans and Non-Veteran U.S. Adults, 2001–2020

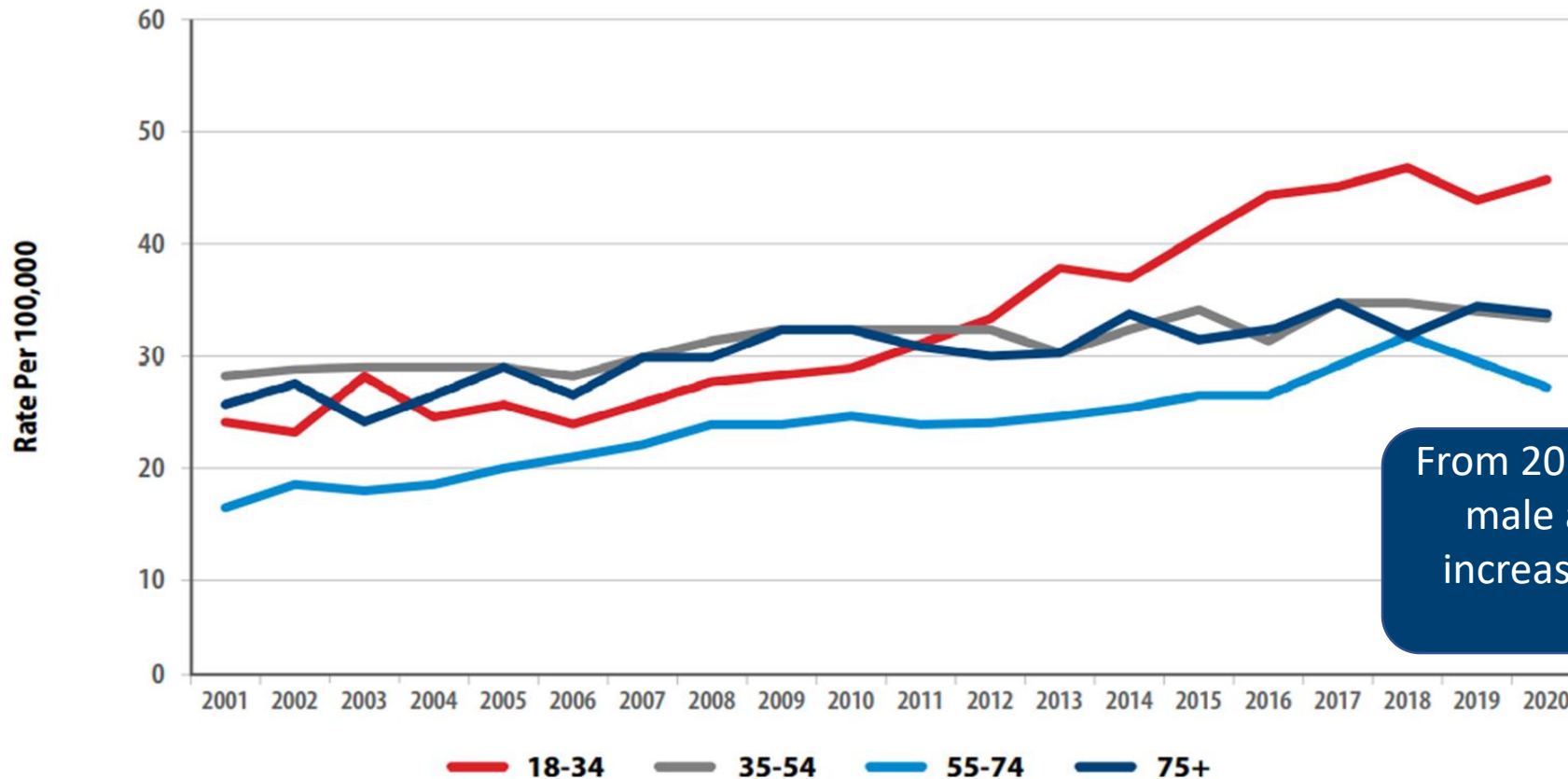


From 2018 to 2020, adjusted rates for Veterans fell by 9.7%. By comparison, the adjusted rate for non-Veteran U.S. adults fell by 5.5%.



# Suicide Rates by Age, 2001-2020

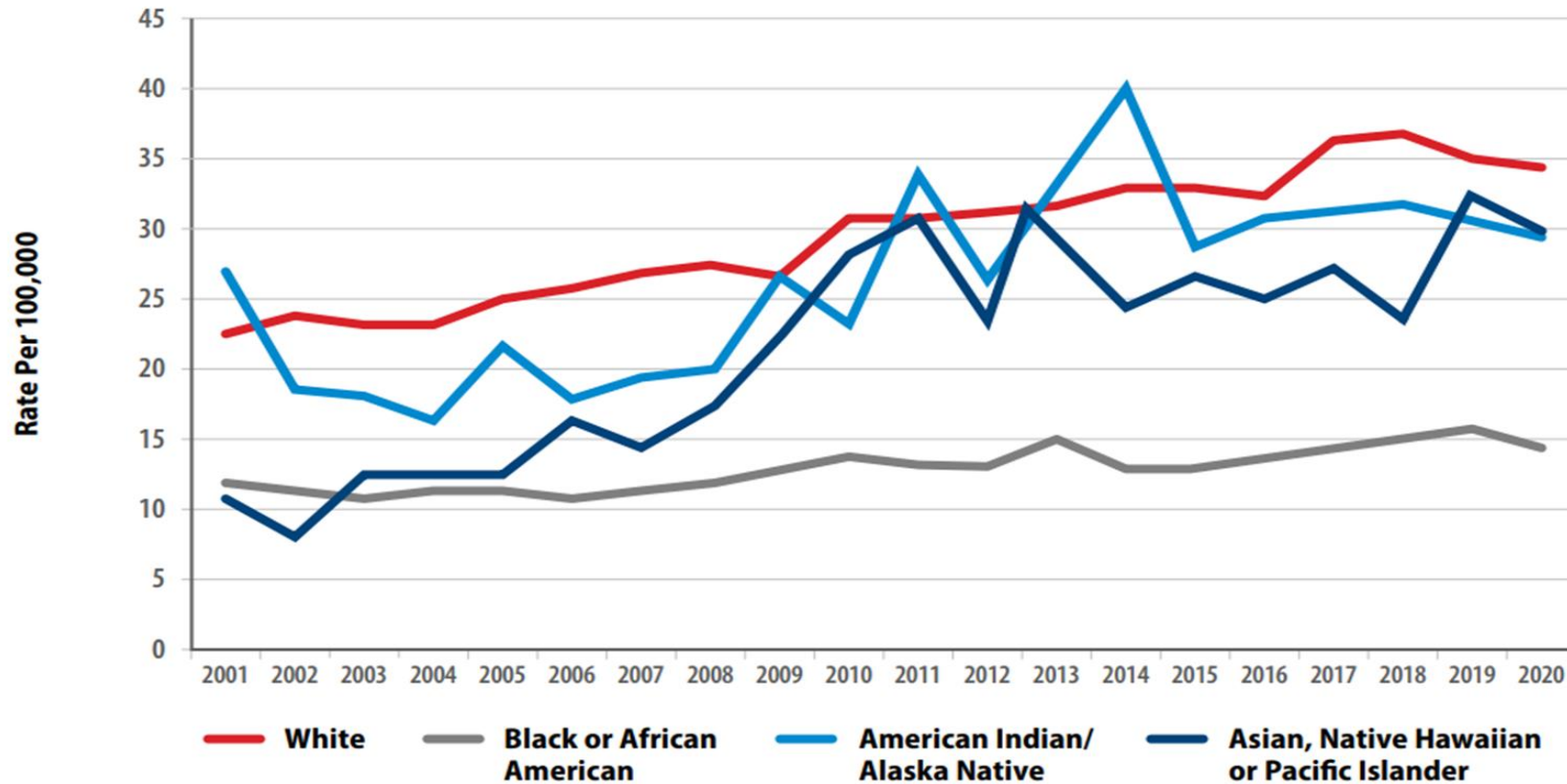
Figure 5: Unadjusted Suicide Rate Per 100,000, Veterans, by Age Group, 2001-2020



From 2019-2020, suicide rates among both male and female Veterans ages 18-34 increased, while for all other groups the rates decreased.

# Unadjusted Suicide Rates by Race 2001-2020

Figure 6: Unadjusted Suicide Rates, Veterans, by Race,<sup>22</sup> 2001–2020



From 2019 to 2020, rates decreased for Veterans in each category.

# Suicide Rates in Year Following Military Separation, 2010-2019

Figure 9: Unadjusted Suicide Mortality Rate, 12 Months Following Separation from Active Military Service, by Year of Separation and Branch of Service, 2010–2019<sup>26</sup>

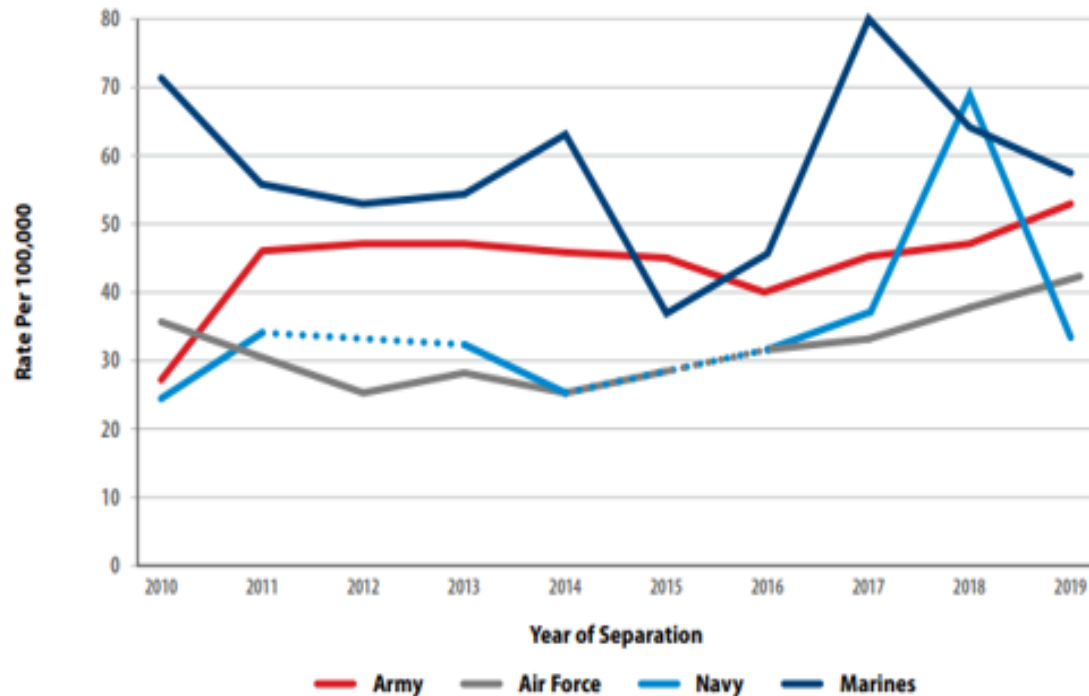
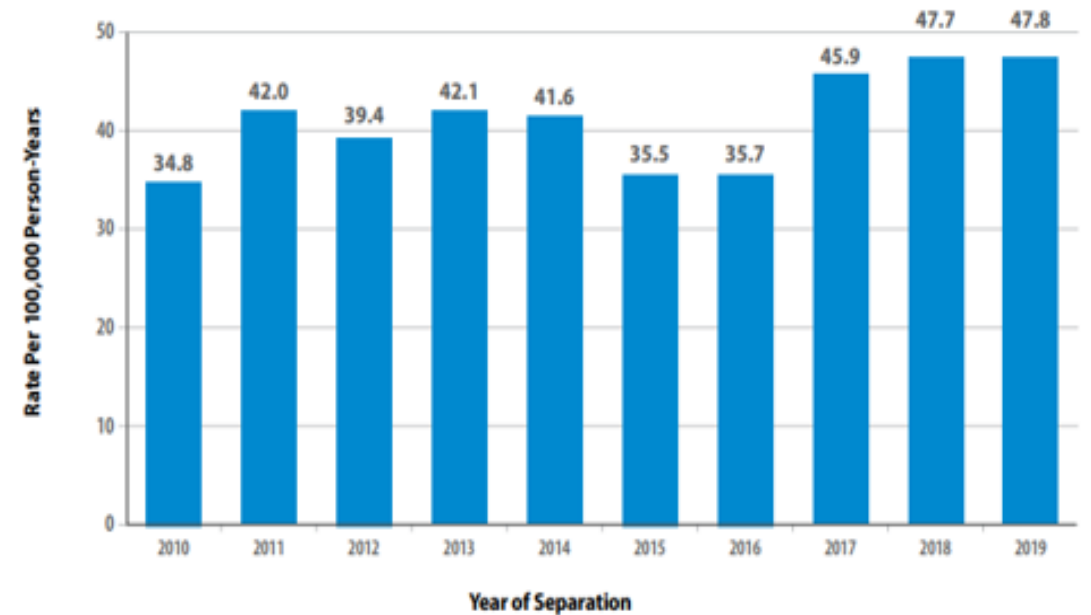


Figure 8: Unadjusted Suicide Mortality Rate, 12 Months Following Separation from Active Military Service, by Year of Separation, 2010–2019



# Suicide Deaths, Methods Involved, 2001-2020

Figure 10: Unadjusted Method-Specific Suicide Rates, Veterans, 2001–2020

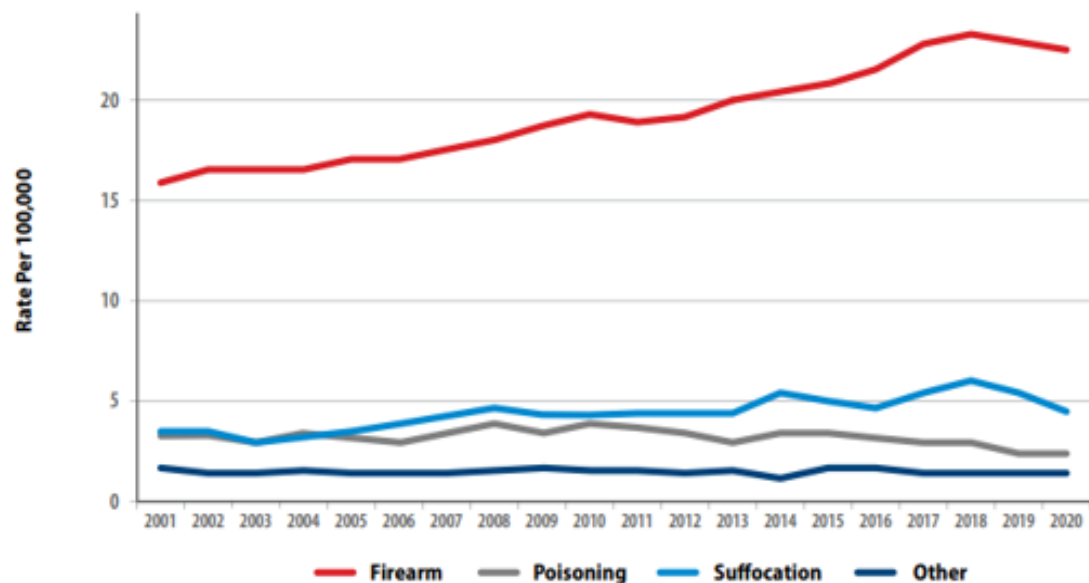


Table 1: Suicide Deaths, Methods Involved, 2020 and Difference From 2001\*

	SUICIDE DECEDENTS, METHODS INVOLVED											
	Non-Veteran U.S. Adults		Veterans		Non-Veteran Men		Veteran Men		Non-Veteran Women		Veteran Women	
	2020	Change*	2020	Change*	2020	Change*	2020	Change*	2020	Change*	2020	Change*
Firearms	50.3%	-2.3%	71.0%	+4.5%	55.3%	-2.7%	72.1%	+4.8%	33.3%	-2.1%	48.2%	+11.2%
Poisoning	12.8%	-5.6%	8.4%	-4.8%	8.0%	-4.3%	7.5%	-4.9%	29.3%	-8.7%	26.8%	-16.0%
Suffocation	28.4%	+7.6%	14.9%	+0.9%	28.6%	+6.2%	14.7%	+0.6%	27.7%	+12.0%	19.2%	+8.8%
Other	8.4%	+0.3%	5.8%	-0.6%	8.1%	+0.8%	5.8%	-0.5%	9.6%	-1.1%	5.8%	-3.9%

\*Difference compared to suicide deaths in 2001

Firearm suicide mortality rates in 2020 were greater among Veteran men (24.3) than Veteran women (6.7). From 2018-2020, firearm suicide mortality rate decreased by 2.5%.

## Anchors of Hope



We have seen an unprecedented decrease in Veteran suicides in 2019 and 2020. 2020 had the lowest number of Veteran suicides since 2006.

From 2018 to 2020, the adjusted suicide rate for Veterans fell by 9.7%. By comparison, the adjusted rate for non-Veteran U.S. adults fell by 5.5%.

Assessment of Veteran suicide rates by race showed decreases from 2019 to 2020 for all groups.

Suicide rates fell for both female and male Veterans.

Despite the onset of COVID-19 pandemic in 2020, suicide rates among Veterans fell 4.8% from 2019 to 2020, versus a 3.6% decline among non-Veteran U.S. adults.

# Common Myths vs. Realities

# Common Myths vs. Realities

Myth	Reality
<p>Asking about suicide may lead to someone taking his or her life.</p>	

# Common Myths vs. Realities

Myth	Reality
<p>Asking about suicide does <u>not</u> create suicidal thoughts. The act of asking the question simply gives the Veteran permission to talk about his or her thoughts or feelings.</p>	



# Common Myths vs. Realities

Myth	Reality
<p data-bbox="690 668 1854 843">People who talk about suicide are just seeking attention.</p>	

# Common Myths vs. Realities

Myth	Reality
	<p>No matter how casually or jokingly said, suicide threats should never be ignored and may indicate serious suicidal feelings.</p> <p>Someone who talks about suicide provides others with an opportunity to intervene before suicidal behaviors occur.</p>

# Common Myths vs. Realities

Myth	Reality
<p>The only one who can really help someone who is suicidal is a mental health counselor or therapist.</p>	

# Common Myths vs. Realities

Myth	Reality
	<p>Special training is not required to safely raise the subject of suicide. Helping someone feel included and showing genuine, heartfelt support can also make a big difference during a challenging time.</p>

# The Steps of S.A.V.E.



## Signs of Suicidal Thinking

Learn to recognize these warning signs:

- Hopelessness, feeling like there is no way out
- Anxiety, agitation, sleeplessness, or mood swings
- Feeling like there is no reason to live
- Rage or anger
- Engaging in risky activities without thinking
- Increasing alcohol or drug use
- Withdrawing from family and friends

# **S** Signs of Suicidal Thinking

**The presence of any of the following signs requires immediate attention:**

- Thinking about hurting or killing themselves
- Looking for ways to die
- Talking about death, dying, or suicide
- Self-destructive or risk-taking behavior, especially when it involves alcohol, drugs, or weapons

# **A** Asking the Question

**Know how to ask  
the most important question of all...**





## Asking the Question

“Are you thinking about killing yourself?”

# A Asking the Question

Do's	Don'ts
<p><b>DO</b> ask the question if you've identified warning signs or symptoms.</p>	<p><b>DON'T</b> ask the question as though you are looking for a "no" answer.</p> <ul style="list-style-type: none"><li>• "You aren't thinking of killing yourself, are you?"</li></ul>
<p><b>DO</b> ask the question in a natural way that flows with the conversation.</p>	<p><b>DON'T</b> wait to ask the question when someone is halfway out the door.</p>

# **V** Validate the Veteran's Experience

- Talk openly about suicide. Be willing to listen and allow the Veteran to express his or her feelings.
- Recognize that the situation is serious.
- Do not pass judgment.
- Reassure the Veteran that help is available.



# **E** Encourage Treatment and Expedite Getting Help

- What should I do if I think someone is suicidal?
  - Don't keep the Veteran's suicidal behavior a secret.
  - Do not leave him or her alone.
  - Try to get the person to seek immediate help from his or her doctor or the nearest hospital emergency room.
  - Call 911.
- Reassure the Veteran that help is available.
- Call the Veterans Crisis Line at **1-800-273-8255 and Press 1.**

# When Talking with a Veteran at Risk for Suicide

- Remain calm.
- Listen more than you speak.
- Maintain eye contact.
- Act with confidence.
- Do not argue.
- Use open body language.
- Limit questions — let the Veteran do the talking.
- Use supportive, encouraging comments.
- Be honest — let the Veteran know that there are no quick solutions, but help is available.

# What to Do if a Veteran Expresses Suicidal Ideation During a Phone Call

- Keep the caller on the line (do not hang up or transfer).
- Remain calm.
- Obtain identifying information on the caller (name, phone number, and current location).
- Conference call to VCL (don't hang up until VCL responder has the call).
- Solicit co-workers for assistance via instant messaging, etc.
- If caller disconnects, dial 911 and VCL (**1-800-273-8255 and Press 1.**).

# Suicide Prevention is Everyone's Business



# Lethal Means Safety Counseling



# What is Lethal Means Safety?

- In the context of suicide prevention, safe storage of lethal means is any action that builds in time and space between a suicidal impulse and the ability to harm oneself.
- Effective lethal means safety education and counseling is collaborative and Veteran-centered. It respects the important role that firearms and medications may play in Veterans' lives and is consistent with their values and priorities.

# What is Lethal Means Safety Counseling (LMSC)?

- Assessing whether a person at risk for suicide has access to a firearm or other lethal means, and
- Working with them and their family and support system to limit their access until they are no longer at elevated risk.
- Develop a plan and recommend safe storage practices
  - Be specific about roles and timeframes
  - Document the plan for safety and next steps

## Why is LMSC Important?

Reducing or restricting access to the lethal means that individuals may use to attempt suicide continues to be one of the most successful strategies in reducing suicide death

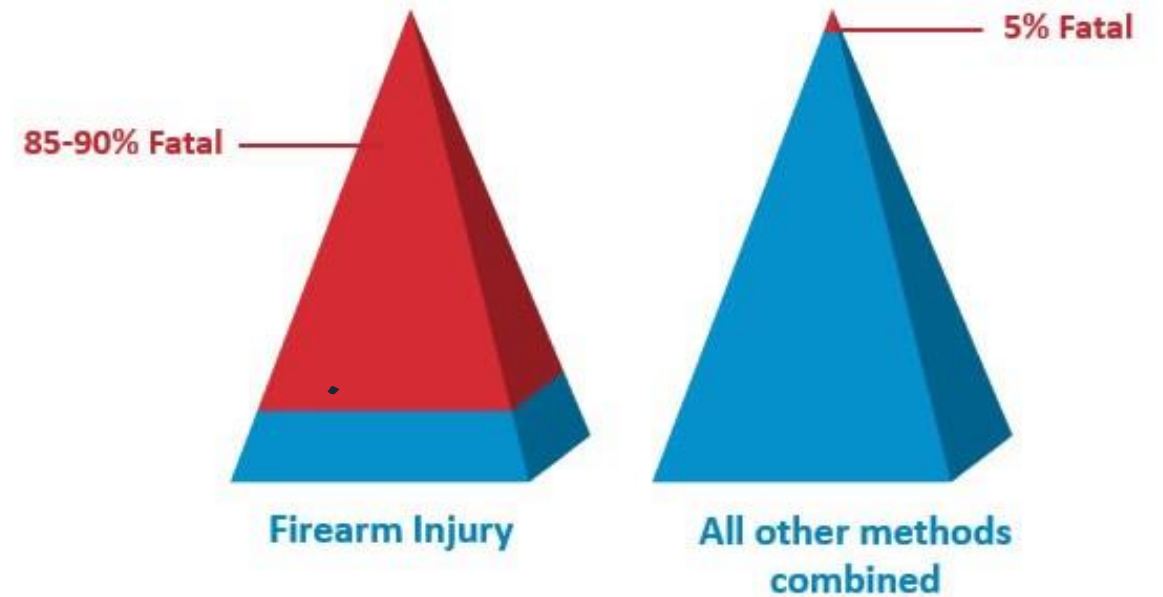
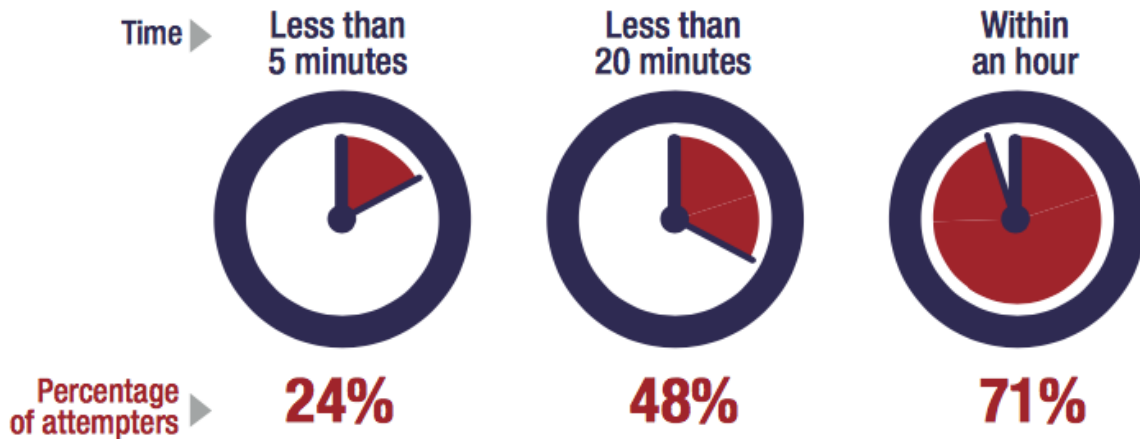
# Who Should Conduct LMSC?

- Anyone who encounters a veteran who is at risk for suicide
- Many veterans at risk for suicide do not go to a psychiatrist or counselor
- A wide array of providers may encounter a suicidal veteran: police officers, higher ed personnel, detention workers, corrections personnel, defense and divorce attorneys, leaders of grief support groups, first responders, emergency department and other health professionals, and so on.

# When Should LMSC Be Used?

- When patients have suicidal thoughts
- When patients in distress have attempted suicide in the past
- When patients are struggling with mental health or substance use issues and are exhibiting risk factors
- When patients are struggling with stressful life events that may serve as triggers for suicidal behavior

# Time From Decision to Action < 1 Hour



CDC WISQARS: Deaths from death certificate data; nonfatal incidents estimated from national sample of hospital emergency departments

Source: Simon, T.R., Swann, A.C., Powell, K.E., Potter, L.B., Kresnow, M., and O'Carroll, P.W. Characteristics of Impulsive Suicide Attempts and Attempters. SLTB. 2001; 32(supp):49-59.

Source: CDC WISQARS and US Dept. of Veterans Affairs  
<https://www.mirecc.va.gov/lethalsafety/facts/>

# What should you recommend they do with the firearm?

- Store with family or a friend
- Store elsewhere (storage facility, gun range)
- Sell or pawn (as it aligns with local laws)
- Store with the police
- Safe storage at home that limits access

The Veterans Crisis Line: Firearm Safety Video

<https://www.youtube.com/watch?v=M3q4Ixpnh4w>

The Assessment and Management of Patients at Risk for Suicide Work Group, Department of Veterans Affairs & Department of Defense. (2019). VA/DoD Clinical Practice Guideline for Assessment and Management of Patients at Risk for Suicide. Version 2.0. 2HIPAA Privacy Rule, 45 CFR § 164.512(k) (2002).  
3Hoyt, T. & Duffy, V. (2015). Implementing firearms restriction for preventing U.S. Army suicide. *Military Psychology*, 27, 384–390.

# Safe storage ideas within the home





## Other safe storage options

- Remove the ammunition from the home
- Remove the firing pin or other key parts of the firearm
- Lock the firearm up and give someone else the key/combination code
  - Important not to transfer the gun access to someone else with injury or suicide risk factors
- Store the ammunition and the firearm separately

# Safety of essential medications

- Lock them up
- Blister packaging (ask the pharmacy)
- Discuss with provider about:
  - Reducing quantities and/or refills
  - Alternative medications
- Talk with family/friends
  - Reducing quantities
  - Administering them (daily or every few days)



# Safe Messaging Best Practices

*Adapted from the National Action Alliance for Suicide Prevention's Framework for Successful Messaging & Reporting On Suicide*

# Suicide is Preventable

Research has shown that the way media covers suicide can influence behavior—either positively, by encouraging help-seeking, or negatively, by increasing contagion or “copycat” suicide, which occurs when exposure to suicide or suicidal behaviors contributes to another suicide.

*VHA OMHSP Safe Messaging Best Practices*

# Why Safe Messaging is Important for Suicide Prevention

- Over 100 studies worldwide have found that risk of contagion is real and responsible reporting can reduce the risk of additional suicides
- Research indicates that duration, frequency, and prominence are the most influential factors that increase risk of suicide contagion
- Covering suicide carefully can change perceptions, dispel myths and inform the public on the complexities of the issue
- Media reports can result in help-seeking when they include helpful resources and messages of hope and recovery

*Reporting on Suicide: Best Practices and Recommendations for Reporting on Suicide One-Pager*

# Practices to Avoid...

- Avoid Oversimplifying
  - Acknowledge that suicide is a complex and rarely, if ever has a single cause.
- Avoid Conveying Suicide as Unsolvable
  - Highlight solutions or action steps someone can take to seek help.
  - Emphasize that suicide can be prevented.
- Avoid Glorifying
  - Avoid portraying or talking about suicide as a heroic, romantic, or honorable act as this can increase risk among vulnerable people.
- Avoid Stigmatizing Language

Use	Avoid
“took their life”	“committed suicide”
“died by suicide	“failed suicide attempt”

*National Action Alliance for Suicide Prevention: Framework for Successful Messaging*

# Suicide Prevention 2.0 Public Health Strategy

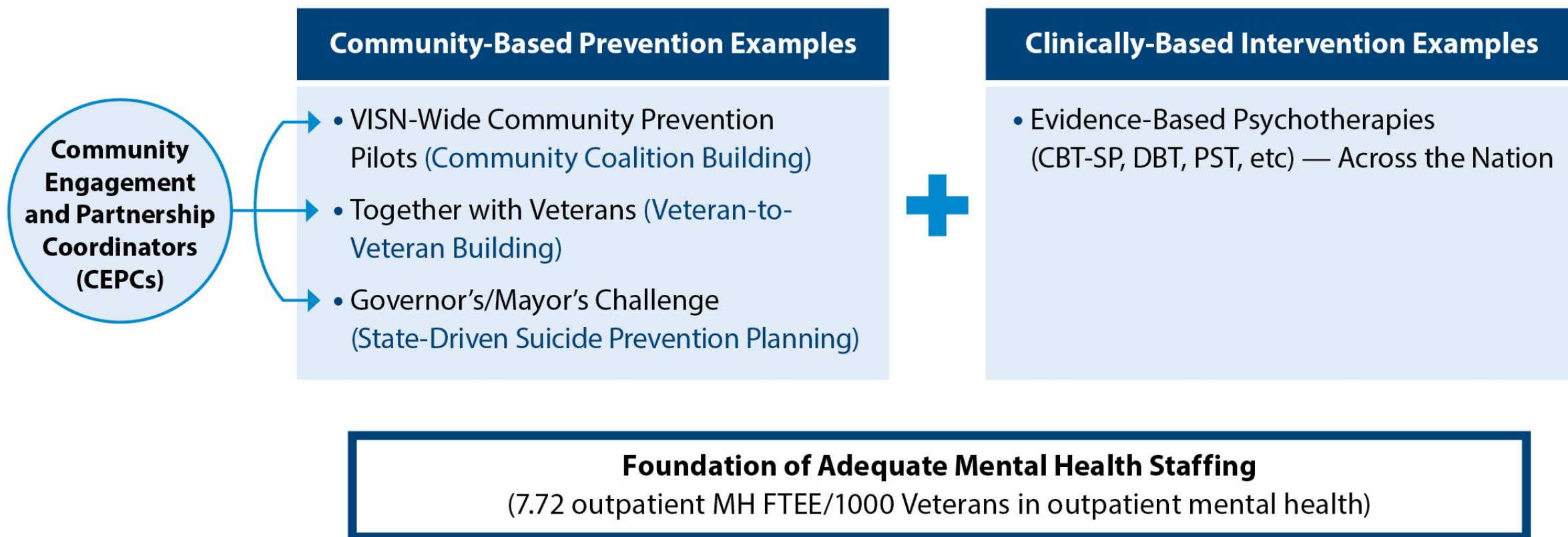
# Public Health Strategy



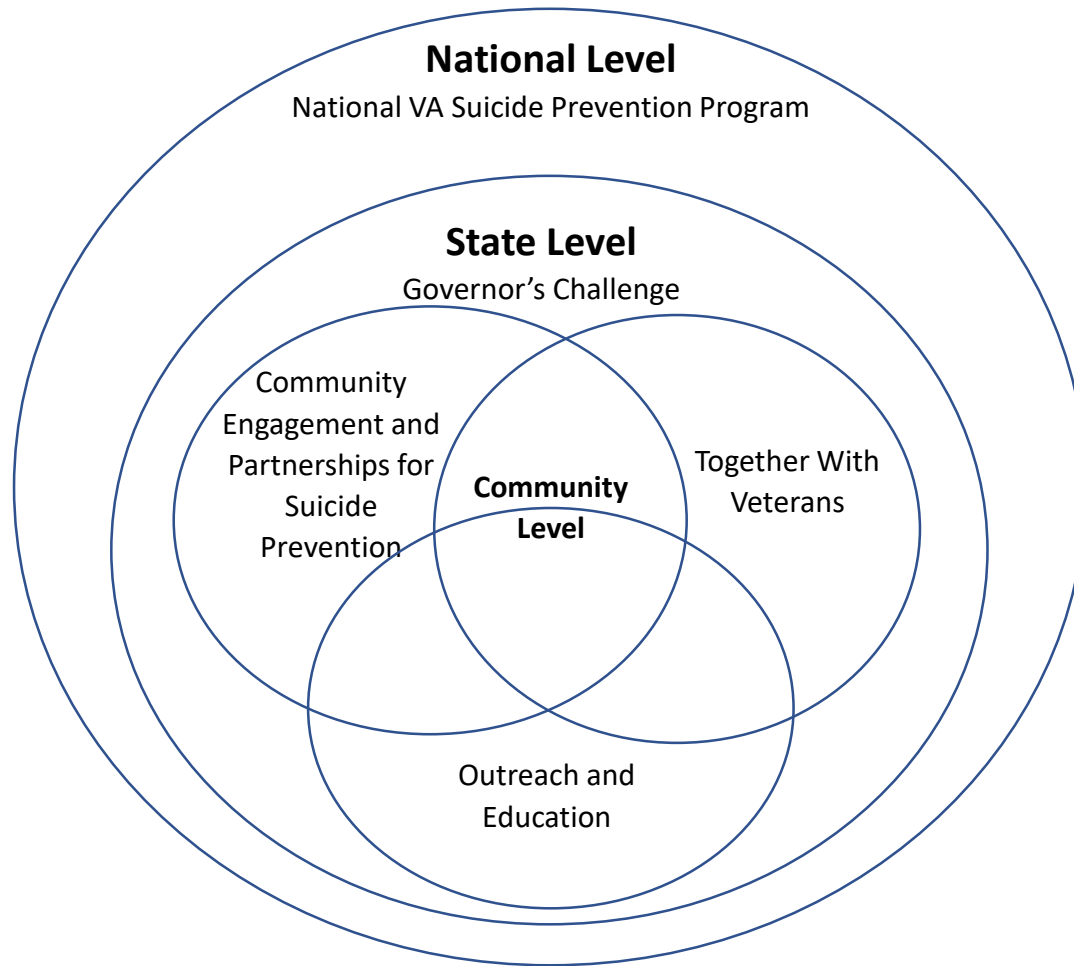
VA's public health strategy combines partnerships with communities to implement tailored, local prevention plans while also focusing on evidence based clinical strategies for intervention. Our approach focuses on both what we can do now, in the short term, and over the long term, to implement VA's [National Strategy for Preventing Veteran Suicide](#).



# Suicide Prevention 2.0: Combining Community & Clinical Interventions



# Community-Based Interventions



**Community-Based Interventions for Suicide Prevention (CBI-SP) serves as unifying model, from national to community levels, for all community-based efforts to end Veteran suicide.**

- ***The Governor's Challenge*** is a collaboration with VA and SAMHSA where state policy makers partner with local leaders to implement a comprehensive suicide prevention plan.
- ***Together with Veterans*** is focused on Veteran-to-Veteran coalition building and Veteran leadership development for suicide prevention.
- ***Community Engagement and Partnerships for Suicide Prevention (VISN Expansion)*** is focused on facilitating community coalition building for suicide prevention

*Outreach and Education provides SAVE, VHA facility partnerships, events, etc. through local Suicide Prevention Coordinators (SPCs) and does not change their critical role.*

# Resources and References

# Free, Confidential Support 24/7/365

If you're in crisis, call the new  
**Veterans Crisis Line number.**

Dial 988 then Press 1.



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# FAQs about 988/Veterans Crisis Line

***Q: Will the 1-800-273-8255 number still work? It is saved into my phone already.***

A: YES, the old number is not going away. Both 988 and 1-800-273-8255 will work to connect you to the VCL. Remember to select option 1 for Veterans.

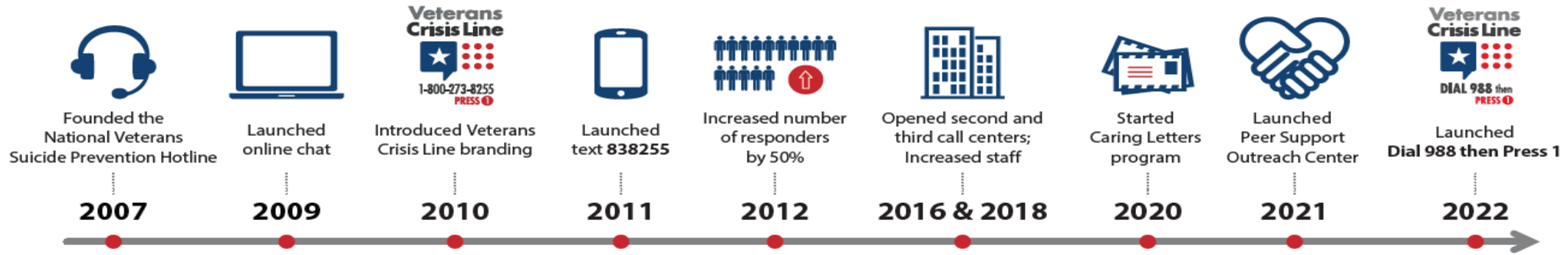
***Q: Do I have to be a Veteran to call the Veterans Crisis Line?***

A: No. The VCL is for Veterans, Service Members, National Guard and Reserve Members AND those friends and family who support them. Anyone can call if they are concerned about a Veteran in their lives.

***Q: Is there a text option?***

A: YES. You can text with the Veterans Crisis Line by sending a text message to **838255**. You can also go to [www.veteranscrisisline.net](http://www.veteranscrisisline.net) to chat online.

The Veterans Crisis Line is a free, confidential resource available to any Veteran, even if they are not enrolled in VA health care or registered with VA. Care does not end when the conversation is over. The Veterans Crisis Line can connect Veterans to their local suicide prevention coordinators, who will follow up and coordinate care.



More than  
**6.2 million**  
calls



More than  
**253,000**  
texts



More than  
**739,000**  
chats



More than  
**1.1 million**  
referrals  
*to VA Suicide Prevention Coordinators*

More than  
**233,000**  
dispatches of  
emergency services

# Find a Local VA SPC at [VeteransCrisisLine.net/ResourceLocator](https://www.veteranscrisisline.net/ResourceLocator)

More than 400 SPCs nationwide.



# Make the Connection

- Online resource featuring hundreds of Veterans telling their stories about overcoming mental health challenges.

**MAKE THE**  
**CONNECTION**  
*www.MakeTheConnection.net*



<https://maketheconnection.net/conditions/suicide>

<https://youtu.be/f59esvrnQvU>



# Coaching into Care

Program for families and loved ones of Veterans, helping them encourage the Veteran in their lives to seek support.



**CALL 888-823-7458**



Help support  
**VETERANS**  
in your life and  
**REACH OUT.**

*Don't wait.* **Reach out.**

[VA.GOV/REACH](https://va.gov/reach)



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# Practice safe storage of firearms, medications and other lethal means

- Visit [www.KeepItSecure.net](http://www.KeepItSecure.net) to learn more about the importance of firearm and other lethal means safety.
- Nearly half of all Veterans own a firearm, and most Veteran firearm owners are dedicated to firearm safety.
- Firearm injuries in the home can be prevented by making sure firearms are **unloaded**, **locked**, and **secured** when not in use, with ammunition stored in a separate location
- There are several effective ways to safely secure firearms. Learn more and find the option that works best for you and your family from the National Shooting Sports Foundation at [www.nssf.org/safety](http://www.nssf.org/safety)

VA » Health Care » REACH » Firearm Suicide Prevention & Lethal Means Safety

## REACH

► Mental Health  
► More Health Care

### QUICK LINKS

Hospital Locator  
Zip Code  Go

Health Programs

Protect Your Health

A-Z Health Topics

**Veterans Crisis Line**  
1-800-273-8255 PRESS 1

**My healthvet**  
My Health, My Care: 24/7 Access to VA

## FIREARM SUICIDE PREVENTION & LETHAL MEANS SAFETY

# KeepItSecure.net

### PRACTICE SAFE STORAGE OF FIREARMS, MEDICATION & OTHER LETHAL MEANS

Lethal means are objects like guns, medications, alcohol, opioids or other substances, ropes, cords, or sharp objects that can be used during a suicidal crisis. If a Veteran is in crisis or having suicidal thoughts, these items can become deadly when they are easily accessible. For example, nearly 7 out of every 10 Veteran deaths by suicide are the result of firearm injuries (Dept. of Veteran Affairs, 2018).

Increasing the time and distance between someone in a suicidal crisis and access to lethal means can reduce suicide risk and save lives. There are simple steps you can take to protect yourself and your family. On this page, you'll find:

- How to identify and handle a suicidal crisis
- Helpful tips for storing guns, medications, and other lethal means
- Additional resources about safe storage

# New Lethal Means Safety Resources



## Reducing Firearm & Other Household Safety Risks Brochure

provides best practices for safely storing firearms and medications along with advice for loved ones on how to talk to the Veteran in their life about safe storage.

U.S. Department of Veterans Affairs  
Office of Mental Health and Suicide Prevention

## Reducing Firearm & Other Household Safety Risks for Veterans and Their Families



**Firearm safety is an important public health issue that can affect your health and your family's well-being.**

If you own a firearm, or live in a household where there are firearms, the following information can help keep you and those around you safe. Similarly, reducing access to other household risks, like medications, can help ensure your family's safety.





# Social Media Safety Toolkit

- As discussed in the **National Strategy for Preventing Veteran Suicide**, social media is an important intervention channel and a key piece of VA's comprehensive, community-based suicide prevention strategy.
- The Social Media Safety Toolkit for Veterans, their families, and friends equips everyone with the knowledge needed to respond to social media posts that indicate a Veteran may be having thoughts of suicide.
- The toolkit includes best practices, resources, and sample responses.



Download at [https://www.mentalhealth.va.gov/suicide\\_prevention/docs/OMH-074-Suicide-Prevention-Social-Media-Toolkit-1-8\\_508.pdf](https://www.mentalhealth.va.gov/suicide_prevention/docs/OMH-074-Suicide-Prevention-Social-Media-Toolkit-1-8_508.pdf)

# Mental Health Mobil Apps. Mobile Apps - PTSD: National Center for PTSD (va.gov)

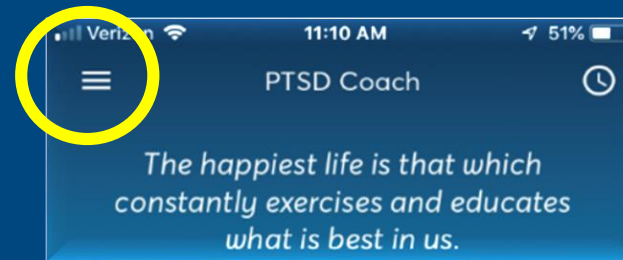
<p><b>Self-Help</b></p> <p>These apps provide support and guidance in living with PTSD.</p>				
	PTSD Coach	PTSD Family Coach	Beyond MST	Mindfulness Coach
<p><b>Treatment Companions</b></p> <p>These apps offer additional help for PTSD treatments.</p>				
	CPT Coach	PE Coach	CBT-i Coach	ACT Coach
<p><b>Related</b></p> <p>These apps help with related issues affecting people with PTSD.</p>				
	COVID Coach	Couples Coach	Insomnia Coach	StayQuit Coach

# Safety Plan now in PTSD Coach!



## To access the Safety Plan:

1. Download\* and open PTSD Coach
2. Tap the lateral menu
3. Tap Safety Plan



**National Center for PTSD website:**

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

# Community Provider Toolkit

- Free online training on Veteran issues, including military culture, for health care providers.
- Includes tips for screening clients for military service.
- Military culture training can count for continuing education credits (CEUs): <https://www.mentalhealth.va.gov/communityproviders/military.asp>.



Access the toolkit online:

[www.mentalhealth.va.gov/communityproviders](https://www.mentalhealth.va.gov/communityproviders)





# Supporting Providers Who Serve Veterans

Free consultation and resources for any provider in the community or VA who serves Veterans at risk for suicide.

Request a consult: [srmconsult@va.gov](mailto:srmconsult@va.gov)

*#NeverWorryAlone*



Provider support after a suicide loss (Postvention)



Risk assessment



Lethal means safety counseling



Conceptualization of suicide risk



Best practices for documentation



Strategies for how to engage Veterans at high risk

**VA**



U.S. Department of Veterans Affairs

# Postvention Resources



COMMUNITY

PROVIDERS

WORKPLACE



Films



Infographics



Podcasts

Uniting for Suicide Postvention (USPV): <https://www.mirecc.va.gov/visn19/postvention/>

VA



U.S. Department of Veterans Affairs

## VA S.A.V.E. Training

This free suicide prevention training video is less than 25 minutes long and available to everyone, 24/7. It's offered in collaboration with the PsychArmor Institute.



Available online for free: <https://psycharmor.org/courses/s-a-v-e/>



## Resources



### **U.S. Department of Veterans Affairs Suicide Prevention**

Contains resource links for free provider consultation regarding lethal means safety and counseling  
[mentalhealth.va.gov/suicide\\_prevention/](https://mentalhealth.va.gov/suicide_prevention/)



### **Suicide Prevention Resource Center**

A national site for suicide prevention resources, including training and tools for lethal means counseling  
[sprc.org](https://sprc.org)



### **Center for Deployment Psychology**

Online training course titled Lethal Means Safety Counseling to Reduce Suicide Risk  
[deploymentpsych.org/Lethal\\_Mean\\_Safety\\_Archive](https://deploymentpsych.org/Lethal_Mean_Safety_Archive)



### **National Shooting Sports Foundation Safety Resources**

[nssf.org/safety](https://nssf.org/safety)

**VA**



U.S. Department  
of Veterans Affairs

# Questions?

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