

From: "[REDACTED]" <[REDACTED]>

To: "[REDACTED]" <[REDACTED]>, "[REDACTED]" <[REDACTED]>

Subject: RE: Suicide watch

Date: Mon, 12 Aug 2019 16:17:52 +0000

Importance: Normal

Attachments: TEXT.htm

[REDACTED], following up on the below info, a lot of media are speculating that he should not have been removed from SW. While of course the length of time someone is there is not a determining factor, and the information below explains what SW is like and why it is generally used for just short periods, I pulled some info on the average time inmates are on SW. This info covers the past year:

3,893 Suicide Watches were conducted (for 2,175 unique inmates)

11,267 Total Days of Suicide Watch

Average Length of Suicide Watch: 2.89 Days/Watch (which includes a number of longer watches where inmates were waiting for a hospital bed)

Median Length: 1.5 Days

I think this provides a more complete picture on how SW is used and why it is not usually used for long periods.

>>> "[REDACTED] (OAG)" <[REDACTED]> 8/11/2019 11:04 PM >>>

Thanks, [REDACTED]. This is helpful.

[REDACTED]

From: [REDACTED] <[REDACTED]>

Sent: Sunday, August 11, 2019 10:15 PM

To: [REDACTED] <[REDACTED]>; [REDACTED] (OAG) <[REDACTED]>

Subject: Re: Suicide watch

[REDACTED] - Below is the explanation as provided by our Psychology Services Administrator. They will be providing the research behind this tomorrow, but wanted to get this information to you tonight. Let me know if you have any questions regarding this information.

Suicide watch is widely regarded as a short-term crisis intervention. As practiced in the BOP, it is a highly restrictive intervention that focuses on preserving the life of an individual in crisis. Typical conditions of a suicide watch include containment in an identified suicide watch cell absent tie-off points and sharp objects, placement in a suicide watch smock that is resistant to use as a ligature, constant observation by another individual, lights on 24 hours per day to ensure effective observation, extreme limits on personal property for safety, and at least daily contact with a BOP psychologist. While these restrictive conditions are extremely effective in the short-term prevention of suicide, they are inconsistent with a quality of life that supports future oriented goals and the achievement of those goals. For this reason, suicide watch is used to prevent a suicidal crisis, but is ended when an individual is no longer assessed to be an immediate threat to himself and is able to resume goal directed behaviors that support a quality of life, such as interactions with peers, visits with family or attorneys, work, etc. The assessment used to determine that suicide watch is no longer warranted is conducted by a doctoral level psychologist. Following the conclusion of a suicide watch, psychologists follow up with ongoing assessment and interventions such as additional suicide risk assessments, counseling sessions, and/or supportive visits.

Sent from my Verizon, Samsung Galaxy smartphone

----- Original message -----

From: "[REDACTED] (OAG)" <[REDACTED]>

Date: 8/11/19 10:03 PM (GMT-05:00)

To: [REDACTED] <[REDACTED]>, [REDACTED] <[REDACTED]>

Subject: Suicide watch

>>> "[REDACTED] (OAG)" 08/11/2019 22:03 >>>

Were you able to locate the information about the impact of prolonged suicide watch status on inmates ?

[REDACTED]