

**BUTTE COUNTY SHERIFF'S OFFICE
DEPARTMENTAL ORDER**

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TO: ALL PERSONNEL
FROM: SHERIFF-CORONER
SUBJECT: SUICIDE PREVENTION
DATE: August 27, 2014
ATTACHMENT: (1) Suicide Watch Form

POLICY: Correctional staff is trained to recognize common behaviors that a potential suicidal inmate may exhibit. Such behaviors will immediately be reported to the Team Sergeant and the Medical Unit. Inmates identified as potentially suicidal will be placed on Suicide Watch by Correctional staff, the Medical Unit, or Mental Health staff.

AUTHORITY:

- A. California Penal Code §6030
- B. California Code of Regulations, Title 15, Division 1, Chapter 1, §1219

**KORY L. HONEA
SHERIFF-CORONER**

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I. MENTAL HEALTH STAFF:

Mental health staff will be available on-site a minimum of forty (40) hours per week and always on-call for assessment of an inmate's level of suicide risk upon referral by the Medical Unit and/or Correctional staff.

II. INTAKE PROCEDURES:

a. Upon intake, the Intake Officer, through questions and observations, will be alert for warning signs that the inmate may be suicidal. Although there is no way to accurately predict whether an inmate is suicidal or not, the following predisposing factors are commonly found:

- i. Recent excessive drinking and/or use of drugs;
- ii. Recent loss of stabilizing resources, such as separation from family, friends, and/or job;
- iii. Severe guilt or shame over offense;
- iv. Current mental illness;
- v. Poor physical health or terminal illness;
- vi. Approaching an emotional breaking point.

Note: Should the Intake Officer believe the inmate is suicidal, the Team Sergeant and Medical Unit will be advised.

b. During the medical screening, the Medical Unit will make an assessment for the potential of suicidal behavior. The Medical Unit will complete the Suicide Assessment Sheet on inmates deemed suicidal. Suicidal inmates will be placed on Suicide Watch.

- i. Persons determined, at intake, to be suicidal shall be placed in docile waiting, if appropriate.
- ii. If persons determined to be suicidal must be placed in a holding cell they shall be ordered to change into a suicide resistant garment.
 1. The removal of clothing shall be conducted in an area of privacy and will not be observed by staff.
 2. Persons so ordered will be allowed to voluntarily comply; staff will only intercede if the person is unwilling to change into the protective apparel.

III. PLACEMENT CRITERIA FOR SUICIDE WATCH:

a. Criteria used to determine placement of suicidal persons should include:

- i. Is person actively trying to injure self?
- ii. Does person have a realistic plan to injure self?
- iii. Has the person expressed a desire or intent to harm or injure self?
- iv. Level of intoxication/impairment.
- v. History of suicide attempts.

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IV. PROCEDURES DURING INCARCERATION:

- a. During the inmate's incarceration, Correctional staff and the Medical Unit will be aware of the "high risk suicide periods" which include:
 - i. The first twenty-four (24) hours of confinement;
 - ii. Intoxication withdrawal;
 - iii. Trial and sentencing hearings;
 - iv. Impending release;
 - v. Decreased staff supervision;
 - vi. Weekends and holidays;
 - vii. Bad news from home/relatives.

- b. Signs and symptoms exhibited by an inmate often foretell a possible suicide and, if detected, could prevent such an incident. An individual may exhibit warning signs and symptoms which may include:
 - i. Depression (physical signs)
 - ii. Sadness and crying;
 - iii. Withdrawal or silence;
 - iv. Sudden loss or gain in appetite;
 - v. Insomnia;
 - vi. Apathy
 - vii. Sudden change in mood or behaviors
 - viii. Talking about or threatening suicide;
 - ix. Previous suicide attempts;
 - x. History of mental illness;
 - xi. Projecting hopelessness or helplessness;
 - xii. Speaking unrealistically about the future;
 - xiii. Giving away possessions;
 - xiv. Saving medications;
 - xv. Paranoid delusions or hallucinations.

- c. Inmates identified as potentially suicidal will be placed on Suicide Watch by Correctional staff, the Medical Unit, or Mental Health staff and will be housed in a high security observation cell whenever possible. Secondary housing consideration will be given to occupied cells or dormitories. Persons determined to be suicidal shall be ordered to change into a suicide resistant garment. Persons so ordered will be allowed to voluntarily comply; staff will only intercede if the person is unwilling to change into the protective apparel.

- d. Correctional staff will not remove an inmate from Suicide Watch.

- e. Before being housed it will primarily be the responsibility of the Intake Officer or Housing Officer to make intermittent, direct visual observations of inmates placed on Suicide Watch,

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however after being housed it will be primarily the appropriate floor officers responsibility to make intermittent, direct visual observations of inmates placed on Suicide Watch.

- i. If possible all custody personnel should assist in this process.
 - ii. These observations should be at approximately fifteen (15) minute intervals or more frequently, if necessary, but in no case will the observations exceed thirty (30) minute intervals.
 - iii. The Medical Unit will re-assess the inmate every eight (8) hours. Observations will be noted on the Suicide Watch form, (Attachment 1).
- f. The Medical Unit will refer inmates prone to suicide to the Mental Health staff. Intervention and treatment will be carried out in accordance with the direct orders of the responsible medical or mental health provider and/or medical unit protocols/standardized procedures.
- g. Correctional staff will intervene in suicide attempts. Immediately notify the Medical Unit, Team Sergeant, and administer first aid and/or CPR. An Incident Report will be completed on suicide attempts. If a suicide is successful, the Policy and Procedures for an "In-Custody Inmate Deaths", Departmental Order 5014 will be followed.