# Shasta County Sheriff's Office

Shasta County SO Custody Manual

# **Suicide Prevention**

# 908.1 GENERAL

The Facility Manager in cooperation with the Medical Program Manager and mental health professional shall develop and implement a suicide prevention plan incorporating the cooperative efforts of security, mental health, and health services staff. This plan shall include the following elements: identification, training, assessment, monitoring, housing, referral, communication, intervention, notification, reporting and review. All custody and health services staff will be oriented to the Suicide Prevention Plan and trained in the procedures to implement the plan. Copies of the plan are available to all staff.

### 908.2 PROCESS

### 908.2.1 IDENTIFICATION

The receiving screening procedure completed at the time of intake into the facility custody staff shall include questions and observations regarding mental status and potential for suicidal behavior.

Custody and health services staff shall be trained and alerted to the need to continuously monitor inmate behavior for suicide potential during incarceration.

# 908.2.2 TRAINING

Regularly scheduled training for all security and health services staff shall be provided to include identification and management of suicidal behavior in the jail setting including; high-risk periods of incarceration, suicidal risk profiles and recognition of verbal and behavioral cues that indicate potential suicide.

### 908.2.3 ASSESSMENT

Initial assessment of inmates identified as exhibiting signs of or the potential risk for suicide shall be provided by nursing staff using the contracted medical provider's Psychiatric / Suicide Assessment tool when mental health staff is not physically present in the facilities. The nurse will contact on-call mental health for direction as indicated yes.

Mental health staff shall be available 40 hours per week and on-call for assessment of an inmate's level of suicide risk upon referral by health services and/or custody staff.

#### 908.2.4 HOUSING AND MONITORING

Inmates identified as potentially suicidal shall be placed on Suicide Precautions by custody or health services staff.

High security observation cell,

Open observation (occupied cell or dormitory),

Monitoring of inmates shall be in accordance with Policy 503.

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#### 908.2.5 REFERRAL

Referral of all inmates identified as displaying suicidal ideation, gestures and/or attempts shall be referred to the the contracted medical providers health staff.

Inmates on Suicide Precautions in high security observation cells whose condition deteriorates, or for whom the nurse is unable to complete a hands on assessment including vital signs after six hours of placement shall be transferred to the Shasta Regional Medical Center for further assessment.

### 908.2.6 INTERVENTION

Intervention and treatment shall be carried out in accordance with direct order of the responsible medical or mental health provider and/or the contracted medical providers protocols/standardized procedures.

Inmates placed on Suicide Precautions will be housed as indicated in #4. above and be provided with a suitably designed safety garment to provide for their personal privacy unless specific identifiable risks to the inmate's safety or to the security of the facility are documented.

### 908.2.7 COMMUNICATION

Custody, nursing and mental health staff will maintain open lines of communication to insure that all parties are kept apprised of suicide potential; suicide precaution placement, retention, and release status; monitoring findings including general status reporting through time of event and end-of shift reporting and on-call contacts to insure appropriate continuity of care and follow up.

### 908.2.8 REPORTING

Reporting of inmates identified or suspected of being at risk for suicidal behavior will occur through the referral process. Referrals may be made by custody to nursing or mental health staff at any time. Current status reporting will be carried out as described in the Communications section, above and the contracted medical providers Safety Cell Policy & Procedure.

Reporting completed suicides shall be a joint responsibility of the the contracted medical providers program manager and facility manager in accordance with the contracted medical providers Inmate Deaths Policy & Procedure.

The contracted medical provider Program Manager or nursing staff on duty shall be responsible for reporting all potential and/or attempted and completed suicides to the Facility Manager or Shift Supervisor.

The contracted medical providers management shall be notified of completed suicides within one working day.

# 908.2.9 NOTIFICATION

Next of kin Family members shall be notified in accordance with the the contracted medical providers Notification of Next of Kin Policy and Procedure.

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# 908.2.10 REVIEW

All completed suicides shall be subject to a medical review and review by the Quality

Management and Peer Review Committees in accordance with the contracted medical providers Inmate Deaths Policy & Procedure.