



**New Hampshire Division for Children, Youth and Families Policy Manual**

**2056 SUICIDE PREVENTION**

Chapter: Sununu Youth Services Center

Section: Safety and Security

Approved:

Joseph E. Ribsam, Jr., DCYF Director

Policy Directive: **23-03**

Effective Date: **March 2023**

**References Of Note**

Federal Authority:

Statutes: [RSA 621](#), and [RSA 621-A](#)

Administrative Rules:

Case Law:

This policy establishes suicide prevention and intervention practices at SYSC.

**Required Practices**

*Any deviations to the following information must be documented with Supervisory Approval.*

- I. All staff responsible for youth supervision will be trained in evidence-based suicide prevention and intervention during Core Academy. The initial training will include the following, but is not limited to:
  - A. Suicide research;
  - B. Factors contributing to youth in treatment facilities having a higher risk of suicidal behavior;
  - C. Current trends and themes surrounding youth suicide;
  - D. Potential predisposing factors to suicide;
  - E. High-risk suicide periods;
  - F. Warning signs and symptoms;
  - G. Identifying suicidal youth despite their denial of risk;
  - H. Contagion or behavior triggering a similar response in other youth;
  - I. Staff attitudes about suicide and safe language/messaging;
  - J. Vicarious trauma and self-care;
  - K. Liability issues associated with youth suicide; and

- L. Components of this policy.
- II. Pursuant to policy [2054 Watch Assessment - Initiation, Communication, and Duties](#), staff concerned for a youth's safety to self or others can temporarily initiate a watch, to ensure the welfare of all involved. Until watch procedures are initiated, the youth shall be treated as an A-Watch (constant observation).
- A. Staff must inform the On-Duty Supervisor, who will contact medical personnel, the On-Site or On-Call Clinician and the On-Site or On-Call Administrator.
  - B. The On-Duty Supervisor will ensure that the proper level of watch is initiated and will provide staff with the Clinical/Medical Watch Report (Form 2057), necessary for monitoring.
  - C. Any time a watch is initiated, staff will:
    - 1. Complete an entry on the SYSC Central Control Watch Log (Form 2054L), documenting the youth and level of watch;
    - 2. Complete the Watch Initiation Report (Form 2054A) in YouthCenter;
    - 3. Post the watch on the unit white board;
    - 4. Possess Form 2057 and maintain it accurately; and
    - 5. Add the watch to the SYSC Shift Summary Report (Form 2371) for staff communication.
- III. When supporting youth, who are expressing suicidal thoughts, staff use various strategies, including but not limited to the following:
- A. Staying with the youth;
  - B. Active listening;
  - C. Maintaining a calm demeanor;
  - D. Maintaining contact through conversation, eye contact, and body language; and
  - E. Ensuring a safe environment by removing any objects the youth may use to harm themselves.
- IV. Any staff who discovers a youth attempting significant self-harm or suicide will:
- A. Immediately respond consistent with First Aid/CPR training;
  - B. Survey the scene for any visible safety hazards;

- C. Call Central Control and request responders and medical staff to the location immediately, with an emergency first aid kit and safety scissors;
  - 1. Instruct the Central Control staff to contact outside emergency medical services (911), if the attempt is life threatening. The exact nature and location of the emergency will be communicated to any outside emergency medical service personnel;
- D. Upon entering the scene, staff will immediately initiate life-saving measures;
  - 1. In the event the youth has any item wrapped around their neck, staff will use the safety scissors to release the youth from the ligature as soon as possible;
    - (a) Staff will assume a neck/spinal cord injury and carefully place the youth on the floor;
    - (b) Should the youth lack vital signs, CPR will be initiated immediately; and
- E. All life-saving measures will be continued by residential staff until relieved by medical personnel.
- V. The On-Duty Supervisor will ensure that arriving outside emergency medical services personnel have unimpeded access to the scene in order to provide prompt medical services, depending on the needs of the youth.
  - A. The scene of the emergency shall be preserved as much as possible, but the first priority will always be to provide immediate life-saving measures to the youth. Scene preservation will be secondary priority.
- VI. All suicide attempts will result in the youth receiving immediate intervention and assessment by clinical staff, regardless of whether the suicide attempt required emergency medical intervention.
- VII. The On-Duty Supervisor will notify:
  - A. The On-Duty or On-Call Administrator;
  - B. The facility psychologist; and
  - C. The Clinical Services Specialist (EPIC Team Coordinator), via email.
- VIII. All incidents of verbalizing self-harm, engaging in self-harm, suicidal ideation, or suicidal behavior will be documented in Reporting Self-Harm and Suicidal Ideation/Behavior (Form 2056) in YouthCenter.

## Applicable Forms

Form	Title
2054A	Watch Initiation Report
2054L	SYSC Central Control Watch Log
2056	Reporting Self-Harm and Suicidal Ideation/Behavior
2057	Clinical/Medical Watch Report
2371	SYSC Shift Summary Report

## Glossary and Document Specific Definitions

[A - B](#)   [C - D](#)   [E - F](#)   [G - I](#)   [J - L](#)   [M - N](#)   [O - Q](#)   [R - S](#)   [T - V](#)   [W - Z](#)

## Document Change Log

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