

Suicide Prevention Program (Title 15, Section 1329; NCCHC)

736.1 PURPOSE:

The San Bernardino County Probation Department believes the preservation of human life supersedes all other facility concerns. It is the Department's number one priority to prevent suicide and affirm that human life is to be protected in our Juvenile Detention and Assessment Centers (JDACs) and Treatment Facilities (TFs). This Suicide Prevention Program is intended to reduce the risk of youth suicide through risk identification and appropriate intervention by utilizing the following elements to increase awareness and prevent suicide:

- A. Suicide Prevention Training.
- B. Staff Training.
- C. Prevention.
- D. Intake Screening/Identification/Follow-up Assessment (Mental Health/Medical Services).
- E. Referral process to mental health services for assessment and services.
- F. Communication between youth supervision, healthcare, and behavioral health staff for clear and current information sharing about youth at risk for suicide.
- G. Housing/Classification.
- H. Precautionary Protocols/Levels of Observation for monitoring youth identified at risk for suicide.
- I. Safety Interventions/Housing considerations and Treatment strategies, including trauma-informed approaches.
- J. Release Planning.
- K. Reporting.
- L. Critical Incident Review.
- M. Inspections.

736.2 DEFINITIONS:

Code Blue: A radio announcement used to indicate a medical emergency for any individual within a JDAC or TF.

Individualized Treatment Program (ITP): A written plan designed to meet the specialized needs of youth, to reinforce positive behavior, teach needed skills, and create an environment in which they can achieve required behavioral competencies.

Individualized Treatment Watch (ITW): An immediate and critical level of observation based on documented special needs of youth on an ITP.

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Massachusetts Youth Screening Instrument (MAYSI): A screening completed during the booking process for every youth between the ages of 12-17 entering a JDAC. The screening serves as a tool to identify youth with reported or current mental/emotional distress or patterns of problem behavior. The MAYSI is not intended to render a diagnosis and does not take the place of more comprehensive assessments that are necessary for decisions regarding long-range placement or treatment. All completed MAYSI screenings will be reviewed by the Forensic Adolescent Services Team (FAST). MAYSI-2 is the second version of MAYSI and MAYSIWARE is the electronic version.

Paper Spoon Meal: A regular meal without plastic flatware or containers provided to youth who meet any of the following criteria:

1. Any youth who demonstrates, has any intent on harming, or threatens to misuse items issued to cut themselves or subjects others to similar harm.
2. Any youth with a history of cutting within the past year.
3. Any youth that is booked who came directly from a mental health facility due to self-harm or the intent to harm others.
4. All youth on Suicide Observation Status 3 (SOS 3).
5. Any youth who uses a regularly issued spoon in the destruction of county property (i.e. jam room door, clog toilet, etc.)
6. Any youth who makes a weapon with a regularly issued spoon.

Suicide Observation Status (SOS) Evaluation Log: A log entry completed in a youth's events page in Caseload Explorer (CE) to document initial SOS and subsequent observations depending on the SOS level.

Suicide Attempts: Behaviors that result in or have the potential for resulting in intentional serious injury or death of one's self.

Suicide Prevention Treatment Plan (SPTP): A Suicide Prevention Treatment Plan will contain a list of pertinent facts, coping strategies, and resources about youth who are considered at risk for suicide. The SPTP is designed as a guide for staff to provide the appropriate supervision, intervention, and referral to ensure the safety of the youth.

Suicidal Signs:

1. Statements, including but not limited to:
 - (a) Alluding to non-specified drastic action.
 - (b) Alluding to or specifying an intent to kill one's self.
 - (c) Contemplating the impact of one's death on others.
 - (d) Alluding to a wish to be dead.
 - (e) Expressing apathy about life or future.
 - (f) Expressing severe depression, remorse, guilt, hurt, or rejection.

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- (g) Indicating a severe inability to cope with detention.
 - (h) Expressing self-condemnation.
 - (i) Statements by others that the youth wants to kill themselves.
 - (j) An intense feeling of loss of a loved one (especially due to suicide).
 - (k) Responsibility for the death of a loved one.
 - (l) Do not rely on a youth's denial of suicidal thoughts. All youth may experience the emotional crisis of detention and are potential victims.
2. Behaviors, including but not limited to:
- (a) Recent suicidal ideations or prior attempts.
 - (b) Dangerous risk-taking or self-injurious behavior.
 - (c) Engaging in self-injurious acts that are not inherently life-threatening, but symbolic of suicide attempts, such as superficial cutting and/or scratching wrists, draping clothing around the neck.
 - (d) Anxiety, depression.
 - (e) Euphoric behavior after depression.
 - (f) Disorientation, isolation, or withdrawal.
 - (g) Lack of emotion.
 - (h) Inappropriate responses and/or apathy.
 - (i) Insomnia or sleeping too long/too often.
 - (j) Loss of interest in daily activities.
 - (k) Giving away or disposing of personal property.
3. History/Available Information, including but not limited to:
- (a) Prior identification as a suicide risk.
 - (b) Suffering humiliation or rejection.
 - (c) Family upheaval.
 - (d) Offense resulting in death or catastrophe.
 - (e) After returning from court.
 - (f) Prone to accidents.
 - (g) Self-injurious behavior history.
 - (h) The loss of a loved one, close family friend, family member or friend (especially due to suicide).
 - (i) Information relayed from others.

Suicide Threats: Behaviors designed to make others believe there is intent to commit suicide.

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I. **SAFETY PLAN**

A. Suicide Observation Status Level 1 (SOS 1):

1. SOS 1 is an awareness assessment level that shall be assigned for any of the following suicidal signs, including but not limited to:
 - (a) A new intake with a history of suicide risk status (within the past twelve [12] months).
 - (b) Available information obtained from youth, parent, staff, Probation Officer (PO), etc.
 - (c) Mood observations.
 - (d) Suicidal statements.
 - (e) A behavior with no suicidal statement.
 - (f) Psychiatric hospitalization within the past twelve (12) months of admittance.
 - (g) Recent history of self-injurious behavior.
 - (h) MAYSI score of "Caution".
2. The youth shall be kept under frequent and close observation, no less than one (1) direct observation check in each ten (10) minute period. Record the actual time of the observation, vary the timing and the direction of travel of the room checks within the ten (10) minute standard.
3. Staff shall document in CE, the observable emotional status, behavior and activities of the youth at least two (2) times per shift with the first being within the first four (4) hours.

B. Suicide Observation Status Level 2 (SOS 2):

1. SOS 2 is a serious and urgent level of observation that shall be assigned for any of the following suicidal signs, including but not limited to:
 - (a) Suicidal statements with behavior.
 - (b) Suicidal threats.
 - (c) MAYSI score of "Warning."
2. The youth shall be kept under frequent and close observation, no less than one direct observation check in each five (5) minute period. Record the actual time of the observation, vary the timing and the direction of travel of the room checks within the five (5) minute standard.
3. Staff shall document in CE, the observable emotional status, behavior, and activities of the youth at least four (4) times per shift, preferably every two (2) hours.

C. Suicide Observation Status Level 3 (SOS 3):

1. SOS 3 is an immediate and critical level of observation that shall be assigned for any of the following suicidal signs, including but not limited to:

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- (a) Suicidal threats with a specific plan.
 - (b) Suicidal attempts or committed an act in the furtherance of suicide.
 - (c) Mental health behavior requiring constant observation.
 2. Staff shall evaluate the emotional status, behavior, and activities of the youth no less than once per hour and document in CE.
 3. Youth shall be under constant one-on-one visual observation and supervision by probation staff or by FAST staff during a FAST consultation.
 4. Youth will be provided a paper spoon meal with PCSI approval.
- D. Staff Requirements For Initiating All SOS Levels:
 1. Probation Corrections Officer (PCO), Probation Corrections Supervisor I (PCSI), Probation Corrections Supervisor II (PCSII), Forensic Adolescent Services Team (FAST), Correctional Nurse, Licensed Vocational Nurse (LVN), Probation Officer (PO), and Supervising Probation Officer (SPO) while in the JDAC/TF may place a youth on an appropriate SOS level for any statement, behavior, or knowledge of anything that demonstrates a potential suicide risk. When a youth is placed on SOS:
 - (a) Notify FAST, the area PCSI, Watch Commander/Treatment Facility Supervisor (WC/TFS) and Central Control. Document the notification/time and the reason why the youth was placed on SOS in the "Comment" section of a SOS Evaluation in CE.
 - (b) Document in the Special Instructions/Security Alert in the youth's CE Overview to indicate the SOS level and note the reason for SOS.
 - (c) For SOS 1: Print and sign the Suicide Observation Status Report from CE and submit the form to the area PCSI.
 - (d) For SOS 2 and SOS 3: Complete an incident report and evaluate for a paper spoon meal.
 2. A PCO, PCSI, PCSII, SPO, PO, Correctional Nurse, and LVN may upgrade a youth's SOS level to a closer watch without the consent of a FAST clinician or the WC/TFS. If this occurs, the staff upgrading the SOS shall notify the area PCSI, WC/TFS, FAST, and Central Control immediately and complete an incident report.
 3. Once a youth is placed on SOS, the youth must remain on SOS for a minimum of twenty-four (24) hours and can only be removed from SOS or downgraded by a licensed FAST clinician.
 4. In all cases where a youth reports a previously undisclosed instance of attempted suicide or a history of psychiatric hospitalization, including those that occurred twelve (12) months prior to their entry into the JDAC, notify FAST and document in the Special Instructions/Security Alert in the youth's CE Overview to indicate SOS History.

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- E. FAST/Watch Commander (WC)/Treatment Facility Supervisor (TFS) - Determinations for All SOS Levels:
 - 1. Only a licensed FAST clinician can downgrade or remove a youth from SOS.
 - 2. Only FAST may remove a youth on SOS from paper spoon meal and should notify kitchen staff of the removal when applicable.
 - 3. May authorize the removal of a youth's and their roommate's items from a room that could be used to cause self-harm.
 - 4. The WC/TFS may authorize the return of items removed from the youth's room when deemed safe.
 - 5. May authorize the issuance of a safety smock for youth on SOS 3. Safety smocks are only to be used for sleeping unless the youth displays a risk for self-harm, or the youth's ITP indicates otherwise.
 - 6. The WC/TFS may temporarily authorize replacement of the safety smock to the regular uniform when the youth must be transported off grounds for an appointment or court.
 - 7. Ensure the youth that was issued a safety smock is housed individually.
 - 8. Allow the youth to retain their undergarments unless it is deemed unsafe based on their behavior. If it is deemed unsafe, every effort should be made to retrieve the undergarments voluntarily. Notify the Facility Superintendent when undergarments are removed.

736.3 GUIDELINES:

- A. Any suicide attempt is a medical emergency, and life-saving measures shall be initiated by a trained staff member until relieved by a qualified health care professional, who shall initiate appropriate medical evaluation and intervention. Refer to the Code Blue and First Aid procedure.
- B. All youth shall be screened for risk of suicide at intake and as needed during detention.
- C. Any employee, who becomes aware of any potentially suicidal behavior or self-injurious behavior, shall report the information immediately to the WC/TFS.
- D. Youth identified at risk for suicide shall not be denied the opportunity to participate in facility programs, services, and activities that are available to other non-suicidal youth, unless deemed necessary for the safety of the youth or security of the facility.
 - 1. Youth are to participate in unit activities and follow the regular unit schedule.
 - 2. Any deprivation of programs, services, or activities for youth at risk of suicide shall be documented and approved by the facility Superintendent or designee.
- E. When youth join in unit activities, they shall undergo a pat-down search prior to entering their room to ensure no instruments of self-destruction are taken into their room.

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- F. Youth shall receive a FAST visit and consultation at least once per day on regular business days and FAST extended schedule days, or at the request of JDAC/TF staff.
- G. Any PCSI, FAST staff, Medical Services staff, and PCO (with PCSI approval) may place a youth on paper spoon meal status. Unit staff will complete a behavior note in CE to document PCSI approval of paper spoon meals.
- H. Suicide prevention responses shall be respectful and in the least invasive manner consistent with the level of suicide risk.
- I. Prevention components are provided to youth detained in the JDACs/TFs to keep youth engaged and help them develop important pro-social skills.
- J. The suicide prevention plan shall consider the needs of youth experiencing past or current trauma.
- K. Youth shall be issued standard clothing, bedding, and linens unless they are a safety concern. Removal of any of these items shall be considered on a case-by-case basis and approved by a Supervisor.
- L. A youth's clothing shall not be forcefully removed from their person except in exigent circumstances to prevent a suicide attempt, dangerous risk-taking or self-harming behavior.
- M. Youth shall have equal opportunity to shave and use shaving implements, including electric razors (unless their appearance must be maintained for reasons for identification in Court); however, the facility administrator may suspend the requirement in relation to youth who are considered to be a danger to themselves or others.
- N. A youth's room assignment shall not be changed based solely on their SOS.
- O. Staff shall be provided adequate time to be relieved by another staff to input/update entries into CE prior to the end of the shift.
- P. All suicides and attempted suicides shall be reported/tracked via incident reports, pursuant to the Incident Report procedure.
- Q. Refer to the Department Investigations/Critical Incident Reviews procedure for administrative review guidelines of the circumstances and responses proceeding, during and after a critical incident when necessary.
- R. Refer to the Youth Supervision Staff Orientation and Training procedure for training guidelines.

736.4 RESPONSIBILITIES:

- I. PCO, PCSI, PCSII, FAST, Correctional Nurse, LVN, PO, and SPO in a JDAC or TF:
 - A. When placing a youth on SOS for any statement, behavior, or knowledge that demonstrates a potential suicide risk, refer to the SAFETY PLAN.
- II. Probation Corrections Officer (PCO):

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- A. Counsel the youth regarding the nature/severity of the problem being experienced and the intent of the behavior. Document the information of the conversation in CE.
 - B. If necessary, contact FAST to consult.
 - C. Initiate and maintain the Individualized Room Check form.
 - D. Notify Central Control initially and at each population count.
 - E. Staff responsible for the SOS watch shall document in CE under Events as a SOS Evaluation.
 - F. Notify the WC/TFS of any removal or change in the SOS.
 - G. Evaluate for a paper spoon meal and contact a PCSI for approval. Document in CE.
 - H. Verbally relay information regarding the youth's SOS to each person taking responsibility for the care and custody of the youth. This relay of information shall be documented in the CE Shift Summary/Exchange by the end of the shift and shall include a "SOS Shift Exchange," noting the youth's name, SOS level, any concerns and to whom the information was given.
 - I. At any time and during all shifts, whether the youth is sleeping or if a clear view of the youth is not possible, the youth shall be directed to move into the officer's view and/or remove the obstruction.
 - J. When youth are sleeping or lying on their bed, staff must:
 - 1. Stop at each room window.
 - 2. Ensure each youth's head and neck region are visible at all times.
 - 3. Observe physical and/or audible signs that the youth is not experiencing a medical emergency such as the rise and fall of the youth's chest, snoring, movement, etc.
 - K. All Individualized Treatment Watch (ITW)/Constant Watch staff must be switched out/relieved hourly with a new ITW/Constant Watch staff during all shifts.
- III. Booking PCO and Intake/Release Officer (IRO):
- A. Review the youth's CE Overview for prior SOS history information.
 - 1. If the youth has a prior SOS in any JDAC/TF, a psychiatric hospitalization or suicide attempt within the past twelve (12) months, place the youth on SOS 1 and refer to the SAFETY PLAN.
 - 2. If the youth has a SOS history that dates back further than twelve (12) months, notify FAST and the area PCSI.
 - B. Contact the youth's parent/guardian or family and inquire about the youth's past or present suicidal ideations, behaviors or attempts and document in CE.

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- C. Document any suicide-related information regarding the youth (e.g. suicidal statements, ideations, behaviors, history, etc.) in CE within the first hour of intake.
 - D. May place the youth on any SOS based on any and all criteria.
 - E. Assist the youth in completing the MAYSI within twenty-four (24) hours of entering the JDAC. When a youth scores in the "Caution" and/or "Warning" range, the PCO shall place the youth on the appropriate level of SOS.
 - F. Notify FAST via telephone if the youth appears to be in crisis. When FAST is not available, contact the WC/TFS.
 - G. Evaluate the youth for a paper spoon meal for SOS 3 and contact a PCSI for approval. Document in CE.
 - H. Upon notification for release, the IRO shall print a Suicide Advisory Notification Letter (Attachment A) for any youth who is or has been on SOS during their current detention. Have the parent/guardian sign the Suicide Advisory Notification Letter or have the youth sign if they are eighteen (18) years old.
 - 1. After signatures are obtained, scan and import the form into the youth's CE file and title it "Suicide Advisory Notification Letter." Give the original copy to FAST.
 - 2. A copy of the signed form and the "Who Can Help Me in the County of San Bernardino?" flyer (Attachment B) shall be given to the parent/guardian.
 - 3. For any youth released while still on SOS, FAST shall be notified immediately to remove them from SOS in CE.
 - 4. Give all youth, not just SOS youth, a "Who Can Help Me in the County of San Bernardino?" flyer (Attachment B) upon release.
- IV. Probation Corrections Supervisor I (PCSI):
- A. Ensure FAST, WC/TFS, and Central Control are contacted when a youth is placed on SOS.
 - B. Ensure staff write an incident report for SOS 2 and SOS 3 or print a Suicide Observation Status Report from CE for SOS 1. Forward the report to the WC/TFS.
 - C. Assess the level of SOS and upgrade the level if necessary.
 - D. The designated PCSI (per the Supervisor Shift Plan) shall complete the Inspection-SOS event in CE on all youth who are on SOS no less than once per shift for all shifts. Ensure staff note the youth's observable emotional status and behavior in the required SOS Evaluations and document in the comment section of the Inspection event.
 - E. Ensure staff document the youth's name, SOS level, any concerns and to whom the SOS shift exchange information was given to in the CE Shift Summary/Exchange before the end of the shift.

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- F. Assess the need for additional staffing and relay this to the WC/TFS on a shift-by-shift basis.
- G. Relocate the youth to another unit/area when necessary.
- H. Ensure relief staff assigned to youth on SOS complete all necessary entries consistent with the youth's current status in a SOS Evaluation note in CE.
- I. Ensure the youth has been evaluated for a paper spoon meal, if applicable.
- J. Ensure all ITW/Constant Watch staff switch out every hour.
- K. When critical incidents related to suicides or attempted suicides occur, conduct debriefings with youth and staff.
- V. Watch Commander (WC)/Treatment Facility Supervisor (TFS):
 - A. Upon intake/clearance, communicate with the arresting officer regarding the youth's past or present suicidal ideations, behaviors or attempts and document in CE.
 - B. Upon intake, if the youth is exhibiting mental health issues or suicidal ideations, stop the intake process until the appropriate mental health documentation/clearance has been received.
 - 1. The delivering officer shall retain custody of the youth and be instructed to contact the Community Crisis Response Team (CCRT) between the hours of 7:00 am and 10:00 pm (see Attachment C) for an evaluation and recommendation. After hours, contact FAST standby.
 - C. Assess the necessary level of SOS, and collaborate with FAST when possible.
 - D. After hours and after consulting with the on-call FAST staff regarding suicidal behavior that requires an ITP modification, authorize any temporary modifications to the implementation guidelines for a youth's ITP. Documentation shall be made in CE justifying any revisions, modifications, or non-implementation of the guidelines related to a youth's ITP.
 - E. Determine the staffing level needed to maintain the designated level of SOS and arrange for additional staff if required on a shift-by-shift basis.
 - F. Ensure all necessary incident reports are written and reviewed. Approve final incident reports, obtain the required signatures, and ensure proper distribution.
 - G. Ensure the SOS Security Alert status is correct in the youth's CE Overview.
 - H. Check the accuracy of the SOS Security Alert status during the third shift and input the correct information prior to 6 a.m. for the Third Shift Summary Report.
 - I. Conduct a random SOS CE Entry inspection each shift and document the review in the SOS Inspection log.
 - J. When releasing a youth, ensure the IRO follows the previously outlined steps in distributing the Suicide Advisory Notification Letter (Attachment A) and the "Who Can Help Me in the County of San Bernardino" flyer (Attachment B).

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- K. Ensure youth returning to the JDAC following a psychiatric hospitalization are automatically placed on SOS 1. Increase the SOS level as needed.
 - L. In the event of a suicide attempt, contact the on-call FAST clinician if the incident occurred when FAST staff is not on-duty.
 - M. Notify the Chief Medical Officer or designee when referral and transportation to an emergency room or local hospital are required.
 - N. Notify the youth's parent/guardian in the event of a suicide attempt resulting in hospitalization pursuant to the Required Notifications of a Detained Youth's Emergency Transportation and Hospital/Psychiatric Facility Admittance (Non-Death) procedure.
 - O. Notify the Superintendent and the DCPO or higher in the event of a suicide pursuant to the Death of a Youth While Detained in a JDAC or TF procedure. Only a DCPO or higher shall notify the family.
 - P. Ensure the PCSI conducts a critical incident debriefing with youth and staff when necessary.
- VI. Intake Probation Officer and Supervising Probation Officer:
- A. Upon intake/clearance, communicate with the arresting officer regarding the youth's past or present suicidal ideations, behaviors or attempts and document in CE.
 - B. Upon intake, if the youth is exhibiting mental health issues or suicidal ideations, stop the intake process until the appropriate mental health documentation/clearance has been received.
 - 1. The delivering officer shall retain custody of the youth and be instructed to contact CCRT between the hours of 7:00 am and 10:00 pm (see Attachment C) for an evaluation and recommendation.
 - C. If the youth appears to be in crisis, notify FAST via telephone. When FAST is not available, the WC/TFS shall be contacted.
- VII. Probation Officer, Supervising Probation Officer, NOT Assigned in a JDAC/TF:
- A. While performing duties in a JDAC/TF, such as, interviewing or completing JDAC visits, if a youth expresses suicidal ideations, dangerous risk-taking, or self-injurious behavior, the officer shall place the youth on SOS and complete applicable documentation and notifications outlined under the SAFETY PLAN.
 - B. Documentation of Suicide Information for Youth:
 - 1. If a PO becomes aware of previously undocumented history of suicidal statements, behaviors, or prior psychiatric hospitalizations within the last twelve (12) months, complete the following:
 - (a) Contact the WC/TFS immediately if the youth is in custody.
 - (b) Document the information, including dates, locations, and any information for verification, such as the name of the hospital in an event note in CE.

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- (c) Document a Special Instructions/Security Alert in the youth's CE Overview to indicate SOS History (to include a note with specific dates/information).
- (d) In addition, if the youth is out of custody, provide the "Who Can Help Me in the County of San Bernardino?" flyer (Attachment B) as a resource to any family that may benefit from the San Bernardino County services listed and document in CE.

VIII. Forensic Adolescent Services Team (FAST):

- A. FAST is available 24/7 to complete SOS assessments.
- B. Utilize a Suicide Prevention Treatment Plan (SPTP) with all youth who are/have been on SOS. This plan will include, but is not limited to:
 - 1. Identification of the goal of no suicidal ideation or behaviors.
 - 2. Identification of healthy and positive coping skills.
 - 3. A specific time frame for follow up assessments by FAST.
- C. Provide a mental health suicide evaluation within twenty-four (24) hours of notification in all cases where a youth is placed on SOS.
- D. Pre-licensed Clinicians/Graduate Students will consult with a Licensed Clinical Therapist.
- E. Notify unit staff, WC/TFS, Food Services, and Central Control of any change in SOS (increase, decrease, or removal) after a youth has been assessed.
- F. Provide consultation to unit staff, PCSI, and the WC/TFS.
- G. FAST shall assess the youth prior to providing recommendations.
- H. Document SOS information in the health record SOS Flag:
 - 1. Ensure CE indicates the appropriate SOS level.
 - 2. Note any exceptions to standard SOS precautions/restrictions.
 - 3. Annotate paper spoon meal status (placed on or removed from).
 - 4. Annotate safety smock usage. The safety smock is only for youth on SOS 3.
 - 5. Annotate a youth's removal from SOS in the health record SOS Flag:
 - (a) In the health record, complete the Patient Flag section: Complete Release Restriction (RRS).
 - (b) In CE Documents section: Generate the Suicide Advisory Notification Letter (Attachment A) and the "Who Can Help Me in the County of San Bernardino?" flyer (Attachment B), to be distributed by the IRO upon release of the youth.
 - 6. Document clinical results of all evaluations in the health record.

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7. Attempt to notify the parent/guardian when a youth is initially placed on a SOS and following any suicide attempt.
8. Reassess the youth daily until removed from SOS.
9. Utilize each "step-down" level of observation downgrading a youth on SOS.
10. Ensure a youth only receives one (1) level of downgrade per twenty-four (24) hours (e.g., SOS 3 on Monday noon, step-down to SOS 2 on Tuesday noon, step-down to SOS 1 on Wednesday noon and removal from SOS on Thursday noon) as per FAST assessments.
11. Re-evaluate youth who were actively suicidal within the last seven (7) days on the following day after removal from SOS.
12. Re-evaluate a youth not actively suicidal within the last seven (7) days within fourteen (14) days after removal from SOS. Thereafter, conduct periodic scheduled follow up assessments and coordinate mental health services as per FAST assessment.
13. Notify the youth's PO (if the youth is still a ward of the Court) when they are released from custody on SOS within twenty-four (24) hours of release and document in the health record SOS Flag.
14. Upload the signed Suicide Advisory Notification Letter (Attachment A) into the youth's health record.
15. If a youth is on SOS upon release, Juvenile Justice Program (JJP)/FAST will attempt to follow up with the parent/guardian or youth (if age 18) within twenty-four (24) hours of release to encourage follow up with mental health services in the community. Document the information in the health record SOS Flag.

736.5 ATTACHMENTS:

[See attachment: Suicide Prevention Program Attachment A \(Lexipol 3-31-21\).pdf](#)

[See attachment: Suicide Prevention Program Attachment B \(Lexipol 7-7-20\).pdf](#)

[See attachment: Suicide Prevention Program Attachment C \(Lexipol 7-7-20\).pdf](#)

Attachments

Suicide Prevention Program Attachment A (Lexipol 3-31-21).pdf



TRACY REECE
Chief Probation Officer

JULIE FRANCIS
Assistant Chief Probation Officer

Suicide Advisory Notification Letter

Date:

Dear parent – guardian – placement staff/*Estimado padre – guardián – agencia de colocación:*

, who was detained on _____ is being released from this Juvenile Detention and Assessment Center or Treatment Facility into your custody at _____ hours (time) on _____ (date), was placed on Suicide Observation Status at least once during their detention and is felt to be a potentially suicidal person. It is the recommendation of the San Bernardino County Probation Department to you as a responsible parent - guardian - placement agency to:

1. Call (909) 387-7118 or (760) 961-6730 if you would like more information about why your child was placed on Suicide Observation Status.
2. Arrange for follow up mental health services by making arrangements through your own health insurance system or at the office of a psychotherapist of your choice. Information about services through the San Bernardino County Department of Behavioral Health and their contract agencies can be obtained by calling (888) 743-1478.
3. Supervise your child when they take their psychiatric medications, if prescribed, and arrange for follow up psychiatric care immediately.
4. Contact your local law enforcement or 911 if your child is in immediate danger of serious harm to themselves or someone else.
5. Contact the Community Crisis Response Team at (888) 743-1478 to request assistance if your child is in need of evaluation for possible hospitalization for danger to self or others.

, quien fue detenido en _____ va ser liberado del Centro de Evaluación y Detención Juvenil o Instalación de tratamiento a su custodia a la(s) _____ (hora) el _____ (fecha), fue colocado en Estatus de Observación de Suicidio por lo menos una vez durante su detención y es considerado ser una persona potencialmente suicida. Es la recomendación del Departamento de Libertad Condicional del Condado de San Bernardino a usted como el padre/ guardián/ agencia de colocación que:

1. Llame (909) 387-7118 o (760) 961-6730 si le gustaría más información acerca del porqué su hijo/a fue colocado en Estatus de Observación de Suicidio.
2. Haga lo posible de seguir los servicios de salud mental haciendo arreglos por medio de su propio seguro médico, o en la oficina de un psicoterapeuta, de su elección. Para información acerca de los servicios del Departamento de Salud Mental, Condado de San Bernardino y de sus agencias, llame al (888) 743-1478.
3. Supervise a su hijo/a cuando se tome sus medicamentos psiquiátricos, si son recetadas, y haga preparativos para que siga su cuidado psiquiátrico inmediatamente.
4. Contacte al Departamento de Policía Local o marque al 911 si su hijo/a está en peligro de lastimarse a sí mismo o a otras personas.
5. Contacte al Equipo de Respuesta a Crisis de su Comunidad al (888) 743-1478 para solicitar ayuda si su hijo/a necesita una evaluación para una posible hospitalización si es un peligro a sí mismo o hacia otras personas.

Sincerely/*Sinceramente,*
Probation Mental Health Services Unit/*La Unidad de Libertad Condicional de Servicios de Salud Mental*

I acknowledge receipt of this letter regarding _____ being potentially suicidal.
Yo reconozco haber recibido esta carta con respecto a _____ de ser una persona potencialmente suicida.
Signed/*Firma:* _____ Relationship/*Relación:* _____ Date/*Fecha:* _____

Suicide Prevention Program Attachment B (Lexipol 7-7-20).pdf

Who Can Help Me in the County of San Bernardino?

The County offers many services in the community that can assist you and/or your family when situations arise. Below is a list of different services and resources that are designed to provide stability for both you and your family.

LEGAL INFORMATION

These services are intended to assist you with your legal needs in the community.

Superior Court Family Law:

1. San Bernardino (909) 521-3136
2. Rancho Cucamonga (909)285-3559
3. Victorville (760)245-6215
(serving the Joshua Tree area)

Inland Counties Legal Service (909)884-8615

Juvenile Delinquency/Traffic:

1. San Bernardino (909)269-8840
2. Rancho Cucamonga (909)285-3577
3. Victorville (760)245-6215

Legal Aid Clinic (909)889-7328

Probation Department:

1. San Bernardino (909)383-2700
2. Barstow (760)256-4737
3. Joshua Tree (760)366-4130
4. Rancho Cucamonga (909)945-4000
5. Victorville (760)243-8269

Public Defenders Juvenile Office:

1. San Bernardino (909)387-0569
2. Victorville (760)261-5322

Juvenile Detention and Assessment Centers (JDACs):

1. San Bernardino (909)383-1769
2. Apple Valley (760)961-6701

MENTAL AND BEHAVIORAL HEALTH

These services are intended to assist you when there are behavioral or mental health needs in your home.

Alcohol and Drug Referral Service (800)662-4357

Alternative to Domestic Violence (800)339-7233

Arrowhead Regional Medical Center
(909)580-1000 (Main Line)

California Youth Crisis Hotline (800)843-5200

Canyon Ridge Hospital (909)590-3700

Child Abuse Hotline (800)827-8724

Community Crisis Response Team:

1. East Valley Region (909)421-9233 or
Pager (909)420-0560
2. Morongo Basin Region **24 hr crisis line** (855)365-6558
3. West Valley Region (909)458-1517 or
Pager (909)535-1316
4. High Desert Region (760)956-2345 or
Pager (760)734-8093

Department of Behavioral Health Access Unit (888)743-1478 or (909)381-2420

Desert Mountain Children Center (760)955-3601

Forensic Adolescent Service Team (FAST):

1. San Bernardino (909)387-7118
2. Apple Valley (760)961-6730

Loma Linda Behavioral Medicine Center (909)558-9200

Salvation Army Rehabilitation Center San Bernardino (909)889-9605

Sexual Assault Services (800)656-4673

Transitional Aged Youth:

1. San Bernardino (909)387-7194
2. Rancho Cucamonga (877)760-0770
3. Victorville (760)243-5417
4. Yucca Valley (760)228-9657
ext. 126

EDUCATION AND CAREER

These services are intended to assist you with your current education and future career goals.

Boys and Girls Club (800)854-2582

California Conservation Corp (909)708-8488

GED Hotline (877)392-6433

Goodwill Job Career Center:

1. San Bernardino (909)890-1415
2. Victorville (760)780-4970

National Job Corp (800)733-5627

Regional Occupational Program (ROP)
(909)252-4550

Special Education Local Plan Area (SELPA):

1. Desert Mountain (760)955-3550
2. East Valley (909)252-4507
3. Fontana Unified (909)357-5000
4. Morongo Unified (760)367-9191
5. San Bernardino City Unified (909) 880-6863
6. West End (909)476-6188

PROBATION RESOURCE CENTERS

Provides low cost/affordable specialized programs and activities for at-risk youth that may include Individual, Family, or Group Counseling, Gang Avoidance, Anger Management, Petty Theft, Substance Abuse, Victim Awareness, and Truancy.

High Desert Day Reporting Center (760)552-6600 or (760)243-8269

San Bernardino Youth Justice Center
(909)387-7359

Focus West (909)467-5203

Montclair Day Reporting Center (909)447-4501 **ext. 207**

MEDICAL HEALTH

These services are intended to assist you when there are medical needs within your family.

Covered California (800)300-1506

Department of Social Services (800)952-5253

Transitional Assistance Department (909)388-0245

Medi-Cal for Families Information Line
(800)880-5305

Inland Empire Health Plan (IEHP) (800)440-4347

Planned Parenthood (909)890-5511

Inland Regional Center (909)890-3000
(Developmental/Intellectual Disabilities)

Public Health (800)722-4777

Social Security Administration (800)772-6213

PARENTING

These services are intended to help with the parenting needs in your family.

First 5 San Bernardino (909)386-7706

(Programs for children ages birth – 5 yrs.)

Parent Project:

1. Toll Free (800)372-8886
2. Inland Valley Recovery Center
Upland (909)949-4667
3. Victorville (760)552-6611

WIC (Women, Infants, Children) (909)388-5663

Volunteers of America:

1. Early Head Start (909)888-4577
2. Family Resource Center (909)562-0901 **ext. 205**

HOUSING

These services are intended to help with emergency housing situations in the community.

CAPSBC-Homeless assistance (909)723-1500

Central City Lutheran Mission (909)381-6921

Frazer Community Center (909)889-4424
(Hot meals Mon. – Fri. 11:00am – 1:00pm)

Housing Authority (909)890-9533

National Runaway SAFELINE (800)786-2929
or (800)RUNAWAY

Option House San Bernardino (909)381-3471 (shelter domestic violence)

Salvation Army Emergency Shelter San Bernardino (909)888-4880

Veronica's Home of Mercy San Bernardino
(909)888-9064 (Women with children or pregnant only)

Just Dial 2-1-1

Free and Confidential. You can dial **2-1-1** for information about other services in your community that we have not already provided such as:

1. Health Care
2. Counseling, Food, Support Groups
3. Clothing
4. Housing, Community Groups
5. Elder Services, Employment and many other services.

¿Quién me puede ayudar en el Condado de San Bernardino?

El Condado ofrece muchos servicios en la comunidad que puede ayudar a usted y/o a su familia cuando situaciones o circunstancias inesperadas surgen. Debajo esta una lista de servicios y recursos diferentes en su comunidad que son diseñadas para proporcionar la estabilidad para usted y para su familia.

INFORMACIÓN LEGAL

Estos servicios son diseñados para ayudarle con sus necesidades legales en la comunidad:

Superior Court Family Law:

1. San Bernardino (909) 521-3136
2. Rancho Cucamonga (909)285-3559
3. Victorville (760)245-6215
(atendiendo el área de Joshua Tree)

Inland Counties Legal Service (909)884-8615

Juvenile Delinquency/Traffic:

1. San Bernardino (909)269-8840
2. Rancho Cucamonga (909)285-3577
3. Victorville (760)245-6215

Legal Aid Clinic (909)889-7328

Probation Department:

1. San Bernardino (909)383-2700
2. Barstow (760)256-4737
3. Joshua Tree (760)366-4130
4. Rancho Cucamonga (909)945-4000
5. Victorville (760)243-8269

Public Defenders Juvenile Office:

1. San Bernardino (909)387-0569
2. Victorville (760)261-5322

Juvenile Detention and Assessment Centers (JDACs):

1. San Bernardino (909)383-1769
2. Apple Valley (760)961-6701

SALUD MENTAL Y DE COMPORTAMIENTO

Servicios proporcionados para ayudarle cuando hay necesidades de salud mental o comportamiento en su casa.

Alcohol and Drug Referral Service (800)662-4357

Alternative to Domestic Violence (800)339-7233

Arrowhead Regional Medical Center (909)580-1000 (Linea Telefonica principal)

California Youth Crisis Hotline (800)843-5200

Canyon Ridge Hospital (909)590-3700

Child Abuse Hotline (800)827-8724

Community Crisis Response Team:

1. East Valley Region (909)421-9233 or **Pager** (909)420-0560
2. Morongo Basin Region **24 hr crisis line** (855)365-6558
3. West Valley Region (909)458-1517 or **Pager** (909)535-1316
4. High Desert Region (760)956-2345 or **Pager** (760)734-8093

Department of Behavioral Health Access Unit (888)743-1478 or (909)381-2420

Desert Mountain Children Center (760)955-3601

Forensic Adolescent Service Team (FAST):

1. San Bernardino (909)387-7118
2. Apple Valley (760)961-6730

Loma Linda Behavioral Medicine

Center (909)558-9200

Salvation Army Rehabilitation

Center San Bernardino (909)889-9605

Sexual Assault Services

 (800)656-4673

Transitional Aged Youth:

1. San Bernardino (909)387-7194
2. Rancho Cucamonga (877)760-0770
3. Victorville (760)243-5417
4. Yucca Valley (760)228-9657
ext. 126

EDUCACIÓN Y CARRERA

Estos servicios son para ayudarle con su educación actual y futuras metas profesionales.

Boys and Girls Club (800)854-2582

California Conservation Corp (909)708-8488

GED Hotline (877)392-6433

Goodwill Job Career Center:

1. San Bernardino (909)890-1415
2. Victorville (760)780-4970

National Job Corp (800)733-5627

Regional Occupational Program (ROP) (909)252-4550

Special Education Local Plan Area (SELPA):

1. Desert Mountain (760)955-3550
2. East Valley (909)252-4507
3. Fontana Unified (909)357-5000
4. Morongo Unified (760)367-9191
5. San Bernardino City Unified (909) 880-6863
6. West End (909)476-6188

CENTROS DE RECURSOS DE LIBERTAD CONDICIONAL

Proporciona programas y actividades especializadas de bajo costo/económicos para juventud en peligro, que puede incluir consejería Individual, Familiar, o en Grupo, Como Evitar Pandillas, Control de Ira, y clases acerca del Robo, Abuso de Sustancia, el reconocimiento de Víctima(s), y el Ausentismo en la escuela.

High Desert Day Reporting Center (760)552-6600 or (760)243-8269

San Bernardino Youth Justice Center (909)387-7359

Focus West (909)467-5203

Montclair Day Reporting Center (909)447-4501 **ext. 207**

SALUD MÉDICA

Estos servicios son para ayudarle con necesidades médicas dentro de su familia.

Covered California (800)300-1506

Department of Social Services (800)952-5253

Transitional Assistance Department (909)388-0245

Medi-Cal for Families Information Line (800)880-5305

Inland Empire Health Plan (IEHP) (800)440-4347

Planned Parenthood (909)890-5511

Inland Regional Center (909)890-3000

(Developmental/Intellectual Disabilities)

Public Health (800)722-4777

Social Security Administration (800)772-1213

CRIANZA

Estos servicios son diseñados para ayudar con necesidades acerca del cuidar de los niños en su familia.

First 5 San Bernardino (909)386-7706

(Programas para niños de edades 0-5 yrs.)

Parent Project:

1. Toll Free (800)372-8886
2. Inland Valley Recovery Center Upland (909)949-4667
3. Victorville (760)552-6611

WIC (Women, Infants, Children) (909)388-5663

Volunteers of America:

1. Early Head Start (909)888-4577
2. Family Resource Center (909)562-0901
ext. 205

VIVIENDA

Estos servicios son para ayudar con alojamiento/vivienda en situaciones de emergencia en la comunidad.

CAPSBC-Homeless assistance (909)723-1500

Central City Lutheran Mission (909)381-6921

Frazee Community Center (909)889-4424

(Alimento Caliente: Lunes – Viernes 11:00am – 1:00pm)

Housing Authority (909)890-9533

National Runaway SAFELINE (800)786-2929 or (800)RUNAWAY

Option House San Bernardino (909)381-3471
(refugio violencia domestica)

Salvation Army Emergency Shelter San Bernardino (909)888-4880

Veronica's Home of Mercy San Bernardino (909)888-9064 (Mujeres y niños o solo mujeres embarazadas)

Simplemente Marque el 2-1-1

Gratis y Confidencial. Usted puede marcar al 2-1-1 para información sobre otros servicios en su comunidad no mencionados en este folleto como:

1. Asistencia médica
2. Consejería, Comida/Alimento, Grupos de Apoyo
3. Albergue de Ropa
4. Alojamientos
5. Servicios de Anciano, el Empleo y muchos otros servicios.

Suicide Prevention Program Attachment C (Lexipol 7-7-20).pdf



Community Crisis Response Team (CCRT)

East Valley

(Colton, Rialto, Yucaipa, Redlands, Loma Linda, Bloomington, San Bernardino)

Office (909) 421-9233

Pager (909) 420-0560

West Valley

(Chino Hills, Chino, Rancho Cucamonga, Ontario, Fontana, Montclair)

Office (909) 458-1517

Pager (909) 535-1316

High Desert

(Hesperia, Victorville, Apple Valley, Phelan, Barstow, Adelanto, Lucerne Valley)

Office (760) 956-2345

Pager (760) 734-8093

Morongo Basin

Office (760) 499-4429

Dial 7-1-1 for
for TTY users.

Teams are available

7 a.m. - 10 p.m.

365 Days per year

Are you experiencing a

mental health related crisis?

CCRT is a community-based mobile crisis team that provides assistance to those who are experiencing a mental health related emergency. Services include:

- **Mental Health Assessments**
- **Relapse Prevention**
- **Intensive follow up services**
- **On-site Crisis Intervention**



Equipo Comunitario de Respuesta a Crisis

(CCRT por sus siglas en ingles)

Valle del Este

(Colton, Rialto, Yucaipa,
Redlands, Loma Linda,
Bloomington, San
Bernardino)

Oficina (909) 421-9233

Pager (909) 420-0560

Valle del Oeste

(Chino Hills, Chino, Rancho
Cucamonga, Ontario,
Fontana, Montclair)

Oficina (909) 458-1517

Pager (909) 535-1316

Alto Desierto

(Hesperia, Victorville, Apple
Valley, Phelan, Barstow,
Adelanto, Lucerne Valley)

Oficina (760) 956-2345

Pager (760) 734-8093

Morongo Basin

Oficina (760) 499-4429

Marque 7-1-1 para
usuarios de TTY

Los equipos están
disponibles

7 a.m. - 10 p.m.
365 Días al año

¿Está experimentando una crisis relacionada con la salud mental?

CCRT es un equipo de crisis móvil basado en la comunidad que brinda asistencia a aquellos que están experimentando una emergencia relacionada con la salud mental.

Los servicios incluyen:

- Evaluaciones de salud mental
- Prevención de recaídas
- Servicios intensivos de seguimiento
- Intervención en el sitio de la crisis

