

Sixth District Department of Correctional Services POLICY	Issue Date 01/15/92	Effective Date 04/20/17	Policy Number 121-17
Subject SUICIDE		Review Month September	Author 0590 (MLA)
Rescinds 121-99	References		

POLICY:

Staff who suspect or have knowledge of an offender being an active suicide risk takes preventative action.

PROCEDURE:

1. If an offender is suspected of being a suicide risk or has voiced that they are contemplating suicide:
 - A. Talk to the offender:
 - 1.) If the offender is immediately available, talk to them and do not let them out of your immediate sight until you have a better understanding of their circumstances.
 - 2.) If they are not available, review offender information to determine as much relevant information as possible. Examples include but are not limited to current location, circumstances of situation, suicide history, mental health history, and any recent changes in behavior.
 - B. Attempt to determine the apparent degree of suicide risk based on the offender's comments and knowledge of the offender. This might include but are not limited to presence of a suicide plan, access to means, current mental state, expressed hopelessness, or expressed desire to die.
2. Develop a preliminary safety plan based on the information gathered. It is appropriate to contact suicide prevention professionals at 1-800-273-8255 or local suicide prevention resources (e.g. Foundation 2, crisis center, etc.) to seek consultation. The offender may participate in this phone call but does not have to if they are unwilling. The preliminary safety plan *may* include but is not limited to arrangement with family/friend/etc. to go to a hospital/agency they receive services from, contacting local law enforcement to do a welfare check, contacting family to go to where they are located, calling 911 to respond to their location (including if in a correctional residential facility), etc. Creating a "no suicide contract" is never an acceptable safety plan.

POLICY NUMBER 121-17
PAGE 2 OF 2

PROCEDURED: (continued)

3. Contact your Supervisor, as soon as practical.
4. Further consultation is made to appropriate mental health professionals either within the District or in the community, as soon as practical.
5. Appropriate documentation is completed.

BY ORDER OF:

Bruce Vander Sanden, Director