

1.4.E.7 Suicide Prevention and Intervention

I Policy Index:



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Replaces Policy: 4E.11
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Affected Units: All Units
Effective Date: 01/28/2013
Scheduled Revision Date: September 2013
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Office of Primary Responsibility: DOC Administration

II Policy:

Department of Corrections (DOC) staff will be trained on suicide prevention and intervention according to DOC policy and unit operational memorandums (OMs). Staff members are expected to be proficient in identifying warning signs of suicide risk and intervening when confronted with a suicidal offender.

III Definitions:

Offender:

For the purposes of this policy, an offender is any of the following:

1. An inmate (in the custody of the DOC institutional system).
2. A parolee (under parole or suspended sentence supervision by South Dakota Parole Services).
3. A juvenile in the custody of a DOC facility, in the custody of a DOC approved facility/program or on aftercare.

Staff:

For the purposes of this policy, staff consists of all employees of the DOC (both institutional and community corrections staff), individuals under contract assigned to the DOC, volunteers on a regular and full time basis and student interns.

Mental Health Staff:

A psychiatrist, psychologist, or mental health professional employed by the Division of Correctional Behavioral Health or contracted by the Division of Correctional Behavioral Health to provide mental health services within a DOC institution.

Health Services Staff:

All individuals employed by the Department of Health or contracted by the Department of Health to provide physical health services in a DOC institution.

Suicide Watch:

A status whereby a potentially suicidal offender housed in a DOC institution is placed in a segregation (safety) cell on a close observation or constant observation level. Offenders placed on either of these two observation levels will be given a suicide gown, suicide blanket, security mat and provided paper trays at meal times. Other items may be allowed only with the approval of mental health staff.

Close Observation:

A suicide watch level ordered by mental health staff that consists of fifteen (15) minute cell front checks conducted by a DOC staff.

Constant Observation:

A suicide watch level ordered by mental health staff that consists of DOC staff observing the offender on a constant basis.

Suicide Watch Companion:

A paid volunteer offender that is selected and trained by staff to observe an offender housed in a DOC institution that is considered suicidal and serves as a supplement to fifteen (15) minute cell front checks by a staff member (See definition of Close Observation). The use of a trained offender shall not be used as a substitute when staff observation has been ordered.

Awareness List:

A list of adult offenders that have been identified by mental health staff as high risk for self-harm or suicidal gestures.

Suicide Ideation:

Self-reported thoughts of engaging in suicide-related behavior.

IV Procedures:**1. Screening Offenders for Suicidal Ideation:**

- A. Offenders Housed in a DOC Institution: During the admission process, all offenders will be screened by health services staff or health-trained staff designee for a history of or current suicide ideation (suicide risk) within their first twenty-four (24) hours of arrival (See DOH policy P-E-02 [Receiving Screening](#), MDSP OM 3.4.E.1 [Suicide Prevention](#) and STAR OM 5.3.D.1 [Suicide Prevention and Intervention](#)).
1. If there are no immediate suicide risk concerns, mental health staff will complete an initial mental health assessment as prescribed in above DOH policy and DOC institutional OMs.
 2. If there are immediate suicide risk concerns, health services staff will immediately notify mental health staff and Officer in Charge (OIC) and initiate suicide precautions (See DOH policy P-E-05 [Mental Health Screening and Evaluation](#)).
 3. If immediate suicide risk concerns arise after regular business hours, health services staff will follow procedures as prescribed in the respective facility OM, which may include contacting the on-call mental health staff person and/or immediately initiating suicide precautions.
 4. Mental health staff will direct the intervention and appropriate suicide precautions and assure offenders with positive screens receive a mental health evaluation and follow-up/reassessment.
- B. Offenders Placed in Community Corrections: Anytime community corrections staff, a juvenile corrections agent (JCA), or parole agent becomes aware an offender on supervision is having suicidal ideations, staff will adhere to the guidelines established in the respective OM (See JCC OM 6.3.B.1 [Suicide Prevention and Intervention](#) and Parole OM 7.1.D.2 [Suicide Awareness](#)).

2. Awareness Lists:

- A. An adult offender in DOC custody who is placed on an awareness list will remain on the awareness list for a period no less than one (1) year from the date which they were placed on the list. The list will include offenders who have demonstrated past suicidal behaviors while incarcerated in South Dakota facilities. Offenders currently on the awareness list who are transferred to another SD DOC facility will be added to the receiving facility's awareness list.
- B. An adult offender will not be allowed to be single celled for six (6) months following their placement on the awareness list **unless**:
 - 1. Their current suicide/self-harm ideation is assessed by mental health staff and determined to be low risk; or
 - 2. There is not an available offender to place/house with the offender.
 - 3. Staff have determined an offender's risk for violence may cause harm to other offenders.
- C. The awareness list will be maintained and updated as needed by mental health staff and distributed to appropriate DOC and DOH staff.
- D. Only mental health staff may remove an offender from the awareness list.
- E. An offender who is housed in a single cell may have their property items restricted as required and approved by the Unit Manager and/or mental health staff (See respective OM or Unit Plan for details regarding allowable property).

3. Training on Identification of Suicide Risks:

- A. The first step in suicide prevention is an understanding and recognition of factors that increase the risk for suicidal behavior by an offender (See DOH policy P-G-05 [Suicide Prevention Program](#)).
- B. Pre-Service Training: All staff will receive pre-service training at the time of hire from mental health staff or designated training staff which will include the warning sign(s) of suicide risk and a list of risk factors (See DOC policy 1.1.D.1 [Staff Training Requirements](#)). These risk factors include but are not limited to:
 - 1. The offender has a history of suicide attempts, suicidal ideations or a documented history of self-harm.
 - 2. The offender currently engages in or attempts to engage in behavior with potential for self-harm; e.g. self-mutilation, ingesting hazardous material, suffocation, etc.
 - 3. The offender threatens to hurt himself/herself or talks about any self-injurious behavior with staff or another person.
 - 4. The offender exhibits markedly sad, tearful behavior, is emotionally under-reactive; or displays paranoid behaviors, extreme anxiety or agitation.
 - 5. The offender appears withdrawn, with minimal response.
 - 6. The offender exhibits dramatic shifts in emotional expression or mood; e.g. depression to elation, agitated to calm or is in the early stages of recovering from severe depression.
 - 7. The offender makes vague references to death.

8. The offender was recently committed to the DOC and faces an especially long period of incarceration or is facing new charges or has recently received additional sentencing.
 9. The offender was recently informed of a significant family crises; e.g. death of a family member, infidelity, major illness or divorce.
 10. The offender is known to be indebted to other offenders or has received threats from other offenders.
 11. The offender was recently denied parole after having planned on an early release or the offender has notable mixed feelings about an impending release.
 12. The offender is suffering from humiliation (e.g., sexual assault) or rejection.
 13. The offender is housed in specialized single-cell housing; i.e., segregation, protective custody or capital punishment.
 14. Any other issues or behavior that may raise a concern in a staff member's opinion.
- C. Offenders exhibiting or subject to any of the above risk factors shall be immediately referred to mental health staff.
- D. In-Service Training: All staff will receive annual in-service training on the subject of Suicide Prevention, as prescribed by DOC policy 1.1.D.1 [Staff Training Requirements](#) STAR OM 5.1.D.3 [Staff Training Requirements](#) and JCA OM 6.1.D.1 [Staff Training Requirements](#).
- E. Training will be coordinated through the facility's Training Director.

4. Staff Monitoring:

- A. All staff should be diligent in monitoring offenders for suicide risk.
- B. Any staff member observing signs that support an offender may be a potential suicide or self harm risk will not leave the at risk offender unattended and will maintain constant observation of the offender until an appropriate response/action can be determined.
1. Any staff member observing signs an offender may be a potential suicide risk or at risk of self harm will report that information as soon as possible to their supervisor (See [Documentation and Reporting](#)).
- C. The level of suicide watch and/or observation requirements for offenders in DOC custody will be determined by mental health staff, the shift commander or unit manager if mental health staff cannot be contacted.
- D. Offenders in DOC custody who are placed on suicide watch will typically be placed in segregation and in a suicide-resistant cell equipped with a camera. Clothing and personal property items may be further restricted to minimize the chance of the offender attempting suicide or self harm.
1. Use of confinement for potential suicide or self harm risk juvenile offenders will be avoided when possible.
- E. Offenders on suicide watch and/or requiring staff monitoring/observation may be subject to modified shower schedules/personal hygiene limitations, special meal trays (paper trays and utensils),

recreation restriction, limited or restricted access to visits, telephone privileges and general correspondence (this shall not in any way limit and offender's access to their Attorney of Record).

- F. Suicide watch or staff monitoring of an offender in DOC custody shall not be downgraded or discontinued without authorization from mental health staff.

5. Suicide Intervention:

- A. Staff who encounter an offender attempting suicide or an offender suicide in progress will remain in the presence of the offender if possible.

1. Staff should summon assistance immediately through institutional emergency procedures or by contacting emergency assistance (911 to request police, fire and/or ambulance) as needed for incidents that occur in a community setting.
2. Staff will initiate suicide precautions until mental health staff responds or the on call mental health staff person can be contacted for further orders. If the situation involves an offender in the community, staff will continue suicide precautions until police, fire, ambulance personnel respond to the scene.
3. Staff must always first assess the situation/scene for personal safety before making direct contact with a suicidal offender.

Note: Offenders have faked suicide attempts to lure staff into a dangerous situation and injured staff who are attempting to stop an offender suicide in progress.

- B. Staff will begin life saving measures if and when it is safe to do so; i.e. cut down an offender who is hanging, stop bleeding, open or maintain airway, begin CPR and any other life saving measures deemed appropriate.

1. Staff will continue life saving measures until relieved by medical staff or first responders (police, fire, ambulance personnel), in the case of an suicidal offender in the community.

- C. Once any acute medical problem(s) have been addressed, the offender should be placed in full restraints to ensure the safety of the offender, staff and others (See DOC policy 1.3.A.3 [Use of Force - Adult Institutions](#)), unless the offender is housed at a minimum custody level facility, Quest or Excel programs (juvenile offender, (See DOC policy 1.3.A.4 [Use of Force – Juvenile Institutions](#))) or the offender resides within the community.

1. If the offender is in DOC custody, staff will notify Health services immediately when an offender has injured, attempted to injure or is likely to injure himself/herself and have been placed in restraints as a result of their behavior or the offender will be placed in four-point restraints.
2. Health Services staff will examine the offender for appropriate placement of the restraints or following the application of four-point restraints. (See DOH policy P-I-01 [Restraint and Seclusion](#)).

- D. Medical staff will determine if the offender's condition is serious enough to require emergency room care or if the offender should be transferred to the local hospital/emergency room for further medical treatment.

6. Documentation and Reporting:

- A. All staff members involved in the reporting of potentially suicidal offenders will adhere to the following reporting procedures:
1. All staff members employed within a DOC institution will complete an [Informational Report](#) (See [Attachment 1](#)) or an informational CIRF (for juvenile offenders), which will be submitted to the respective mental health staff and the reporting staff member's immediate supervisor by the end of the staff member's shift.
 - a. The supervisor, at his/her discretion, may request additional information and/or documentation as needed.
 - b. The Juvenile Corrections Monitor (JCM) will be notified anytime a juvenile offender on suicide precaution engages in self harm/physical harm and requires medical attention.
 2. All staff members employed within parole services will complete a [Special Incident Report](#) (See [Attachment 2](#)) and report the incident to their immediate supervisor.
 - a. The supervisor, at his/her discretion may request additional information and/or documentation as needed and may report the incident to the Director of Parole Services.
 3. All staff members employed within juvenile community corrections will document the incident in COMS and forward the report to their supervisor.
 - a. The supervisor, at his/her discretion, may request additional information and/or documentation as needed and may report the incident to the Director of Community Corrections.
- B. Any serious suicide attempt that results in an offender in the custody of the DOC or a staff member to sustain serious injury requiring immediate medical attention, emergency treatment or hospitalization will be reported to the Secretary of Corrections in accordance with DOC policy 1.1.A.3 [Reporting Information to DOC Administration](#)).
- C. Staff witnesses and staff who respond to a suicide or suicide attempt by an offender will adhere to the respective guidelines provided of this policy and any applicable institutional OMs.
- D. Each DOC unit will maintain records documenting completed offender suicides and suicide attempts by an offender which shall include at a minimum:
1. Offender's name;
 2. Location;
 3. Date and time;
 4. Outcome;
 5. Specifics of the incident; and
 6. Staff response to the incident.
- E. Completed suicides will be handled pursuant to DOC policy 1.4.E.6 [Management of Offender Deaths](#) and applicable institutional OMs.

- F. When a juvenile offender is placed on a suicide precaution level, or has attempted suicide/self harm, or is placed in restraints, confinement or requires medical attention as result of a suicide attempt or self harm, staff will contact the juvenile's parent(s) or guardian(s) in accordance with DOC policy 1.4.B.8 [Parent Guardian Notification](#).

7. Debriefing and Mental Health Services:

- A. A separate debriefing is **required** for all staff and **offered** to all offenders in the vicinity of a completed offender suicide or serious suicide attempt (defined as requiring immediate medical attention, emergency treatment, hospitalization or life saving measures).
1. The Warden, Superintendent, Executive Director of Board of Pardons and Parole, Director of Juvenile Community Corrections or his/her designee will assign a DOC staff member to coordinate the debriefing.
 2. The assigned DOC staff member through input from mental health staff will determine the staff members who are required to participate in the debriefing and any offenders who may participate in the debriefing.
 3. A mental health staff trained in debriefing may conduct the debriefing(s) with the assistance of a qualified mental health professional from the community
- B. Staff requesting additional mental health counseling as a result of witnessing a completed suicide or serious suicide attempt is responsible for all costs not covered under their health insurance carrier.
- C. Any offender requesting additional mental health counseling as a result of witnessing a completed suicide or suicide attempt is responsible to kite the respective mental health staff within the institution they are housed.
- D. In the event of an attempted suicide or completed suicide in a DOC facility, a separate staff-only debriefing will take place with all staff involved in the incident. The debriefing should include at a minimum:
1. The circumstances surrounding the incident,
 2. A review of facility procedures relevant to the incident.
 3. A review of all relevant training received or required by staff.
 4. Review of pertinent medical and mental health services/reports involving the offender.
 5. Identification of possible factors leading to the suicide at attempted suicide.
 6. Recommendations, if any, for changes in policy, OMs, training, medical or mental health services/response, and operational procedures.

V Related Directives:

- DOC policy 1.1.A.3 – [Reporting Information to DOC Administration](#)
- DOC policy 1.1.D.1 – [Staff Training Requirements](#)
- DOC policy 1.3.A.3 – [Use of Force – Adult Institutions](#)
- DOC policy 1.3.A.4 – [Use of Force – Juvenile Institutions](#)
- DOC policy 1.4.B.8 -- [Parent Guardian Notification](#)
- DOC policy 1.4.E.6 -- [Management of Offender Deaths](#)
- DOC policy 1.5.H.3 – [Use of Force – Juvenile Community Corrections](#)
- DOH policy P-D-01 – [Pharmaceutical Operations](#)

DOH policy P-E-02 – [Receiving Screening](#)
 DOH policy P-E-05 – [Mental Health Screening and Evaluation](#)
 DOH policy P-G-05 – [Suicide Prevention Program](#)
 DHS policy DMH-08 – [Suicide Prevention and Response](#)
 MDSP OM 3.4.E.1 -- [Suicide Prevention](#)
 STAR OM 5.3.D.1 -- [Suicide Prevention and Intervention](#)
 STAR OM 5.1.D.3 -- [Staff Training Requirements](#)
 JCC OM 6.3.B.1 – [Suicide Prevention and Intervention](#)
 JCA OM 6.1.D.1 -- [Staff Training Requirements](#)
 Parole OM 7.1.D.2 -- [Suicide Awareness](#)

VI Revision Log:

April 2003: Revised definition of Mental Health Staff, Medical Staff and Watch Companion.

February 2004: Revised definitions to match those of policy DMH-08. **Changed** policy name. **Added** a section on suicide intervention. **Reorganized** existing sections to more closely follow DMH and DOH referenced policies. **Added** references to DOH, DMH and DOC policies. **Revised** the wording of the twenty-four checks made on inmates on suicide watch. **Revised** part A.3 under Suicide Watch Guidelines. **Revised** the wording on fifteen minute checks by DOC staff. **Revised** the time limit for Mental Health Staff evaluations if there are no immediate suicide concerns.

September 2004: **Changed** DOH policy P132 *Intake Screening History and Physical* to PE *Receiving Screening*. **Changed** DOH policy P135 *Mental Health Assessment* to PE 05 *Mental Health Screening and Evaluation*. **Changed** DOH policy P153 *Suicide Prevention* to PG 05 *Suicide Prevention Program*. **Added** a reference to the DOC use of force policy. **Revised** the requirement on full restraints for inmates at minimum custody level facilities who are transferred to the hospital. **Changed** sack lunches to paper trays. **Added** information on Mental Health Staff ordering a suicide watch with fifteen (15) minute camera checks only.

September 2005: **Updated** policy references throughout the policy. **Revised** the definition of Suicide Watch Companion. **Added** references to security mat.

October 2006: Minor style and format changes made throughout the document. **Revised** the policy statement. **Added** procedures for constant observation.

October 2007: **Added** item #12 to the list of warning signs. **Added** the section on Self Medication. **Added** a statement about staff not leaving the inmate alone under the section "Self Monitoring and Reporting". **Added** a reference to DOH policy P-D-01.

September 2008: **Revised** formatting in accordance with DOC policy 1.1.A.2. **Deleted** "Member" from "Staff" in the Definitions section of Staff Member. **Replaced** "attorneys" with "Attorney of Record" in ss 4b of Suicide Watch Guidelines). **Deleted** "Department" in ss (D3 of Documentation and Debriefing) when referencing Mental Health. **Revised** formatting of policies in Section V. **Revised** other minor grammatical and wording throughout policy.

September 2009: **Revised** title of policy and content extensively. **Revised** Policy Index to include all units. **Revised** policy statement to include reference to all DOC staff and **deleted** reference to referring to Mental Health. **Added** definition of Offender. **Added** reference to institution and community corrections staff and **deleted** reference to other state agencies assigned to the DOC within definition of Staff. **Added** reference to DOC institution in definitions of Mental Health Staff, Health Services Staff, Suicide Watch and Suicide Watch Companion. **Added** "safety" when referencing segregation cell within definition of Suicide Watch. **Revised** definition of Suicide Watch Companion to include a paid volunteer and to reflect observing rather than providing companionship. **Revised** Screening Offenders for Suicidal Ideation section into DOC Institutions and DOC Community Corrections, **deleted** reference to A&O in ss (A), **added** reference to JCAs and parole agents, **deleted** former ss (B and C) referencing to contacting mental health staff and **added** reference to OMs. **Deleted** reference of location of risk factors, **revised** who will be providing training both in ss (B) and **added** reference to OMs depicting specific training to staff within ss (C) all within (Training on Identification of Suicide Risks). **Deleted** Self-Medication, Mental Health Staff Roles Suicide Watch Guidelines and High Risk Offenders sections. **Revised** title of ss Staff Monitoring and Reporting to Staff Monitoring. **Revised** entire section to provide general direction on being diligent, not to leave offender alone and referenced section for reporting all within Staff Monitoring. **Added** emergency assistance to ss (A1) and **deleted** former ss (B) regarding use of force

and **added** reference to Quest, Excel, community and DOC policy 1.3.A.4 within ss (C) all within Suicide Interventions. **Revised** Documentation and Debriefing to be separated into different sections. **Revised** ss (A) to include all staff will adhere to reporting procedures, **added** three sections on institutional staff, parole services and JCC staff and **added** reference to reporting to Secretary of Corrections in new ss (B) all within Documentation and Reporting. **Revised** section title of "Documentation and Debriefing" to "Debriefing and Mental Health Services". **Revised** ss (A) to reference a separate debriefing is required for all staff and offered for all inmates within the vicinity, **added** reference to Superintendent, ED, Director of JCC and her" in ss (A1), **added** mental health staff and referenced vicinity within ss (A2), **clarified** mental health staff within institutions will be asked to be part of the debriefing or referenced a community QMP if mental health staff are involved or affected within ss (A3), and **added** new ss (B and C) all within Debriefing and Mental Health Services. **Added** reference to DOC policies 1.3.A.4, 1.5.H.3, SDSP, MDSP, SDWP, Parole and JCC OMs in section V. **Replaced** inmate with offender, **replaced** unit manager or shift commander with designated staff and **replaced** reference to only DOC institutions with DOC units when applicable. **Added** Attachment 1, 2 and 3. **Added** hyperlinks.

September 2010: Revised formatting of Section I. **Added** definition of Awareness Lists. **Added** section on Awareness Lists. **Replaced** "will" with "may", **added** reference to trained in debriefing and **added** qualified mental health professional from the community all in ss (A3 of Debriefing and Mental Health Services).

October 2012: Deleted "Non-public" and **Replaced** with "Public". **Added** definition of "Suicide Ideation". **Added** "by a staff member" and "The use of a trained offender shall not be used as a substitute when staff observation has been ordered" in the definition of Suicide Watch Companion. **Added** "or health-trained staff designee" and "a history of or current" to Section 1 A. **Added** "OIC" to Section 1 A. 2. **Added** "which may include contacting the on-call mental health staff person" to Section 1 A. 3. **Deleted** "the suicidal/suicide risk offender receives" and **Replaced** with "offenders with positive screens receive a mental health evaluation and" in Section 1 A. 4. **Added** "community corrections staff" to Section 1 B. **Added** "(in DOC custody)" and "from the date which they were placed on the awareness list" and **Added** "Offenders who are transferred to another DOC facility will be added to the receiving facility's awareness list" to Section 2 A. **Added** "adult" to Section 2 B. **Deleted** "therefore resulting in the need to have the personal items of the offender on the awareness list restricted to ensure their safety" and **Replaced** with a. "An adult offender who is housed in a single cell may have their property items restricted as required and approved by the Unit Manager and mental health staff" in Section 2 B. 2.a. (**Changed** to E in Section 2) **Added** 3. to Section 3 B. **Added** "suicidal ideations" to Section 3 B. 1. **Added** new C. to Section 3. and **Renumbered** items that followed. **Added** D. to Section 2 **Added** "or is in the early stages of recovering from severe depression" in Section 3 B. 6. **Added** "or is facing new charges or has received additional sentencing" in Section 3 B. 8. **Added** "or subject to" in Section 3 C. **Added** "that an offender may be" and "of self harm" and "and the offender will remain under constant observation" in Section 4. B. **Added** "to their supervisor" in Section 4 B. 1. **Added** C.-F. to Section 4. **Added** 12. **Added** D. **Added** 2. to Section 5 A. **Added** 1. to Section 5 B. **Added** "to ensure the safety of the offender, staff and others" in Section 5 B. **Added** 1. and 2. to Section 5 C. **Added** "or an informational CIRF (for juvenile offenders) in Section 6 A. **Added** b. to Section 6 A. 1. **Deleted** "requires emergency medical care of hospitalization or an offender in the custody of the DOC" and **Replaced** with "results in an offender in the custody of the DOC or a staff member to sustain serious injury requiring immediate medical attention, emergency treatment or hospitalization" in Section 6 B. **Added** "time" to Section 6 D. 3. **Added** E&F to Section 6. **Added** (defined as requiring emergency medical care of hospitalization or life saving measures" in Section 7 A. **Deleted** "which was in the vicinity that will be offered" and **Replaced** with "the members who are required to participate in the debriefing" in Section 7 A. 2. **Deleted** "may be asked to jointly" and **Deleted** "unless the mental health staff is directly involved or affected by the completed suicide or serious suicide attempt" in Section 7 A. 3. **Added** D. 1-6 to Section 7.

Denny Kaemingk

Denny Kaemingk, Secretary of Corrections

01/24/2013

Date

Attachment 2: Major Incident Report

The **Major Incident Report** form is located on the state's WAN.

A copy may be printed using **Microsoft Word** as follows:

1. Click [here](#) to access the **Major Incident Report** by:
 - a. Placing mouse on the word "here" above
 - b. Press and hold the "Ctrl" key on the keyboard
 - c. Click the left button of mouse.
2. Or Select **File/New** from the Menu Bar / Select the **DOC** tab / Select **Major Incident Report**.

The gray areas indicate the information that is to be entered.

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South Dakota Department of Corrections Policy Distribution: Non-Public		Attachment: Major Incident Report Please refer to DOC policy 1.1.A.3 / 1.5.H.3 Reporting Information to DOC Administration / Use of Force - JCC		South Dakota Policy Distribution: (Public or Non-Public)		Attachment: Major Incident Report Please refer to DOC policy 1.1.A.3 / 1.5.H.3 Reporting Information to DOC Administration / Use of Force - JCC	
MAJOR INCIDENT REPORT							
TO: Secretary of Corrections Mary Ellison		FROM:					
NAME OF OFFENDER(S):							
Last - First		Offender#		DOB		Crime or Adjudication	
TYPE OF INCIDENT:							
DATE OF INCIDENT:		TIME OF INCIDENT:		<input type="checkbox"/> AM <input type="checkbox"/> PM			
LOCATION OF INCIDENT:							
NARRATIVE SUMMARY: (Provide how the incident occurred, how the incident was discovered and all details of the incident in chronological order).							
WHO WAS INVOLVED? (Include the names of all staff involved in the incident)							
Staff Member		Staff Member		Staff Member		Staff Member	
HOW WAS ESTABLISHED POLICY AND PROCEDURES FOLLOWED?							
RESPONSE: (list whether and when law enforcement, media and others were contacted)							
Media Contacted:		<input type="checkbox"/> Yes <input type="checkbox"/> No		Date/Time Contacted:		<input type="checkbox"/> AM <input type="checkbox"/> PM	
Law Enforcement Contacted:		<input type="checkbox"/> Yes <input type="checkbox"/> No		Date/Time Contacted:		<input type="checkbox"/> AM <input type="checkbox"/> PM	
Others Contacted?:		<input type="checkbox"/> Yes <input type="checkbox"/> No		Who?:			
				Date/Time Contacted:		<input type="checkbox"/> AM <input type="checkbox"/> PM	
Others Contacted?:		<input type="checkbox"/> Yes <input type="checkbox"/> No		Who?:			
				Date/Time Contacted:		<input type="checkbox"/> AM <input type="checkbox"/> PM	
CORRECTIVE ACTION: (Briefly state any corrective action or disciplinary action that has been taken or will be taken as a result of this incident)							
Revised: 7/17/2009				Page: 1 of 2		Created: 7/17/2009	
						Page: 2 of 2	