## As a clinician, since it's anonymous, how do I handle it if a client expresses suicidal or self-harmful thoughts?

It's worth stating up front, if someone has not engaged with Sound Off before and are in acute crisis, they are not appropriate for the platform. Every clinician as they engage in their initial assessments are required to assess the user for appropriateness for engaging in teletherapy by phone. A user should not be utilizing the Sound Off application if a user needs a crisis level of care. This is stated clearly upfront in the application and users understand through informed consent what the limitations of anonymity are and that, in fact, providers will request information if it is indicated. We are not staffing a crisis hotline nor asking clinicians to standby for an initial call at any time. Sound Off provides the Veteran Affairs Crisis Line through our application and encourages users to access it. The VA Crisis line remains a highlighted button inside the application directly next to the Clinician "button" for use by users or potential users who may be in crisis.

In order to maintain true anonymity, the clinician might be limited in his/her ability to direct emergency resources. The Sound Off guidance remains consistent: the clinician should do exactly what the clinician would normally do to the degree s/he can do it. The clinician should act on any information s/he may hold, and request necessary information that s/he doesn't hold. Sound Off understands this may place the clinician in a situation where s/he is unable to effectively direct resources, but this is not unique to the Sound Off platform - crisis hotlines (nevermind clinicians) routinely lack identifying or location information necessary to support someone in crisis.

Given the patient population Sound Off is seeking to serve (those who are not otherwise prepared to engage in a clinical relationship because of a lack of anonymity), the alternative in these scenarios is not that they are in crisis sitting on the couch across from the clinician. The alternative is they are not engaged with help at all. For some clinicians, this reality - alongside the legal, technical, insurance, etc. work we have put into this service - will be enough to serve within our platform. For others, it will not. We respect and understand both positions.