

	MARICOPA COUNTY SHERIFF'S OFFICE POLICY AND PROCEDURES	
	Subject INMATE SUICIDE PREVENTION	Policy Number DA-5 Effective Date 08-04-21
Related Information DS-2, <i>Safe Bed Intervention</i>	Supersedes DA-5 (07-17-15)	

PURPOSE

The purpose of this Office Policy is to establish guidelines and procedures for a comprehensive set of suicide prevention measures, and to assist employees in identifying and managing potentially suicidal inmates.

POLICY

It is the policy of the Office to ensure that reasonable actions are taken to identify and report at-risk inmates to Correctional Health Services (CHS). The Office takes into account that suicide and attempted suicide are serious health issues within a detention setting. These procedures are intended to prevent suicides and attempted suicides whenever possible.

DEFINITIONS

9-1-1 Tool: A rescue tool, for cutting materials used in suspension suicides or attempted suicides.

Employee: A person currently employed by the Office in a classified, unclassified, contract, or temporary status.

Exigent Circumstances: The sum of the conditions and information available in any event which, taken in their totality, dictate a need for immediate action.

Inmate: A person who has been accepted for confinement into an Office jail facility.

Prisoner: A person deprived of their freedom and kept under involuntary restraint, confinement, or custody, prior to being accepted into an Office jail facility.

Raptor Shears: A foldable medical shear used to cut clothing and other materials during lifesaving events. The shears can also be used in vehicular incidents to cut seatbelts and break windows.

PROCEDURES

1. **On-View Behaviors:**
 - A. The following procedures shall be used to report and document inmate behavior indicative of any possible psychological issues:
 1. When any employee observes an inmate exhibiting any erratic or unusual behavior, the employee shall report this behavior immediately to any on-duty supervisor and continue to observe the inmate until assistance arrives.

2. The supervisor shall respond to the inmate's location in order to observe and verify the inmate's behavior.
 3. If CHS has not been contacted, the supervisor shall then notify the CHS staff and provide them the inmate's name, booking number, current location, and describe the inmate's observed behavior.
 4. The events of the incident shall be documented into Sheriff's Inmate Electronic Data (SHIELD), which include, but are not limited to, the inmate's name and booking number; location of the incident; the observed inmate's behavior; all notifications made; the names of the responding detention officers, supervisor, and CHS staff; and any subsequent action taken at the direction of CHS and/or the shift supervisor. The SHIELD entry should also indicate times of all occurrences.
 5. An *Incident Report (IR)* shall be completed, as directed by the responsible shift supervisor.
- B. Any suicidal actions, statements, or any self-injurious behavior by an inmate, such as cutting themselves or banging their head, which may result in immediate harm to the inmate, will be reported immediately to CHS staff and any on-duty supervisor, as a medical emergency.
2. **Signs and Symptoms:** Certain signs and symptoms exhibited by a prisoner or inmate often foretell a possible suicide attempt. What the prisoner or inmate says and does at intake or booking, and during confinement as an inmate, are vital in detecting suicidal behavior. In evaluating an inmate's behavior, employees shall err on the side of caution. When in doubt, employees shall presume the inmate is suicidal and shall notify CHS staff and the on-duty supervisor immediately.
 3. **Situational Factors:** The initial period of incarceration is often a critical time for detecting potential suicides. Most suicides occur within the first 48 hours of incarceration. Situational factors which may affect inmate suicides include, but are not limited to, the following:
 - A. Minor or insignificant arrest history;
 - B. Juvenile;
 - C. Inmates with high status in the community;
 - D. Prior suicide by close family member or loved one;
 - E. Previously imprisoned and facing new serious charges or a long prison term;
 - F. Prior suicide attempt in a jail facility or the community, particularly of a recent nature;
 - G. Harsh, condemning, or rejecting attitudes of others; and
 - H. Inmates with a history of mental illness.
 4. **Evaluating Inmate Behavior:** Good communication initiated by employees may assist in detecting and preventing a suicide. Employees shall conduct themselves in a professional manner, as specified in Office Policy. To assist in evaluating an inmate's mental condition employees shall:
 - A. Be observant of unusual inmate conduct, such as the inmate giving away their possessions or of torn blankets, sheets, or clothing; and

- B. Talk to the inmate if they state that they are depressed; find out why, how serious the depression is, and whether or not they have a plan for suicide.
5. **Communicating with Suicidal Inmates:** If an inmate is clearly considering suicide, employees shall notify CHS staff immediately and continue to observe the inmate until assistance arrives. The best way to communicate with a suicidal inmate is to listen, make observations, and clarify the inmate's statement. Employees should not give advice.
6. **Supervising Suicidal Inmates:** Isolation greatly increases the likelihood of suicide; therefore, a potentially suicidal inmate should not be placed into isolation unless the inmate is constantly supervised. If employees have a reason to believe an inmate may be suicidal, they shall take immediate action which includes, but is not limited to, the following:
- A. Report any suicidal signs or symptoms immediately to CHS staff and the on-duty supervisor;
 - B. Upon a determination and at the direction of CHS and/or the on-duty supervisor, remove the inmate's clothing and place the inmate in a suicide-resistant blanket or smock, to provide additional precaution; and
 - C. Upon a determination and at the direction of CHS and/or the on-duty supervisor, place the inmate into a suicide-resistant cell or safe cell to maintain direct, continuous observation until a treatment plan is determined by CHS staff.
7. **Suicide Protocol:** In acute, emergency situations, with possible imminent danger of self-harm, a shift supervisor or CHS staff may order that an inmate be placed on suicide protocol.
- A. In all cases, a shift supervisor shall be responsible for notifying CHS staff when placing an inmate on suicide protocol. An entry shall be made in the SHIELD. When an inmate is placed on suicide protocol by a shift supervisor, detention personnel shall maintain constant observations of the inmate until CHS arrives to medically evaluate the inmate.
 - B. The reasons for implementing a suicide protocol may include, but are not limited to, any of the following:
 - 1. An inmate engaging in behavior that is likely to cause physical injury to themselves or someone else;
 - 2. An inmate making suicidal gestures or threats;
 - 3. An attempt to commit suicide is made; and
 - 4. The results of a medical assessment indicate there may be a need.
 - C. While on suicide protocol, the precautionary measures taken shall be the least restrictive available to ensure control and safety of the inmate.
 - 1. Regular, documented supervision of potentially suicidal inmates shall be maintained according to the risk level. CHS staff may specify any of the following conditions during a suicide protocol:
 - a. How often the inmate is to be observed. However, observations shall occur in irregular intervals, and never exceed more than 15 minutes. If an inmate is placed in a Safe Bed, an employee shall be assigned to continuously observe the inmate

and maintain a record of the observation on a *Safe Bed Intervention Form*, as specified in Office Policy DS-2, *Safe Bed Intervention*;

- b. The amount and type of clothing or linens the inmate may retain, including the use of a suicide blanket, if necessary;
- c. The amount and type of personal property the inmate may retain;
- d. The type of meals to be served. The inmate may be fed an alternative meal that does not require any paper, plastic, or other material that could be used to injure themselves or others;
- e. The inmate shall be provided an opportunity to drink water at least every two hours; and
- f. The expected duration of the suicide protocol, if known.

2. Significant changes in the inmate's status shall be reported to CHS staff.

D. CHS staff shall be responsible for modifying the conditions of a suicide protocol and for determining if and when suicide protocol is to be discontinued.

8. **Transportation of Inmates on Suicide Protocol:** Inmates that are on suicide protocol and are not housed in the Mental Health Unit (MHU) shall be transported to that facility, as soon as reasonably possible. Suicidal inmates shall be continuously monitored while awaiting transport to the MHU.

A. **Special Transport:** A Transportation Division Supervisor shall be contacted by the applicable facility employee and a request for a special transport shall be made. If the inmate is clothed in a suicide smock, the inmate shall be restrained during transport with a leather transport belt or a one-man restraint chain and leg irons to prevent the inmate from causing harm to themselves or others. The Transportation Division employee shall escort the inmate on suicide protocol directly to the MHU. Upon arrival, a MHU employee shall take immediate custody of the inmate.

B. **Transportation Restrictions:** Once housed in the MHU, inmates on suicide protocol are not generally transported outside the MHU for any reason, to include court. When an exception must be made, the movement must be authorized by CHS staff. One-on-one escort is provided by detention personnel within the Inmate Medical Services Unit. Special arrangements may be made with the Transportation Division for movement outside the facility. Direct observation of the inmate by a Transportation Division employee or Inmate Medical Services Unit employee is required at all times.

C. **Suicide Protocol Status Indicators:** Because inmates on suicide protocol are only housed in designated locations, the location itself is the primary indicator of status. Any time transportation is required to a location other than a designated suicide protocol housing area, inmates should be identified by wearing a suicide smock and belly belt restraint whenever possible. The suicide smock is solely used for suicidal inmates; therefore, their status is apparent to all employees responsible for their welfare.

D. **Suicide Smocks:** These smocks should be worn by the inmate at all times whenever outside the MHU. Necessary exceptions to this rule, such as when ordered by a court during a judicial proceeding or when under the direct care of healthcare staff, shall only be made with authorization from CHS staff. In all such cases where the inmate is not designated by location or suicide smock,

an employee shall be assigned to watch the inmate to ensure established suicide protocol precautions are maintained.

9. **Suicide Risk Assessment:** CHS staff shall evaluate inmates who demonstrate suicidal behavior and shall determine the appropriate intervention that best meets the needs of the inmate. These interventions may include options such as heightened employee or inmate interaction, a transition room or cell change, continuous observation, safe bed intervention, or referral for psychotropic medication. A shift commander must confirm the CHS staff order for medical Safe Bed Intervention, as specified in Office Policy DS-2, *Safe Bed Intervention*.
10. **Responding to an Attempted Suicide:** When a suicide attempt has been identified, the preservation of the life of an inmate shall take precedence over the preservation of a crime scene.
 - A. Jail facility employees shall consider any security risk factors prior to responding to an attempted suicide, especially in the case of maximum security or closed custody inmates and housing units.
 - B. The following actions shall be taken under normal conditions when an inmate has attempted to commit suicide or has sustained a deliberate self-inflicted injury:
 1. If the inmate is found hanging, the employee shall stay with the inmate and radio for assistance. The inmate should be raised up several inches, keeping the body as straight and vertical as possible, and held until a second responder can arrive on scene and cut the noose, using a *9-1-1* Tool or Raptor Shears, above the knot. The inmate shall be lowered to the floor, and within the scope of their Office provided training, employees shall provide cardio-pulmonary resuscitation (CPR).
 2. In case of self-inflicted wounds, employees shall stay with the inmate and radio for assistance. Enter the cell only when another employee is present. Employees shall remember employee safety, as the inmate may have a sharp instrument. Secure any sharp instrument the inmate may have and within the scope of their Office approved training, employees shall provide first aid.
 3. CHS staff shall be notified immediately and requested to respond to the scene. In jail facilities having no on-duty CHS staff, employees shall contact the Communications Division and request emergency medical service (EMS) response.
 - C. The suicide attempt shall be documented into SHIELD, to include, but not limited to, the inmate's name and booking number; location of the incident, the observed inmate's behavior; all notifications made; the names of the responding detention officers, supervisor, and CHS staff; and any subsequent action taken at the direction of CHS and/or the shift supervisor. The SHIELD entry should also indicate times of all occurrences.
 - D. An IR shall be completed. Any delay in response for security reasons shall also be documented in the IR.
11. **Suicide Attempt After-Action:** Following a suicide attempt, the jail facility commander shall be notified. When medical care or hospitalization is required, the Jail Crimes Unit, the Critical Incident Stress Management (CISM) team, and the Professional Standard Bureau (PSB) may be notified.
12. **Successful Suicide After-Action:** Immediately following a successful suicide, the jail facility commander, Jail Crimes Unit, CISM team, and the PSB shall be notified.

- A. If the jail facility commander has already been contacted, provide updates as necessary or as requested.
 - B. A detective assigned to the Jail Crimes Unit of the Major Crimes Division shall conduct an investigation of all suicides.
 - 1. The scene shall be secured; and
 - 2. Any cleanup of the area shall be delayed until the scene has been released by a Jail Crimes detective.
 - C. An IR shall be completed. Any delay in response for security reasons shall also be documented in the IR.
 - D. The PSB may conduct an administrative investigation into the suicide and provide an after-action report.
 - E. The CISM team may be used to provide assistance to any employee who responds to a suicide. The shift supervisor shall first assess the need for the team or services, and if necessary, request assistance.
13. **Training:** The Training Division shall provide all Office employees who interact with inmates training in understanding, identifying, and managing suicidal inmates. Employees involved in making decisions about the initiation of a suicide protocol shall be required to complete more specialized training provided by a licensed mental health professional using curriculum approved by CHS staff.