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Sheriff

*San Diego County*

**SHERIFF**

## LINE-UP TRAINING

### **Suicide Detection and Prevention Part 2**

**Topic #97**

(Overview of Inmate Safety Program)

*After discussing/reviewing the below training material in line-up (briefing), sworn staff shall sign off as completed in LMS. In the event a staff member is not present when this topic is discussed in line-up, they shall independently read, review, and complete the training.*

*Completion of this line-up training topic includes reviewing the associated standardized PowerPoint presentation available on the DTU SharePoint site ([#97-Standard Presentation](#)).*

*By clicking "Yes" to "Have you completed this activity?" in LMS, you are attesting that you have viewed, read, and completed the training activity.*

#### **I. PURPOSE**

The purpose of this training is to familiarize staff with the Inmate Safety Program and procedures to identify those inmates who may be an elevated risk for suicide.

#### **II. POLICY**

Inmates who are recognized and observed as being a potential suicide risk shall be assessed for consideration of placement into one of the defined Inmate Safety Program (ISP) housing options. Sworn staff shall immediately notify medical staff and the watch commander of any inmate that presents a potential danger to self, danger to others or unable to care for self. Suicide risk assessment for the ISP will be conducted by the facility gatekeeper. The gatekeeper is a Qualified Mental Health Provider (QMHP), or assigned designee in their absence. This training is conducted in accordance with DSB P&P [Section J.1- Safety Cells](#), [Section J.4 - Enhanced Observation Housing](#), and [Section J.5 – Inmate Suicide Prevention Practices & Inmate Safety Program](#).

#### **III. DISCUSSION**

Staff shall discuss and review the below topics and procedures related to the Inmate Safety Program as described in [DSB P&P Section J.5 – Inmate Suicide Prevention Practices & Inmate Safety Program](#).



A. DEFINITIONS

1. Qualified Mental Health Provider (QMHP)
  - a. Assigned Designee
2. Suicide
3. Suicide Attempt
4. Non-Suicidal Self Injury
5. Suicidal Ideation

B. RISK FACTORS FOR ISP HOUSING ASSESSMENT

The following are identified high suicide risk factors that when identified, require further assessment by the facility gatekeeper for *CONSIDERATION* of a placement into an ISP:

1. High publicity case with possible evasion of arrest or SWAT/SED standoff with serious felony charges, including but not limited to: homicide, rape, or child victim crimes.
2. Severe, life or death sentences.
3. The inmate states he/she is suicidal and/or made suicidal statements to sworn staff, medical, family, etc.
4. Previous suicide attempts (within the past five years).
5. Staff observation of depressed/emotional turmoil.

Other risk factors that could cause circumstantial concerns and may initiate an assessment for consideration of placement into ISP housing include, but are not limited to, the following.

6. Intoxication/withdrawal
7. History of psychiatric illness.
8. First time offender.
9. Physical signs of depression (sadness, crying, withdrawal or silence, sudden loss or gain in appetite, insomnia, mood variations, lethargy, etc.)

C. ASSESSMENT FOR PLACEMENT INTO A ISP HOUSING

1. Facility gatekeeper evaluation
2. Determination of appropriate ISP housing
3. Watch commander ISP placements (exigent circumstances)
4. Mental Health Advocacy Hotline

D. ISP HOUSING OPTIONS & PLACEMENT

1. Safety Cells - Staff shall discuss procedures for placements and observations as outlined in [DSB P&P Section J.1- Safety Cells](#).



2. Enhanced Observation Housing (EOH) - Staff shall discuss procedures for placements and observations as outlined in [DSB P&P Section J.4 - Enhanced Observation Housing](#).

E. OBSERVATION, MONITORING, ASSESSMENT, & CLEARANCE

1. Safety Cell observation and monitoring requirements.
2. EOH observation and monitoring
3. Nursing & medical assessment requirements
4. Gatekeeper observations
5. QMHP assessments
6. Post suicide attempts (if ED treatment is required)
7. ISP Clearance

F. DOCUMENTATION

1. Assessment ISRs - All ISP assessments, regardless of outcome, should be documented in an inmate status report. Meaning, if an inmate is assessed for placement in the ISP, and is deemed to NOT need ISP at that time, an ISR should still be written stating why the assessment was requested and the resulting outcome.
2. Placement ISRs
  - a. Incident type codes
  - b. Required content
3. Update ISRs
  - a. Incident type codes
  - b. Required content
4. Watch commander documentation – (when necessary)

<b>DATE:</b>	FEBRUARY 8, 2019
<b>NUMBER:</b>	J.1
<b>SUBJECT:</b>	SAFETY CELLS; DEFINITION AND USE
<b>RELATED SECTIONS:</b>	<a href="#">I.52</a> , <a href="#">I.89</a> , <a href="#">J.4</a> , <a href="#">J.5</a> , <a href="#">M.25</a> , <a href="#">MSD S.10</a> ; TITLE 15 & 24

PURPOSE

To ensure that safety cells throughout Sheriff's detention facilities are used for their intended purpose.

POLICY

Inmates who have been assessed for Inmate Safety Program (ISP) housing may be temporarily placed in a safety cell when the inmate is actively self-harming or actively assaultive. Book and Release (B&R) inmates at risk for suicide may be temporarily placed in a safety cell even when not exhibiting active self-harming or active assaultive behaviors. The staff recommending the safety cell placement will notify the watch commander.

Inmates returning from the Emergency Psychiatric Unit at San Diego County Psychiatric Hospital (EPU) with orders for Inmate Safety Program housing shall be housed according to DSB P&P J.5.

Safety cells are not to be used for punishment or a substitute for treatment.

DEFINITION

A safety cell is a single occupancy temporary housing unit constructed with a padded surface and other security features as outlined in Part 2, Section 1231.2.5 of Title 24-Minimum Standards for Local Detention Facilities. (Refer to DSB P&P section J.5 for additionally related definitions)

PROCEDURE

I. PLACEMENT

- A. Inmates may be placed in a safety cell temporarily if they are actively self-harming or actively assaultive. B&R inmates may be temporarily placed in a safety cell even when not exhibiting active self-harming or active assaultive behaviors. If the inmate is cooperative, all attempts should be made to obtain photos and fingerprints. A deputy will remain with the inmate and escort the inmate through the booking process prior to placement into a safety cell.
- B. An inmate placed into a safety cell shall have all of their clothing and property removed, including shoes, belts, removable rings, wristband, etc. Such property shall be stored in a secure location until the inmate is cleared. For security purposes, deputies will remain with the inmate during the process to ensure all items listed above are removed.
- C. All inmates placed in a safety cell must be issued a safety garment.

1. The safety garment is the only item of clothing the inmate may possess while in the safety cell.
2. The safety garment may only be removed from the inmate when specific identifiable risks to the inmate's safety are displayed after the initial placement (e.g., tearing, swallowing, covering his/her mouth with the garment, etc.). When a safety garment is removed the following notifications shall be made:
  - a. The mental/medical health staff shall be notified immediately.
  - b. The watch commander shall be notified immediately of the removal of the safety garment.
  - c. The reason the safety garment was removed must be articulated in an incident report.
3. All safety garments shall be cleaned and disinfected after each use.

## II. DOCUMENTATION

- A. A Jail Information Management System (JIMS) incident report, utilizing the SCP (safety cell placement) as the primary incident type code, shall be written on each inmate placed in a safety cell.
  1. Depending on the reason for placement, the following additional incident type codes shall be utilized.
    - a. Placement due to homicidal reasons the additional type code 1 shall be ZTH (ISP Type-Homicidal).
    - b. Placement due to self-injury reasons the additional type code 1 shall be ZTS (ISP Type-Self-Injury).
    - c. When staff determines the placement was due to either verbal or written communication, the additional type code 2 shall be ZMV (ISP Method-Verbal).
    - d. When staff determines the placement was due to active behavior, the additional type code 2 shall be ZMA (ISP Method-Active).
  2. The report shall also indicate if any force was used (refer to DSB P&P I.89).
- B. The need for continued retention must be documented by sworn staff in a JIMS incident report, utilizing SCU (safety cell update) as the primary incident type code every 4 hours to document the facility gatekeeper's authorization for continued retention in a safety cell.

## III. TRANSFERS

- A. If an inmate is transferred from one facility to another for placement into a safety cell, the following procedures will be followed:

1. The deputy from the originating facility will articulate in an incident report (utilizing primary type code SCP) the reason for the safety cell placement and will transport the inmate to the new facility.
2. Deputies assigned to the receiving facility will assume custody of the inmate at intake/processing and will conduct the actual placement of the inmate into a safety cell.
3. The deputies conducting the safety cell placement will write a supplemental safety cell placement report utilizing primary incident type code SCU.

#### IV. MONITORING

- A. Staff shall closely monitor any inmate placed in a safety cell. All checks, observations, assessments, and reviews will be documented on the Inmate Observation Log (J-19A Form).
  1. Every inmate in a safety cell shall be directly observed by sworn staff at random intervals not to exceed 15 minutes between checks. Such observations shall be documented on the J-19A Form. The inmate should be observed for the following:
    - a. Responsive to verbal commands.
    - b. Difficulty in breathing.
    - c. Evidence of vomiting or any other condition that may require medical attention.
    - d. Deputies should be cognizant of the inmate's physical condition. Medical staff must be notified immediately if the inmate exhibits any signs of medical distress, including agitated psychosis and/or agitated delirium.
    - e. A physician shall be contacted for an opinion anytime the inmate's status or condition warrants an evaluation.
  2. Each inmate shall have a nursing assessment within 30 minutes of placement into the safety cell. A medical assessment shall be completed every 24 hours thereafter or when clinically indicated. Such observations shall be documented on the J-19A Form and inmate health record.
  3. The facility gatekeeper shall observe the inmate within every 4 hours (from placement or last gatekeeper observation) to determine if continued retention in the safety cell is required. At any time within the 4 hours, the facility gatekeeper determines the inmate is no longer actively self-harming or actively assaultive, the inmate shall be moved from the safety cell to Enhanced Observation Housing (EOH). Such observations shall be documented on the J-19A Form and the inmate health record.

- a. If under exigent circumstances a watch commander determines to override the direction of the facility gatekeeper and requests the inmate be retained in a safety cell, the watch commander is required to articulate why the inmate was retained in a JIMS incident report.
4. A mental health consultation by a Qualified Mental Health Provider (QMHP), to determine the inmate's need for mental health services and suitability for retention in the safety cell, must occur within 12 hours of placement in a safety cell and no later than every 12 hours thereafter for as long as the inmate remains in the safety cell.
5. At the beginning and end of their shift, the watch commander or designee shall directly observe every inmate in a safety cell and review the J-19A Form.

## V. NUTRITIONAL REQUIREMENTS

- A. Deputies are responsible for providing meals during normal meal times. The deputy providing the meal must ensure there are no items that the inmate may use to inflict injury to self or cause damage to the cell, such as plastic utensils. All offerings or refusals of meals will be documented on the J-19A Form.
- B. All food and water served to inmates in a safety cell shall be served in disposable containers.
- C. All offerings or refusal of water will be documented on the J-19A Form using the checkboxes.
  1. Sworn staff shall offer water:
    - a. During normal meal times (breakfast, lunch, dinner).
    - b. When the inmate is awake.
    - c. Upon request by the inmate.
  2. The facility gatekeeper shall offer water during their observation of the inmate, which is every 4 hours.

## VI. REMOVAL

- A. The facility gatekeeper shall observe the inmate within every 4 hours (from placement or last gatekeeper observation) to determine if continued retention in the safety cell is required. If the facility gatekeeper determines the inmate is no longer actively self-harming or actively assaultive, the inmate shall be moved from the safety cell to EOH. Removal or clearance from the ISP is determined solely by a QMHP (refer to MSD P&P S.10 for further details).

B&R inmates removed from a safety cell will be cleared from the ISP for the purpose of release from custody. Inmates not seen by a QMHP and not cleared from ISP will be referred to EPU for further evaluation.

1. If under exigent circumstances a watch commander determines to override the direction of the facility gatekeeper and requests the inmate be retained in a safety cell, the watch commander is required to articulate why the inmate was retained in a JIMS incident report.
- B. When the medical or mental health condition of an inmate would be threatened by continued retention in any ISP housing, the inmate shall immediately be removed and transported to an emergency department. If a watch commander removes an inmate from ISP housing under such exigent circumstances and without consultation with a QMHP, the watch commander is required to articulate why the inmate was removed in a JIMS incident report.
- C. If the inmate is removed from the safety cell for the purpose of release from custody, the watch commander will consult with Sheriff's Medical personnel and arrange for transportation of the inmate to EPU
1. A Request for 72 Hour Detention (MH-302 Form) and a NetRMS incident report shall be completed by sworn staff prior to transfer to EPU.
  2. An inmate in custody under the Lanterman-Petris-Short Act (LPS) hold as defined in the Welfare and Institution Code (WIC) Sections 5000 (mental health or psychiatric hold), an MH-302 Form and NetRMS report are not required. Once an LPS hold is verified by medical personnel, a JIMS incident report shall be written referencing the court order associated with the case.
  3. The medical staff shall notify EPU of the impending transfer of the inmate.
  4. A deputy will transport the inmate to EPU and required documents to the psychiatrist. The deputy will remain with the released inmate until a safe and orderly transfer of services is completed and the psychiatrist on duty releases the deputy from further standby duties.

## VII. SANITATION

Safety cells shall be cleaned and disinfected using facility approved disinfectants or bleach solution after every use and every 24 hours when occupied.

## VIII. FIRE SAFETY

- A. Personnel responding to a fire in a safety cell should be aware of the toxicity of the smoke and shall use a self-contained breathing apparatus when suppressing the fire or evacuating inmates.
- B. A fire hose or a multi-purpose extinguisher shall be located within twenty (20) feet of all safety cells.



<b>DATE:</b>	FEBRUARY 8, 2019
<b>NUMBER:</b>	J.4
<b>SUBJECT:</b>	ENHANCED OBSERVATION HOUSING (EOH); DEFINITION AND USE
<b>RELATED SECTIONS:</b>	<a href="#">I.52</a> , <a href="#">J.1</a> , <a href="#">J.5</a> , <a href="#">M.25</a> , <a href="#">MSD S.10</a>

PURPOSE

To set forth uniformed procedures ensuring inmates who meet the criteria (as outlined in DSB P&P J.5) are housed in Enhanced Observation Housing (EOH), to prevent suicides.

POLICY

Inmates who have been determined by the facility gatekeeper to warrant placement in the Inmate Safety Program (ISP) because they present an increased risk for suicide and who do not require placement in a safety cell, shall be temporarily housed in EOH for the purpose of receiving closer observation and assessment for permanent housing (refer to DSB P&P J.5). The recommending staff will notify the watch commander of the placement. Inmates in EOH shall be closely monitored and directly observed by sworn staff at random intervals not to exceed 15-minutes between checks. Such observations shall be documented in the Jail Information Management System (JIMS).

Inmates in Book and Release (B&R) status will not be placed in EOH. EOH is not to be used for punishment or a substitute for treatment.

DEFINITION

EOH can be single cells, multiple occupancy modules, or medical isolation for temporary housing. EOH provides close observation and assessment of inmates who may be at an elevated risk for suicide. (Refer to DSB P&P section J.5 for additionally related definitions)

PROCEDURE

I. PLACEMENT

- A. When placement into EOH is deemed necessary during the intake process, a deputy will remain with the inmate and escort the inmate through the booking process prior to being placed in EOH. The inmate will be given the opportunity to use the telephone per section 851.5 of the Penal Code.
- B. An inmate placed in EOH shall have all of their clothing, wristband, and property removed. Such property shall be stored in a secure location until the inmate is cleared. For security purposes, deputies will remain with the inmate during the process to ensure all items listed above are removed.
  - 1. All inmates placed in EOH will be issued a safety garment, two security blankets, and shower shoes.

2. A safety garment is the only item of clothing the inmate may possess while in EOH. Shower shoes may be removed if they are used for any other purpose than intended. Documentation in an incident report is needed if shower shoes are not given. All safety garments shall be cleaned and disinfected after use. If the inmate is housed in EOH over 48 hours, a new garment will be issued as needed based on sanitary conditions.
  3. Showers, dayroom, television, and social phone calls will be offered in accordance with Title 15 guidelines.
  4. Hygiene items will be provided as needed by the housing deputy and immediately returned after use.
  5. Access to personal property, recreation yard time or social visits is not permitted.
  6. Access to reading material (books, magazines, newspapers) is permitted. Staff must ensure magazines or other reading material is free of staples or bindings of such nature.
  7. Professional visits and phone calls shall be permitted in accordance with DSB P&P sections N.5 and P.15. Inmates shall be dressed in inmate clothing to attend professional visits (no safety garments).
  8. Inmates housed in EOH with low-risk designation may attend court. Inmates shall be dressed in inmate clothing to attend court (no safety garments). Inmates deemed high risk, will not attend court. Notification to the court will be made per DSB P&P M.44.
- C. EOH is available at Las Colinas Detention and Reentry Facility, Vista Detention Facility, San Diego Central Jail, and George Bailey Detention Facility.
1. Inmates who are housed at other facilities who are determined to warrant EOH housing shall be transferred to an EOH-enabled facility.
  2. Each EOH-enabled facility will designate and identify an appropriate housing area within the facility for placement of the EOH unit.

## II. DOCUMENTATION

- A. A JIMS incident report, utilizing EOH (enhanced observation housing) as the primary incident type code shall be written on each inmate placed into EOH.
1. The incident report must clearly articulate the reasons for placement in EOH. Depending on the reasons for placement, the following additional incident type codes shall be used.
    - a. Based on the facility gatekeeper's assessment, for placement due to homicidal reasons, the additional type code 1 shall be ZTH (ISP Type-Homicidal). A recommendation for a single cell, multiple occupancy modules, or medical isolation EOH housing will be made.

- b. Placement due to self-injury reasons the additional type code 1 shall be ZTS (ISP Type-Self-Injury).
  - c. When staff determines the placement was due to either verbal or written communication, the additional type code 2 shall be ZMV (ISP Method-Verbal).
  - d. When staff determines the placement was due to active behavior, the additional type code 2 shall be ZMA (ISP Method-Active).
2. A JIMS incident report utilizing EOU (enhanced observation update) as the primary incident type code shall be documented by sworn staff at least every 24 hours or after each Qualified Mental Health Provider (QMHP) assessment to document the continued need or clearance from ISP housing.

### III. TRANSFERS

- A. In the event an inmate is transferred from one facility to another for placement into EOH, the following procedures will be followed:
  1. Placement into EOH during the intake process, refer to aforementioned subsection I.B.
  2. The deputy from the originating facility will articulate in an incident report the reason for the EOH placement and will transport the inmate to the new facility. The originating facility's watch commander will approve the incident report and contact and brief the watch commander or designee at the receiving facility.
  3. Deputies assigned to the receiving facility will assume custody of the inmate at intake/processing and will coordinate with the facility charge nurse to have the inmate medically assessed prior to placement into EOH. A supplemental incident report will be written documenting placement and of the assessment by facility medical staff.

### IV. MONITORING

- A. Deputies will closely monitor and directly observe inmates in EOH at random intervals not to exceed 15-minutes between checks.
  1. At the conclusion of the safety check, the deputy will document the safety check in JIMS utilizing the EOH Welfare Check event type. The description field of the entry shall include the name(s) and or ARJIS(s) of the sworn staff that conducted the check and accurate disposition. The count field of the EOH Welfare Check entry must indicate the number of inmates in the cell/module. Pertinent information (e.g., checks okay, observations, assessments, reviews, etc.) encountered during the safety checks, shall be noted in the notes section of the entry. Once all necessary fields are completed, the sworn staff making the entry will immediately close the EOH Welfare Check.

2. In the event an EOH Welfare Check requirement cannot be met, the deputy of the affected area shall provide a documented explanation in the notes field of the EOH Welfare Check entry and must immediately notify the housing unit supervisor. Upon review of the JIMS area activity log, the supervisor shall make a notation in the notes field utilizing the Supervisor's Log Review event type. The entry shall state the area supervisor is aware that the EOH Welfare Check was not conducted within the required time period.
  3. Deputies should be cognizant of the inmate's physical condition that may require medical attention. Medical staff must be notified immediately if the inmate exhibits any signs of medical distress, including agitated psychosis and/or agitated delirium. A physician shall be contacted for an opinion anytime the inmate's status or condition warrants an evaluation.
  4. Modification to the documentation of safety checks and or information identifying EOH units shall be outlined via a facility green sheet.
- B. Each inmate shall have a nursing assessment within 30 minutes of placement into EOH. A nursing assessment shall be completed every 24 hours thereafter or when clinically indicated. (Refer to MSD.S.10 for further details).
  - C. Within 24 hours of placement into EOH, and every 24 hours thereafter, an inmate shall have a mental health consultation/evaluation by a QMHP to determine the inmate's need for mental health services and their suitability for continued retention in the ISP. (Refer to MSD.S.10 for further details).
  - D. At least once per shift, the watch commander will observe EOH inmates and document such in the JIMS Area Activity Log.

#### V. NUTRITIONAL REQUIREMENTS

- A. All food and water shall be served in soft, disposable containers.
- B. Deputies are responsible for providing meals during normal meal times. The deputy providing the meal must ensure there are no items that the inmate may use to inflict injury such as plastic utensils. Disposable cardboard utensils are the only utensil authorized in EOH.
- C. Any refusals of meals will be documented in the inmate's JIMS history.

#### VI. REMOVAL

- A. Inmates can be moved from one housing assignment to another within the ISP based on the observations and direction of the facility gatekeeper. An inmate that becomes actively-self harming or actively assaultive may be moved from EOH to a safety cell.
- B. When the medical or mental health condition of an inmate would be threatened by continued retention in any ISP housing, the inmate shall immediately be removed and transported to an emergency department. If a watch commander removes an inmate from

ISP housing under such exigent circumstances and without consultation with a QMHP, the watch commander is required to articulate why the inmate was removed in a JIMS incident report.

- C. When an inmate is removed from EOH for the purpose of release from custody, the watch commander will consult with a QMHP to determine whether the inmate is likely to pose a threat to themselves or others. If the inmate does not pose a threat, they will be released following established release procedures. If the inmate is actively expressing suicidal ideations the following will occur:
1. A Request for 72 Hour Detention (MH-302 Form) and a NetRMS incident report shall be completed by sworn staff prior to transfer to the Emergency Psychiatric Unit at San Diego County Psychiatric Hospital (EPU).
  2. The medical staff shall notify EPU of the impending transfer of the inmate.
  3. A deputy will transport the inmate to EPU, and provide the required documents to the psychiatrist. The deputy will remain with the released inmate until a safe and orderly transfer of services is completed and the psychiatrist on duty releases the deputy from further standby duties.

## VII. SANITATION

EOH units, to include single cells, multiple occupancy modules, or medical isolation shall be cleaned and disinfected using facility approved disinfectants or bleach solution after every use and every 24 hours when occupied.

**San Diego County Sheriff's Department Detention Services Bureau – Manual of Policies and Procedures**

<b>DATE:</b>	MAY 15, 2019
<b>NUMBER:</b>	J.5
<b>SUBJECT:</b>	INMATE SUICIDE PREVENTION PRACTICES & INMATE SAFETY PROGRAM
<b>RELATED SECTIONS:</b>	<a href="#">J.1</a> , <a href="#">J.3</a> , <a href="#">J.4</a> , <a href="#">M.25</a> , <a href="#">MSD S.10</a>

PURPOSE

To set forth procedures for detention staff to identify those inmates who may be an elevated risk for suicide.

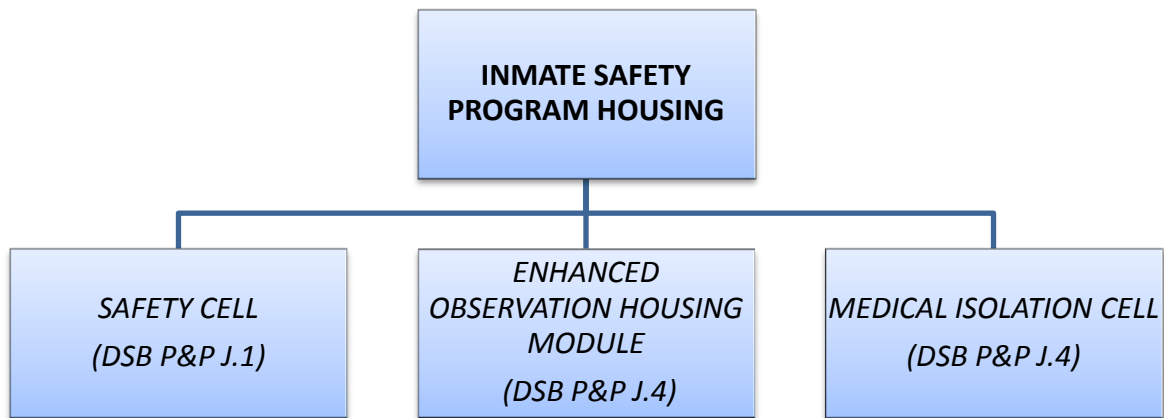
POLICY

Inmates who are recognized and observed as being a potential suicide risk shall be assessed for consideration of placement into one of the defined Inmate Safety Program (ISP) housing options. Sworn staff shall immediately notify medical staff and the watch commander of any inmate that presents a potential danger to self, danger to others or unable to care for self.

Suicide risk assessment for the ISP will be conducted by the facility gatekeeper. The gatekeeper is a Qualified Mental Health Provider (QMHP), or assigned designee in their absence.

DEFINITION

ISP housing is defined as placement into any of the following housing options for the purpose of providing proper intervention, close observation, and assessment of inmates who may be at an elevated risk for suicide.



**Qualified Mental Health Provider (QMHP)** - Refers to Psychologist, Psychiatrist, Licensed Mental Health Clinician (MHC), Psychiatric Nurse Practitioner (PNP), or a contracted Psychiatric Registered Nurse (PRN).

**Assigned Designee** - Refers to staff assigned to perform certain tasks when a QMHP is not present in the facility. The assigned designee will be an assigned registered nurse for the shift at each facility.

The following definitions will be used by QMHP in their reports. Sworn staff should be familiar with the definitions.

**Suicide** - Death caused by self-directed injurious behavior with intent to die as a result of the behavior.

**Suicide Attempt** - A non-fatal, self-directed, potentially injurious behavior with intent to die as a result of the behavior; might not result in injury. This includes behavior that would likely have resulted in death or serious injury had staff not intervened.

**Non-Suicidal Self Injury** – Direct and deliberate destruction of one’s own body tissue in the absence of the intent to die.

**Suicidal Ideation** - Thinking about, considering, or planning suicide.

## PROCEDURE

### I. RISK FACTORS FOR ISP HOUSING ASSESSMENT

- A. The following are identified high suicide risk factors that when identified, require further assessment by the facility gatekeeper for consideration of placement into an ISP housing.
  - 1. High publicity case with possible evasion of arrest or SWAT/SED standoff with serious felony charges, including but not limited to: homicide, rape, or child-victim crimes.
  - 2. Severe, life or death sentences.
  - 3. The inmate states they are suicidal and or made suicidal statements to sworn staff.
  - 4. Previous suicide attempts (within the past five years).
  - 5. Staff observation of depressed/emotional turmoil.
- B. Other risk factors that could cause circumstantial concerns and may initiate an assessment for consideration of placement into an ISP housing include, but are not limited to, the following:
  - 1. History of psychiatric illness.
  - 2. First time offender.

3. Intoxication/withdrawal.
4. Severe Aggressiveness
5. Physical signs of depression (sadness, crying, withdrawal or silence, sudden loss or gain in appetite, insomnia, mood variations, lethargy, etc.).

## II. ASSESSMENT FOR PLACEMENT INTO AN ISP HOUSING

- A. All inmates requiring an assessment and consideration for placement into an ISP housing due to suicidal risk shall be evaluated by the facility gatekeeper.
- B. If the facility gatekeeper determines the inmate requires placement into the ISP, they shall determine the appropriate ISP housing (e.g. safety cell vs. EOH). Actively self-harming or actively assaultive inmates may be temporarily placed in a safety cell. The watch commander shall be notified of placements into ISP.
- C. If under exigent circumstances a watch commander determines an inmate requires placement in ISP housing either without consultation or recommendation from the facility gatekeeper, the watch commander is required to articulate why the inmate was placed in a JIMS incident report.
- D. All calls through the Mental Health Advocacy Hotline will be answered by a detentions information assistant (DIA) assigned to SDCJ. The DIA will complete the Mental Health Advocacy Hotline caller log. The information received will be shared, without delay, with the on-duty watch commander at the inmate's assigned housing facility. The watch commander will contact the on-duty gatekeeper to determine the inmate's need for a mental health evaluation.

## III. INMATES PLACED INTO A SAFETY CELL (REFER TO DSB P&P J.1)

## IV. INMATES PLACED IN ENHANCED OBSERVATION HOUSING MODULE OR MEDICAL ISOLATION (REFER TO DSB P&P J.4)

## V. INMATES PLACED IN THE PSU (REFER TO DSB P&P M.25)

## VI. DURING INTAKE

- A. Every inmate shall be screened during the intake process for the suicide risk factors indicated in Section I and assessed in accordance with the procedures outlined in this policy. If the facility gatekeeper determines placement into an ISP housing is required, the following shall occur:
  1. Actively self-harming or actively assaultive inmates may temporarily be placed in a safety cell (refer to DSB P&P J.1).
  2. Inmates not actively self-harming and not actively assaultive may be housed in an EOH, except inmates in Book and Release (B&R) status (refer to DSB P&P J.1.).



3. The watch commander is to receive notification of the ISP placement.
4. When an arrestee is medically unstable, the facility shall medically reject the arrestee and refer the arresting officer to an emergency department for evaluation.
5. At intake medical screening at SDCJ, VDF or LCDRF, if an arrestee states they are suicidal or the facility gatekeeper determines the arrestee would require placement in the ISP, the inmate shall be accepted for placement. If the inmate is in urgent need of an assessment with a psychiatrist for immediate psychotropic medication to control symptoms of aggression or psychosis, the arrestee will be medically rejected and the arresting officer will be referred to the Emergency Psychiatric Unit at the San Diego County Psychiatric Hospital (EPU) for evaluation. Inmates initially rejected from VDF should be transported to SDCJ after the evaluation at EPU.
6. For arrestees/inmates with suicidal risk evaluated by an EPU psychiatrist and returning to a facility:
  - a. The EPU psychiatrist orders the arrestee/inmate to be admitted to a psychiatric stabilization unit, the inmate shall be housed according to the order (refer to DSB P&P M.25).
  - b. If the EPU psychiatrist recommends ISP housing and/or safety restrictions (e.g. a recommendation for a safety cell placement or no safety garment) the facility gatekeeper shall determine the appropriate ISP housing and/or safety restrictions. When EOH is deemed appropriate instead of a safety cell, the facility gatekeeper will call the EPU psychiatrist for further consultation and updated order.

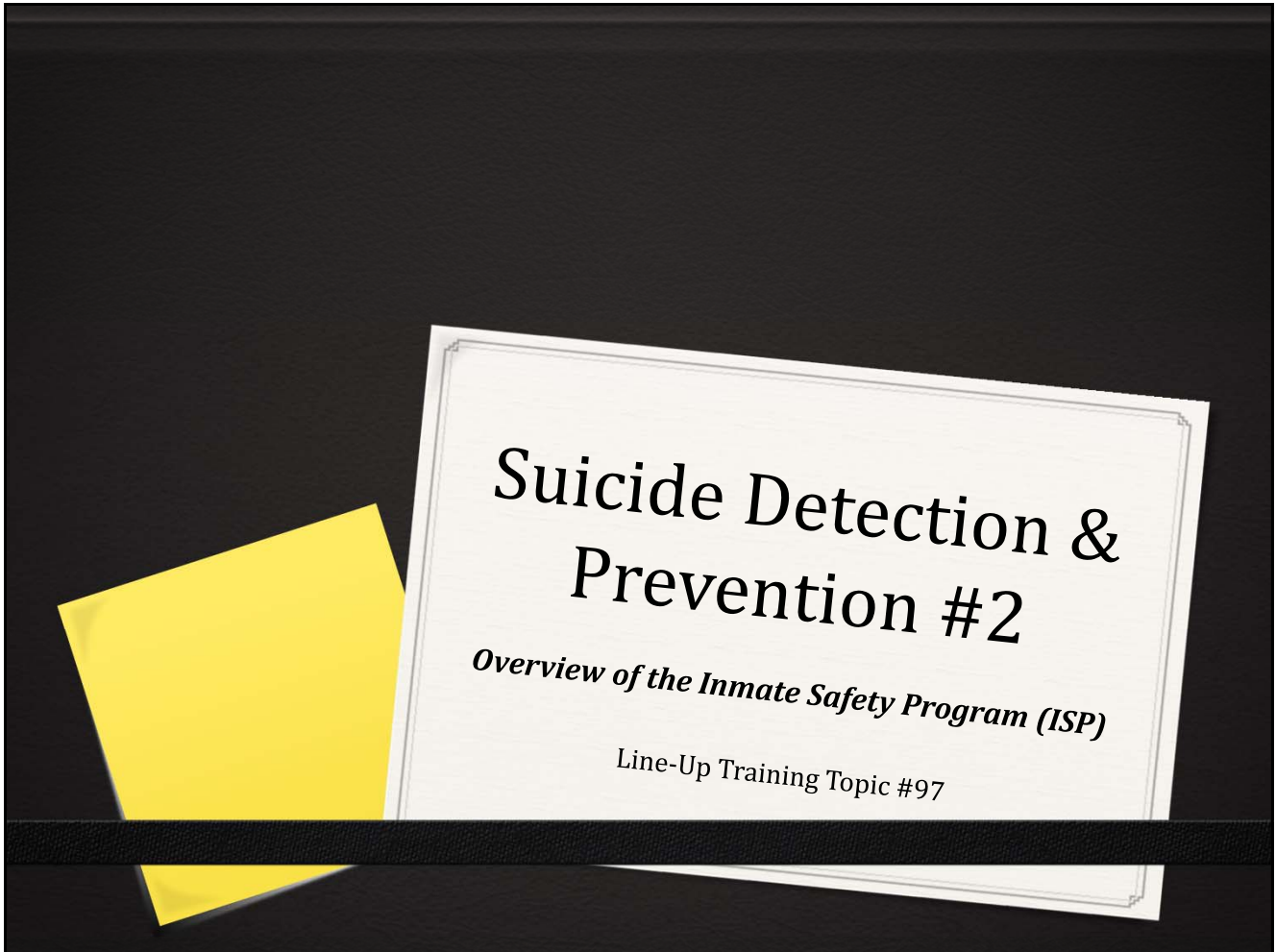
## VII. POST SUICIDE ATTEMPTS (While in custody)

- A. For a post-suicide attempt inmate that does not require transportation to the emergency department, the inmate will be evaluated by facility medical staff and assessed by the facility gatekeeper for ISP housing.
- B. For a post-suicide attempt while in custody an inmate that requires immediate treatment for physical medical problems in an emergency department, the inmate shall be transported to the closest emergency department. The inmate shall also be evaluated immediately by a psychiatrist at EPU for appropriate care prior to the inmate returning to a detention facility. Upon return to a facility, the facility gatekeeper will review the EPU documentation and determine the appropriate housing assignment.

## VIII. REMOVAL/CLEARANCE FROM THE INMATE SAFETY PROGRAM

- A. Inmates can be moved from one housing assignment to another within the ISP based on the observations and direction of the facility gatekeeper. An inmate that is no longer self-harming or actively assaultive shall be moved from a safety cell to EOH and conversely, an inmate that becomes actively-self harming or actively assaultive may be moved from EOH to a safety cell.

1. If under exigent circumstances a watch commander determines to override the direction of the facility gatekeeper and requests the inmate be retained in ISP housing, the watch commander is required to articulate why the inmate was retained in a JIMS incident report.
- B. Removal/clearance from the ISP is determined solely by a QMHP (refer to MSD P&P S.10 for further details).
- C. When the medical or mental health condition of an inmate would be threatened by continued retention in any ISP housing, the inmate shall immediately be removed and transported to an emergency department. If a watch commander removes an inmate from ISP housing under such exigent circumstances and without consultation with a QMHP, the watch commander is required to articulate why the inmate was removed in a JIMS incident report.



# Suicide Detection & Prevention #2

*Overview of the Inmate Safety Program (ISP)*

Line-Up Training Topic #97



# POLICIES TO DISCUSS

- o J.5 Inmate Suicide Prevention Practices & Inmate Safety Program (ISP)
- o J.4 Enhanced Observation Housing (EOH)
- o J.1 Safety Cells
- o MSD.S.10 Suicide Prevention & Inmate Safety Program (MSD Policy and Procedure)

# DEFINITIONS

Qualified Mental Health Provider (QMHP)

Assigned Designee

Facility Gatekeeper

Suicide

Suicide Attempt

Non-Suicidal Self Injury (NSSI)

Suicidal Ideation

# QUALIFIED MENTAL HEALTH PROVIDER (QMHP)

Refers to psychologist, psychiatrist, licensed mental health clinician (MHC), psychiatric nurse practitioner (PNP), or a contracted psychiatric registered nurse (PRN).





# ASSIGNED DESIGNEE

Refers to staff assigned to perform certain tasks when a QMHP is not present in the facility. The assigned designee will be an assigned registered nurse for the shift at each facility.



# FACILITY GATEKEEPER

The gatekeeper is a qualified mental health provider (QMHP) or assigned designee in their absence.





# SUICIDE

Death caused by self-directed injurious behavior with intent to die as a result of this behavior.



# SUICIDE ATTEMPT

A non-fatal, self-directed, potentially injurious behavior with the intent to die as a result of the behavior; might not result in injury. This includes behavior that would likely have resulted in death or serious injury had staff not intervened.



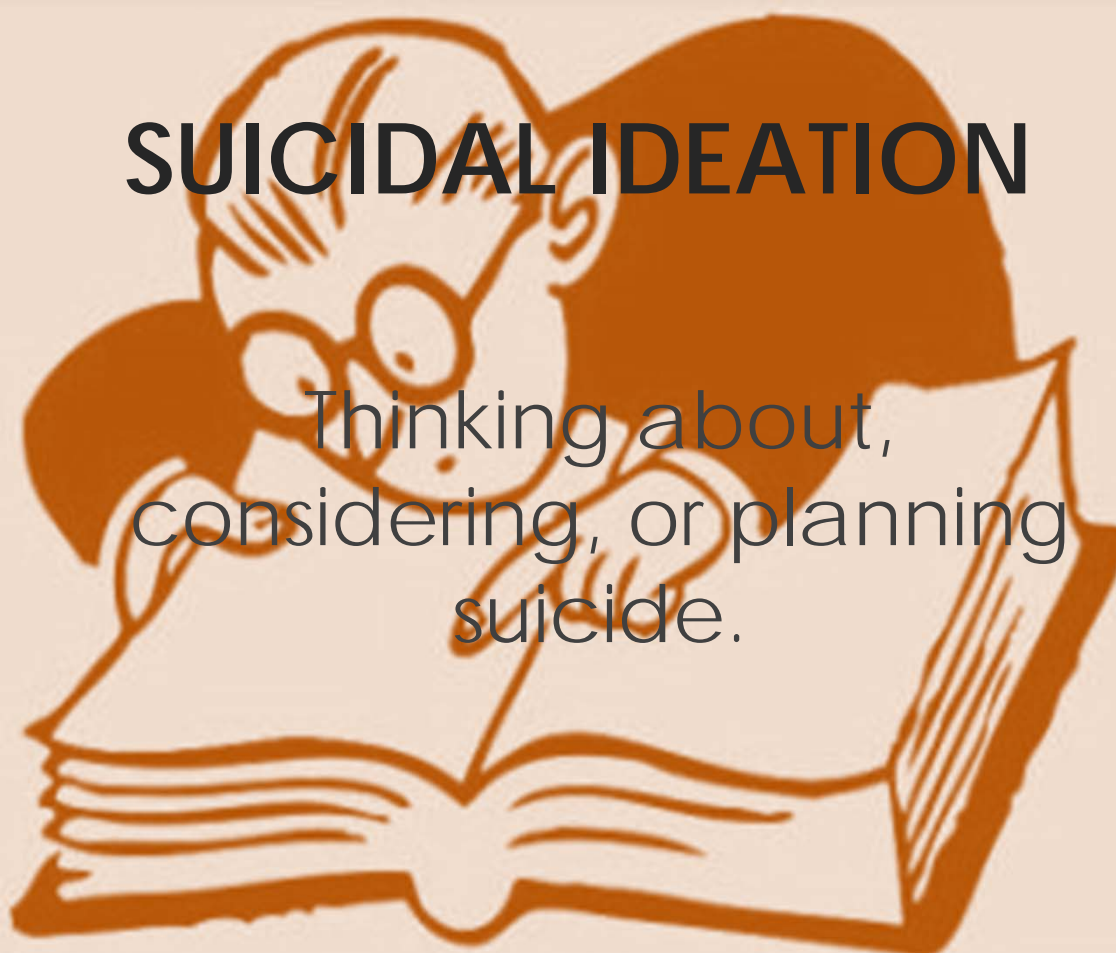
# NON-SUICIDAL SELF INJURY (NSSI)

Direct and deliberate  
destruction of one's own body  
tissue in the absence of the  
intent to die.



# SUICIDAL IDEATION

Thinking about,  
considering, or planning  
suicide.







## RISK FACTORS THAT REQUIRE FURTHER ASSESSMENT

1. High Publicity Case
2. Severe, life or death sentences.
3. The inmate states he/she is suicidal and/or made suicidal statements to sworn staff.
4. Previous suicide attempts (within the past five years).
5. Staff observation of depressed/emotional turmoil.

## RISK FACTORS THAT *MAY* INITIATE AN ASSESSMENT

1. History of psychiatric illness.
2. First time offender.
3. Intoxication/withdrawal.
4. Severe Aggressiveness.
5. Physical signs of depression.

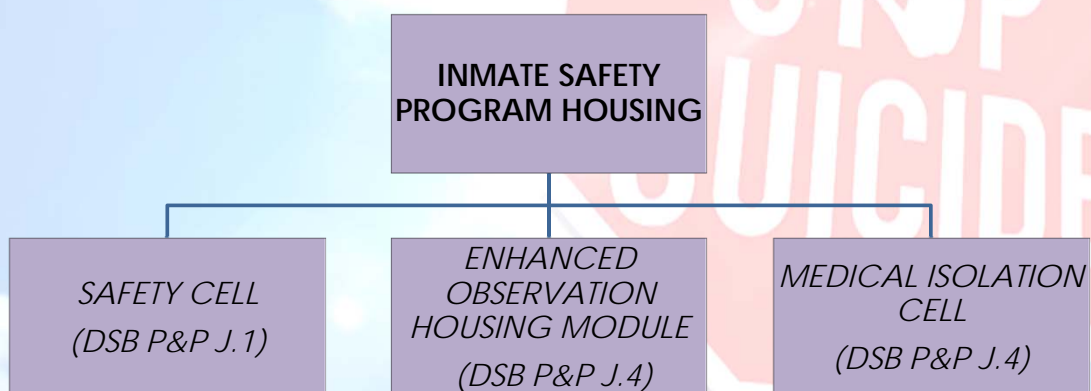
# ASSESSMENTS

- ✓ Facility Gatekeeper is responsible for evaluation/determination of the need for ISP placement.
- ✓ In *exigent* circumstances, the watch commander may determine ISP placement is necessary.  
*(requires WC documentation)*





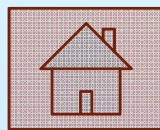
# INMATE SAFETY PROGRAM HOUSING OPTIONS



\*Inmate safety program housing is not to be used for punishment or a substitute for treatment.

## SAFETY CELLS

- Only **ACTIVELY** self-harming or **ACTIVELY** assaultive inmates may be temporarily placed in a safety cell.
- The facility gatekeeper shall assess the inmate within every 4 hours to determine if continued retention in the safety cell is required.
- If the facility gatekeeper determines the inmate is no longer actively self-harming or actively assaultive, the inmate shall be moved from the safety cell to Enhanced Observation Housing (EOH).



## ENHANCED OBSERVATION HOUSING (EOH)

- Inmates that require placement in the Inmate Safety Program (ISP) that do not meet the criteria for a safety cell, shall be temporarily placed in EOH to provide close observation and assessment.
- An inmate that becomes actively-self harming or actively assaultive may be moved from EOH to a safety cell.

# FLUID SYSTEM BASED ON OBSERVATIONS

*SAFETY CELL*

*ENHANCED  
OBSERVATION  
HOUSING*



## DURING INTAKE

- All inmates screened for suicide risk factors. If ISP housing is deemed necessary by the facility gatekeeper:
  - WC will be notified of need for placement (safety cell or EOH)
  - Any medically unstable inmate will be rejected and sent to ER, then EPU prior to acceptance.
- If any differing recommendations between EPU doctor and the facility gatekeeper, the EPU doctor is to be contacted for further consult/update.

## SAFETY CELL PLACEMENT

- All clothing, property, etc. removed from inmate.
- **ALL** are issued a safety garment.
- Justification needed for removal of safety garment.

## EOH PLACEMENT

- All clothing, property, etc. removed from inmate. **ALL** are issued a safety garment, two security blankets, and shower shoes.
- Showers, dayroom, television, and professional, and social phone calls will be offered.
- Access to books, magazines, and newspapers is permitted.

# MONITORING

Staff shall closely monitor all inmates in ISP housing.

Every inmate shall be directly observed by sworn staff at ***RANDOM*** intervals not to exceed 15 minutes between checks.



15 min



# NURSING ASSESSMENTS

## SAFETY CELLS

- Initial nursing assessment within 30 minutes of placement
- Facility gatekeeper observation every 4 hours (for continued retention)
- Medical assessment every 24 hours thereafter (if retained in safety cell)

## EOH

- Initial nursing assessment within 30 minutes of placement.
- Nursing assessment every 24 hours thereafter

# QMHP ASSESSMENTS

- In the event an inmate is continuously retained in a safety cell, a QMHP assessment is to be completed within every 12 hours.
- For EOH, Initial QMHP assessment within 24 hours.

# POST SUICIDE ATTEMPT

If the inmate requires immediate treatment in an emergency department:

- Evaluation by EPU psychiatrist prior to returning to the facility.
- Facility gatekeeper reviews EPU orders for ISP placement.

# ISP CLEARANCE

- Removal/clearance from ISP is determined solely by a QMHP.
- Two consecutive "*Low Risk*" QMHP assessments.
- 12-24 hours between each QMHP assessment.
- Exigent removal due to medical condition requires WC approval and documentation (if done without QMHP consult)

# DOCUMENTATION

- ✓ Assessment ISRs
- ✓ Placement ISRs
- ✓ Update ISRs
- ✓ Watch Commander documentation
- ✓ J-19A Form  
(safety cells only)

