

SAFETY PLANNING

Stay prepared, stay supported, stay safer



Ontario Harm Reduction Distribution Program
info@ohrdp.ca | www.ohrdp.ca



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Introduction

Safety planning is not new for those who work in the field of harm reduction, it's built into the daily conversations and work you do. These pages on safety planning simply put the work you do every day into a structured format. We hope they help with onboarding or training new staff and strengthen the many ways you support individuals and your communities.

What is Safety Planning?

Safety planning means thinking ahead about what could affect an individual's safety or increase their risk of harm. It includes making plans that can identify support, strategies, and actions that may reduce risks. **Safety planning is a practical approach for reducing harm and improving health outcomes.**

Safety planning is most effective when it is person-specific, recognizing that everyone's experiences, strengths, needs, and circumstances are unique. Good safety planning should incorporate autonomy, choice, and collaboration. Safety plans are developed *with* a person, not *for* them, and respect the individual's right to make decisions about what feels realistic at the time. Safety planning ideally should be done when the individual is not experiencing a crisis situation. A safety plan may not be as effective if the individual is feeling overwhelmed.

Safety planning is not limited to opioid overdose or drug poisoning prevention, but a broader concept that considers safety in many situations. It considers anything that can impact an individual's health and wellbeing, from crisis to everyday risk, including factors affecting:

- **Physical environments** (extreme weather conditions, overcrowded or high stress environments)
- **Substance use patterns** (using substances alone, no access to harm reduction supplies, or reusing supplies)
- **Access to support** (poor connection to community support or healthcare, lack of transportation)



By taking a holistic, person-centred approach, **safety planning can help individuals identify options that align with their goals, values, and definition of safety.** Safety planning with an individual is a way to promote wellbeing and ultimately reduce illness and mortality.

The Three Components of Safety Planning

In harm reduction communities, safety planning is often associated with overdose prevention, but it can also be applied to many other areas or situations.

Safety plans will be dependent on the services, resources, and types of programs available in your community. There is no “right way” to create a safety plan—the goal is to support service users in keeping themselves as safe as possible. Below are three steps that can help in creating a safety plan.



Endless List of Possible Risks

In this document we provide only a few examples of different risks. But there is an endless list of potential risks individuals may encounter. Create your own list of common risks service users may experience in your region and be ready to adapt when a new risk or service user situation arises. We provide a structure that is flexible for you to develop what works best for your community and the individuals you support.

How To Use This Guide

On the following pages you will find:

1. **How to Begin:** where we break down the three components and provide you with a template for developing a safety plan
2. **Examples of Safety Planning Topics:** we have provided four examples of different risks an individual might encounter. **The examples provide options that harm reduction workers can include in their safety plan discussions with service users.**
3. **Conversation Starters:** we have provided a sample of different conversation starters to accompany each of the four examples to help guide discussions.
4. **Templates:** Use the templates provided at the end of this document as guides to creating your own community resource list, and safety plan.



Conversation Starters

Harm reduction work means individuals must become skilled in engagement and connecting with their community. It can be difficult to know how to begin conversations about many things including safety planning. Conversation starters are simple non-judgmental questions. When it comes to safety planning, conversation starters can help to identify potential risks and talk through strategies like planning and actions that can help to reduce harm.

How to Begin

1 Identify current and potential risks and safety concerns

This involves recognizing situations, environments, or factors that could increase the chance of harm now or in the future. The goal is to identify or recognize as many risks as possible.

Questions:

- *What could affect an individual's safety that could put them at risk?*
- *Are there any additional factors that may increase the identified risk? (Prioritize any factors that may increase risk for poor health outcomes or fatality).*

2 Create a plan to reduce risk and harm

Developing practical strategies ahead of time to help lower the likelihood or impact of potential harm. Plans may include incorporating safer use practices, preparing supplies, identifying safer environments, or identifying trusted people and support that can help increase safety.

Question: *What steps can an individual plan to help lower risk and increase their safety?*

3 Actions to take when there is immediate risk

Focusing on identifying actions or resources that can be used if a situation becomes unsafe. Actions might include supporting people and identifying:

- Who to call
- Where to go and how to get there
- How to access help quickly
- Steps that can be taken to protect oneself or others during an emergency or escalating unsafe situation

Question: *What can the individual do when they face the risk?*

Safety Plan Example 1: Unpredictable drug supply

Identify risk

What could affect an individual's safety that could put them at risk?

A drug alert has been put out by the public health unit

Are there any additional factors that may increase the identified risk?

- the individual uses substances

Create a plan

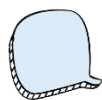
What steps can an individual plan to help lower risk and increase their safety?

- Learning the signs and symptoms of opioid overdose or drug poisoning.
- Identifying trusted people who the individual can be with while using substances.
- Being aware that some substances can cause prolonged sedation, so it's important for an individual to consider who they're with to ensure their belongings and environment are safe.
- Having the information on hand for a spot-checking service or the contact of someone who can check in.
- Knowing the location of a Consumption and Treatment Site (CTS) **if there is one.**
- Knowing where to get Drug Testing Strips or use drug checking services if they are in your area.
- Carrying naloxone. know how to use it and make sure others know where it is and how to use it.
- Keeping a phone charged and accessible.

Take action

What can the individual do when faced with the risk?

- Go low and go slow. Try a test dose and take your time before taking more.
- Avoid mixing substances when possible.
- Use with someone you trust who can respond to an emergency if needed.
- If using alone ask someone to check on you or call a spot-checking service.
- Pay attention to how your body feels.
- Have naloxone out and visible before using substances.
- Call 911 and give naloxone if you suspect someone is experiencing an opioid overdose or toxic drug poisoning.



Conversation Starters for Example 1: Unpredictable drug supply

Learning the signs and symptoms of opioid overdose or drug poisoning.	"Here's a naloxone kit, are you familiar with the signs and symptoms of an opioid overdose? I have a handout you can take with you, or I can share some things to look out for if you like?"
Identifying trusted people who the individual can be with while using substances.	"Do you have someone you trust that you can use with so you can keep an eye out for each other?"
Being aware that some substances can cause prolonged sedation, so it's important for an individual to consider who they're with to ensure their belongings and environment are safe.	"If you are out for a long time, do you have someone who can be with you to check on you?"
Having the information on hand for a spot-checking service or the contact of someone who can check in.	"Are you familiar with the National Overdose Response Service (NORS)? They have an overdose prevention line you can call, and I have their number here if you'd like it." <i>(Include any overdose prevention lines or apps available to people in your area).</i>
Knowing the location of a Consumption Treatment Service (CTS), if there is one.	"Do you know where to find the local CTS? (if there is one). I can give you the address if you like?"
Knowing where to get drug testing strips, or use drug testing services (if available)	"Did you know that <i>(insert local program name)</i> has drug test strips they give out? They can also show you how to use them.
Carrying naloxone. Knowing how to use it and making sure others know where it is and how to use it.	"Can I give you a naloxone kit? It's always a good idea to have one on you."
Keeping a phone charged and accessible.	"Do you have a phone that is charged? I can let you know where you can charge it if that would helpful?"

Safety Plan Example 2: Limited Access to Harm Reduction Supplies

Identify risk

What could affect an individual's safety that could put them at risk?

An individual has identified that they live in a rural area with limited transportation, and limited access to harm reduction supplies.

Are there any additional factors that may increase the identified risk?

- individual has identified frequent reuse of supplies.

Create a plan

What steps can an individual plan to help lower risk and increase their safety?

- Knowing the risks associated with reusing and sharing.
- Reviewing the safer practices for each supply (if appropriate).
- Knowing where the access points are for getting supplies, if there is an outreach team near the individual. Is delivery an option?
- Having strategies so the individual doesn't run out of supplies (getting bulk supplies when possible).
- Addressing barriers that may be impacting the individual's ability to get supplies.
- Knowing if there are people nearby who also use supplies who can be called if needed.

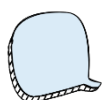
Take Action

What can the individual do when faced with the risk?

- Some options could include:
- If reuse is unavoidable, use your own supplies ONLY.
- Clean hands to reduce risk of infection.
- Contact friends near you who might have new supplies.
- Contact your closest harm reduction program for delivery.



We acknowledge some communities do not have easy access to harm reduction supplies. This is where your knowledge of your region is so important to brainstorm accessibility ideas.



Conversation Starters for Example 2: Limited Access to Harm Reduction Supplies

Knowing the risk associated with reusing and sharing.	"Reusing your own supplies can increase the risk of vein damage, infections, and bacteria getting into the bloodstream. Have you noticed any issues from reusing supplies before?"
Reviewing the safer practices for each supply (if appropriate).	"Are there any safer practices that feel unrealistic or difficult to follow in real life?" "Would it help if we walked through how to use new supplies in a way that may reduce infections and injuries?" "Are there any supplies you've had questions about but never had a chance to ask?"
Knowing where the access points are for getting supplies, if there is an outreach team near the individual. Is delivery an option?	"Are there certain locations where you feel more comfortable accessing supplies than others?" "Sometimes people don't realize there are after-hours options or outreach supports available. Would you like to go over some of those?"
Having strategies so the individual doesn't run out of supplies (getting bulk supplies when possible).	"What strategies have worked for you in the past to avoid running out of supplies?" "Some people find it helpful to pick up more supplies than they immediately need so they have backups. Is that something that feels possible for you?"
Addressing barriers that may be impacting the individual's ability to get supplies.	"Some people feel uncomfortable carrying larger amounts of supplies because of stigma, housing rules, or police interactions. Does that affect access for you? Do you want to

	talk about some ways you may be able to work around this?" "People often know the risks associated with sharing supplies, but things can happen. What situations affect supply access for you?" "How does transportation affect your ability to get new supplies or access services when you need them?" What would make it easier to get new supplies more consistently?"
Knowing if there are people in the area who also use supplies, and who can be called if needed.	"Do you know anyone nearby who also gets harm reduction supplies and may be able to help in an urgent situation?"

Safety Plan Example 3: An extreme cold warning has been issued

Identify the Risk

What could affect an individual's safety that could put them at risk?

A period of extreme cold is in the forecast

Are there any other factors that need to be considered when creating this plan?

- individual is unhoused
- individual uses substances

Create a plan

What steps can an individual plan to help lower risk and increase their safety?

Risk: A period of extreme cold is in the forecast

As a harm reduction worker, making a plan with a service user, together you can discuss the following:

- Monitoring the weather
- Knowing the locations of local warming centers (if needed) and how to get there
- Obtaining items you may need: Harm reduction supplies, warm clothing, hand warmers/feet warmers, hot drinks, food, medications (when appropriate so you do not need to go get them in the cold)
- Learning the signs and symptoms of hypothermia or frost bite
- Ensuring naloxone and emergency supplies are accessible but that they will not freeze.
- Being aware that responding to overdoses in extreme cold can make response more difficult. Naloxone may take longer to work and the risk for hypothermia complicates response.

Take action

What can the individual do when faced with the risk?

- Remember to eat and to drink warm beverages, when possible.
- Let friends know where you are
- Go to a warming centre when needed
- Stay close to places where you know you can go inside for warmth
- Wear warm clothing when outside, stay dry and change clothing if it gets wet

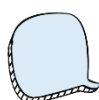
- Use substances around people you trust, start low and go slow
- Have someone who can call 911 if cold related illness (hypothermia) or overdose is suspected



Important!



Naloxone may be absorbed much slower when the body is cold. This is important to know if you are giving naloxone as an overdose response during cold weather. In this case, calling 911 is even more important, as hypothermia can complicate overdose response.



Conversation Starters for Example 3: An extreme cold warning has been issued

Monitoring and paying attention to the weather.	"It's supposed to go down to -30°C tomorrow, do you have a way to keep track of the temperature?"
Knowing the locations of local warming centres and how to get there.	"Do you know where the warming centres are?" "What do you need to get there?"
Knowing what items may be needed and where to get them: • harm reduction supplies • warm clothing • hand warmers/feet warmers • hot drinks • food • medications	"Are there any supplies we can give you that can help during the extreme cold weather?"
Getting supplies in advance if possible.	"You may want to take an extra day's worth of harm reduction supplies, so you don't have to be out looking for them in the extreme cold."
Learning the signs and symptoms of hypothermia or frostbite.	"Do you know what it can feel like when someone is getting dangerously cold?" "Do you know the signs of frostbite?"
Ensuring access to naloxone and emergency supplies can be accessed easily but not exposed so they will freeze.	"If you are outside during cold weather keep naloxone close to your body so it doesn't freeze. This way it can be used when it's needed."
Being aware that responding to overdoses in extreme cold can make response more difficult. Naloxone may take longer to work and the risk for hypothermia complicates response.	"Did you know that overdoses can be more complicated when someone has been exposed to cold temperatures?" "Did you know medications can take longer to work when the body is cold? This also means naloxone can take a little longer to work."

For more information, see OHRDP's Reference Guide: ***Supporting People Who Use Substances During Extreme Cold Events***

Safety Plan Example 4: An extreme heat warning has been issued

Identify the risk

What could affect an individual's safety that could put them at risk?

Risk: A period of extreme heat is in the forecast

Are there any additional factors that may increase the identified risk?

- The individual is unhoused
- The individual uses substances

Create a plan

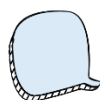
What steps can an individual plan to help lower risk and increase their safety?

- Monitoring and paying attention to the weather
- Knowing the locations of local cooling centres and how to get there
- Knowing what items may be needed and where to get them: harm reduction supplies, sunscreen, hat, water and food
- Getting any supplies in advance if possible
- Knowing the signs of heat related illness
- Being aware that extreme heat can increase risk of overdose and other serious health complications

Take action

What can an individual do when faced with the risk?

- Hydrate and eat during the extreme heat event
- Let friends know where you are
- Go to a cooling centre
- Wear lightweight clothing and sunscreen
- Use substances around trusted people, start low and go slow
- Have someone who can call 911 if heat related illness or overdose is suspected



Conversation Starters for Example 4: An extreme heat warning has been issued

Monitoring and paying attention to the weather.	"It's going up to 40°C tomorrow! Do you have a way to keep track of the weather?"
Knowing the locations of cooling centres and how to get there.	"Do you have a cool place you can go when it's really hot to take a break from the heat?" "Do you know where the cooling centres are and how to get there?" "What do you need to get there?"
Knowing what items may be needed and where to get them: • harm reduction supplies • sunscreen • hat • water • food	"Are there any supplies we can give you that can help during the extreme hot weather?"
Getting any supplies in advance, if possible.	"Would you like an extra day's worth of supplies, so you don't have to be out in the heat?"
Knowing the signs of heat related illness.	"Take care of yourself, this kind of heat can really make you sick." "Do you know the signs of heat stroke or hyperthermia?" "Keep an eye out for any of your friends who might be affected by the heat."
Being aware that extreme heat can increase risk of overdose and other serious health complications.	"Did you know using substances during extreme heat events can increase your risk of overdose?"

For more information, see OHRDP's Reference Guide: ***Supporting People Who Use Substances During Extreme Heat Events***

Community Resources

Harm reduction workers need to know their communities well. A community resource page of all the locations identified in the *Safety Plan* should be provided to the service user. Community resources and safety planning go together.

Providing service users with information about critical services and resources can be lifesaving when safety is threatened.

Wrap-around care happens when you connect individuals with the support they need, like:

- **heating and cooling centres**
- **drop-in programs**
- **primary care**
- **social services**
- **harm reduction services**
- **detox or treatment programs**
- **food programs or food banks**

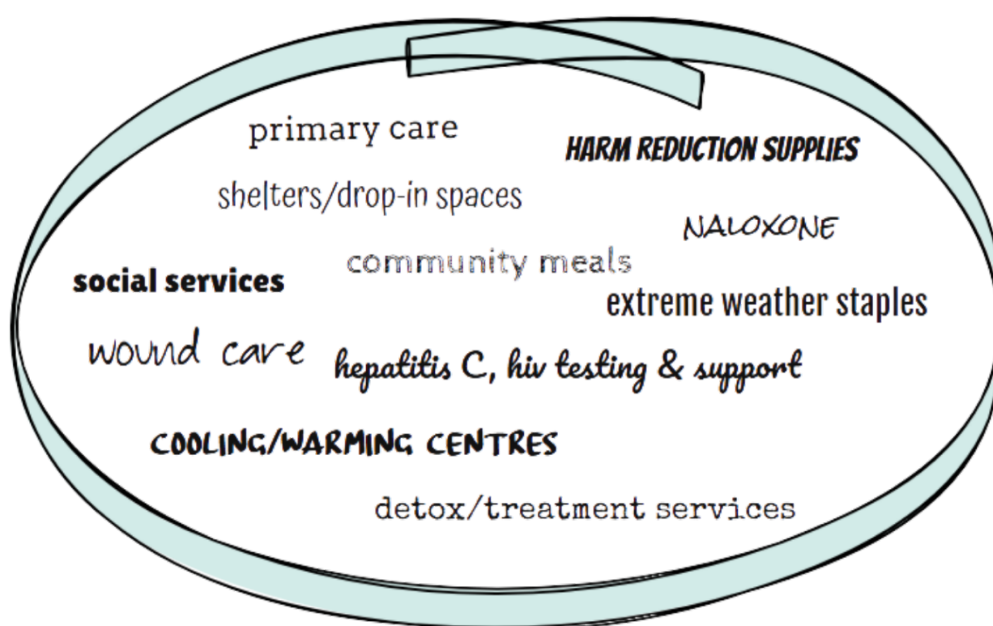


Knowing who community partners are and developing good relationships with them is a key part of harm reduction. Programs who build good relationships within the community are better able to make smooth connections for service users. Providing an individual with a warm transfer to other community services is a caring and compassionate way to support individuals.

Creating a Resource List

You have a wealth of knowledge about community resources, write them down!

Every community is different, and your resource list should reflect what is available locally. In rural or isolated communities, these resources may be more limited than in urban centres. However, it remains important to include any available services, supports, or actions that may assist service users. Even small or informal supports can be valuable, and having a written list ensures individuals can take this information with them for when they need it.



What are some community resources you can add to the list?



- Cooling/warming centre names, locations and phone numbers, hours of operation
- Is there anything someone would need to know before showing up at a cooling/warming centre? (does it require booking ahead, or can you just drop in?)
- Community meal programs, food banks
- Primary care including wound care
- Where to get bottles or potable water
- Where to get sunscreen, or warm clothing
- Washrooms that are available to the public
- Harm reduction supply pick-up and disposal locations
- Naloxone pick-up locations
- Programs providing pet food

Create Your Own Community Resource List (template)

Cooling Centres, Warming Centres, Day drop-in programs, Shelters

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-
-

Community Meal Programs, Food Banks

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-
-

Harm Reduction Supplies, Connections to Social Services

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-

Primary Care, Wound Care, hepatitis C Testing

-
-
-

Other

-
-
-

Create a Safety Plan (template)

Identified Risk *(What could affect an individual's safety that could put them at risk?)*



Additional Factors: *(Are there any other factors that need to be considered when creating this plan?)*

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-
-

Create a Plan *(What steps can an individual plan to help lower risk and increase their safety?)*

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Take Action *(What can the individual do when faced with the risk?)*

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This document is dedicated to all the individuals who have trusted harm reduction workers to have their health and safety at heart.

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