



**ALASKA DEPARTMENT OF CORRECTIONS
DIVISION OF INSTITUTIONS
VOLUNTEER APPLICATION**



The information you provide on this application will be used for a security background check. Applicants with previous arrests or convictions will receive serious consideration, so please respond to all items. All instructors, religious service providers, drug and alcohol counselors, volunteers, and other providers will be required to complete this application. Failure to provide complete and accurate information may cause denial of the application.

Name: (Last) (First) (Middle) (Suffix)					Date:	
Date of Birth:	Place of Birth:	Alaska Driver's License No.	Height:	Weight:	Sex:	
Current Address: (Physical [No. & Street] Mailing [PO Box]) (City)					(State)	(Zip)
Home Phone:	Work Phone:	Are you an Alaskan Resident?	If so, how long?	Previous States Lived In:		
List all other names you have been known by:						
Have you ever been arrested for reasons other than minor traffic violations? (If yes, explain below or on a separate paper)					☐ Yes	☐ No
Do you have friends or relatives incarcerated in Alaska? (If yes, explain below or on a separate paper)					☐ Yes	☐ No
What program are you applying for?						
Name & phone number of sponsoring person:						

I understand that a security background check is a necessary procedure for acceptance into this program. If selected, I also agree to abide by all policies and procedures of the Alaska Department of Corrections and the Correctional Center I am working in, particularly those regarding security and confidentiality of information. I also understand that false information will result in non-acceptance or discharge from this program. My signature certifies the truth and accuracy of this information.

Date:	Signature of Applicant:
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The Staff Coordinator or Institutional Security Officer will contact you if there are any additional questions that arise. They will also notify you of the results of this application and make arrangements for an interview and facility orientation, which are required prior to your involvement in this program.

**DEPARTMENT OF CORRECTIONS
VOLUNTEERS
CODE OF ETHICAL PROFESSIONAL CONDUCT**

My fundamental duty is to respect the dignity and individuality of all people, to provide professional and compassionate service, and to be unfailingly honest. I will not discriminate against any person on the basis of race, religion, color, national origin, sex, age, physical or mental disability, marital status, changes in marital status, pregnancy, parenthood, or any other class protected by law, and will respect and protect the civil and legal rights of all inmates, probationers, and parolees.

I will respect the right of the public to be safeguarded from criminal activity, and will be diligent in recording and making available for review all case information that could contribute to sound decisions affecting the public safety, or an inmate, probationer, or parolee. I will maintain the integrity of private information, and will neither seek personal data beyond that needed to perform my volunteer duties, nor reveal case information to anyone not having a proper professional use for the information. In making public statements, I will clearly distinguish between those that are my personal views and those that are made on behalf of the agency. I will not use my volunteer position to secure privileges or advantages for myself, and will not accept any gift or favor that implies an obligation inconsistent with the objective exercise of my professional duties.

I will not act in my volunteer capacity in any matter in which I have a personal interest that could in the least degree impair my objectivity. I will not engage in undue familiarity with inmates, probationers, or parolees. I will report any corrupt or unethical behavior of a fellow volunteer or correctional, probation, or parole officer that could affect either an inmate, probationer, or parolee, or the integrity of the agency, but will not make statements critical of colleagues or other criminal justice agencies unless the underlying facts are verifiable. I will respect the importance of, and cooperate with, all elements of the criminal justice system, and will develop relationships with colleagues to promote mutual respect for the profession and improvement of the quality of service provided.

I have read the Code of Ethical Professional Conduct, and have sought and obtained clarification of portions that I did not understand. I recognize that failure to abide by the Code may result in termination from the volunteer program.

Printed Name

Signature

Date

***FAIRBANKS CORRECTIONAL CENTER
INSTITUTIONAL ORIENTATION FOR
CONTRACTOR/VOLUNTEER/CONTRACT STAFF***

NAME (print):
EMPLOYER:
DOB:
ADL:
PHONE#

1. Upon entrance to the institution, you will be given an identification badge. This badge must be displayed in plain view at all times while in the facility. Prior to leaving the facility, you must turn in the badge to Fairbanks Correctional Center staff.
2. Any guest you wish to bring to the facility must be approved prior to arrival.
3. You should understand that any and all persons and their belongings are subject to search upon entering the Fairbanks Correctional Center.
4. **No one under the influence of a controlled substance or alcohol will be allowed to conduct any activities.**
5. Volunteer staff must dress in an appropriate manner. Hats, coats, hooded clothing and jackets are prohibited. Shirts must have sleeves, shoulders and midribs must be covered. Clothing may not have obscene or provocative slogans, logos, or other objectionable writing. Shirts with buttons/clasps must be buttoned/fastened with the exception of the top (neck) button/clasp. Zippered shirts, jackets, sweaters, and coats are prohibited. Any clothing item which is transparent, translucent, low cut, revealing, provocative, or immodest is prohibited. Lockers are available to secure your belongings.
6. You must have control of your group.
 - If a problem occurs, call for assistance.
 - You may exclude anyone from attending your group.
 - Please discourage excessive noise and abusive language.
 - Male and female prisoners may not have physical contact with each other during your program.
7. Notify staff immediately should you be threatened by a prisoner.
8. Please leave your personal life outside the institution.
 - Do not allow yourself to become involved personally with a prisoner.
 - Do not give prisoners your home telephone number.
 - Do not bring anything to prisoners, i.e., chewing gum, cigarettes, money, stamps, etc.
 - Do not take anything out for prisoners, i.e., letters to be mailed, messages, etc.
 - Do not bring any weapons into the facility, i.e., knives, fingernail clippers, sharp objects, etc.
9. While realizing that some degree of confidentiality will exist in your group, you are required to report immediately any indication of unrest, planned escape, violence, or any issue or information that may jeopardize the security of the correctional facility or endanger the community.

10. Security is always our first priority. Therefore, remember anything you see or hear specific to the facility will remain confidential. Cameras or recording equipment is not authorized without advance permission from the superintendent. On occasion:
 - Your activity may start late;
 - Your activity may end early;
 - Your activity may be terminated; and/or
 - Your activity may not be allowed to begin at all.
11. While you are not expected to conduct yourself as an officer, you must be aware that your actions, if not appropriate, could result in unrest, assaults or other violence.
12. Close and lock all doors and gates unless instructed otherwise by a correctional officer.
13. Do not allow anyone through any controlled gates with you, unless you recognize this person as a staff member.
14. You are not permitted to enter areas other than your program/work area without a correctional officer escort.
15. **Introduction of contraband is a criminal offense.**
16. No pets will be left in vehicles on institutional property.
17. Lock all vehicles and/or tools and ensure you have accounted for all equipment at the end of each day. Vehicles, tools and equipment left on-site will be secured as agreed upon with the administrators of the institution.
18. Notify staff immediately if any equipment is missing or tampered with or your experience any type of interaction with inmate(s) that is questionable.
19. When working in a correctional facility, the possibility of a hostage situation exists. In this event, the state is not obliged to negotiate for the release of a person taken hostage.
20. Any state property issued to you for use on-site, i.e., keys, ID picture badge, tools, etc., must be returned to the institution when you have completed your service with the facility.

ALL SEXUAL BEHAVIOR IS PROHIBITED ZERO-TOLERANCE POLICY

21. Alaska Department of Corrections has a Policy and Procedures 808.19 addressing sexual assault, sexual misconduct and sexual harassment.
22. Sexual assault, sexual misconduct and sexual harassment or any type of sexual behaviors are PROHIBITED.
23. Types of Sexual Assault, Misconduct and Harassment
 - Prisoner-on-employee/contract worker/volunteer
 - Employee/contract worker/volunteer-on-prisoner
 - Prisoner on prisoner
24. Acts of Sexual Assault, Misconduct and Harassment
 - **There is NO allowable consensual agreement between DOC employees, contract workers, volunteers or offenders to engage in ANY sexual behavior or act.**
 - The physical act
 - The attempt of the physical act, including inappropriate touching and exhibitionism.

- Threats, intimidation, and actions/communications meant to coerce or pressure another to engage in the inappropriate act.
 - Retaliation against individuals reporting prohibited sexual behavior is prohibited and punishable.
25. All Department personnel, contractors or volunteers who receive information concerning prisoner sexual misconduct or have reasonable belief to suspect a prisoner is a victim of sexual misconduct, or observe an incident or behavior shall immediately report the information to the most appropriate supervisory staff. The information shall be documented on an Incident Report form 809.03A.
26. Prisoners may report allegations of conduct prohibited by Policy and Procedures 808.09¹⁹, including threats of sexual misconduct to any Department employee, contractor or volunteer. Such allegation may be reported verbally, in writing or may be made by a third party.
27. All reports of prohibited sexual behavior will be referred to a law enforcement agency for investigation and referral to the Alaska State Troopers by the Department of Corrections.
28. Privileged communications between ordained clergy, medical or mental health staff and clients does not extend to matters that threaten the safety and security of the institution, staff or prisoners; if it contains threats to public safety or if it is specifically addressed by state statutes.
29. Confidentiality: All information related to a victim of sexual abuse or sexual harassment shall be considered confidential and shall be released only to those who need the information to perform their official duties.

State law requires all Department contractors and volunteers who may have contact with prisoners to receive training based on the services they provide and the level of contact they have with prisoners regarding the prevention, detection, reporting and response to sexual abuse and sexual misconduct as required by PREA (Prison Rape Elimination Act). Statements 21 through 29 are all related to PREA, and will suffice for your annual training. If you require a more in depth explanation of your duties, please inquire before signing below.

By signing below, I acknowledge that I have been trained in my Prison Rape Elimination Act Responsibilities.

I HAVE READ, UNDERSTOOD AND AGREE TO THE ABOVE RULES.

Name (signature)

Date

Officer Signature

Date

Cc: Compliance Sergeant
PREA Coordinator
Security



STATE OF ALASKA
DEPARTMENT OF CORRECTIONS

Acknowledgement of Having Read DOC P&P(s):

DOC Institution / Facility / Office: Fairbanks Correctional Center

Check One: ☐ Volunteer ☐ Contractor

Name: _____ Job Title: _____

Review of the following Policies & Procedures is mandatory to provide services at FCC. You must acknowledge that you have read and understand the contents of these P&Ps by affixing your signature to this document and returning it to the Programs Supervisor.

Should you have any questions concerning these P&Ps, contact the Programs Supervisor for clarification.

By my signature I acknowledge that I have read and understand the P&Ps listed below:

P&P INDEX #:	SUBJECT:
DOC P&P 202.15	Standards of Conduct
DOC P&P 201.09	Prohibition of Sexual Harassment
DOC P&P 807.20	Suicide Prevention and Intervention
	PREA training video 2023 version

<https://doc.alaska.gov/pnp/pdf/202.15.pdf>

<https://doc.alaska.gov/pnp/pdf/201.09.pdf>

Reader's Signature

Date

Reader's Printed Name

Program Manager Signature

Date

Distribution:

Original to Personnel / Volunteer / Contractor File.

STATE OF ALASKA DEPARTMENT OF CORRECTIONS  POLICIES & PROCEDURES	SECTION: Administration	PAGE: Page 1 of 12
	CHAPTER: 200	NUMBER: 202.15
	P&P TYPE: Public	
	TITLE: Standards Of Conduct	
ATTACHMENTS / FORMS: (A.) Standards Of Conduct Certificate Of Review And Compliance.	APPROVED BY:  Dean R. Williams, Commissioner	
	DATE: 02/15/17	
		AUTHORITY / REFERENCES: 22 AAC 05.045 AS 33.30.011 22 AAC 05.060 AS 33.30.021 22 AAC 05.095 AS 39.28 22 AAC 05.155 AS 39.52 22 AAC 05.196 AS 39.90.010-150 AS 12.62.120 AS 44.09.015 AS 12.62.900 AS 44.28.030 AS 18.80.200 DOC P&P 202.01 AS 33.05.010 FBI CJIS Security Policy. AS 33.16.180 State Of Alaska Constitution, Art. I, Sec. 3, Civil Rights. HIPAA, Pub. L. 104-191. ADA, 42 U.S.C. 12101 et seq.

POLICY:

It is the policy of the Department of Corrections (DOC) that in the daily performance of their duties, employees will demonstrate honesty, integrity, and respect for the worth and individuality of all persons. Department employees shall also demonstrate a strong commitment to professional and ethical correctional service.

APPLICATION:

This policy and procedure will apply to all Department employees.

DEFINITIONS:

As used in this policy, the following definitions shall apply:

Business Relationships:

A relationship between individuals or companies entered in to for commercial purposes and usually some kind of financial gain. Such relationships are sometimes formalized with legal contracts or agreements.

Conflict Of Interest:

A situation that has the potential to undermine the impartiality of a person because of the possibility of a clash between the person's self-interest and a competing professional or public interest.

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Egregious Misconduct:

Misconduct that is extraordinary in some bad way, and includes but is not limited to, the definition of egregious misconduct found in applicable collective bargaining agreement.

Illegal Behavior:

Behavior that falls outside the law.

Investigations:

The formal or systematic examination or research of an event or person based on the study of factual information. There are various types of investigations including:

- **Official Investigations:**
Investigations that are conducted with the intent of being formally recorded. Such investigations usually follow a set format and would have an outcome that is documented in some official manner.
- **Internal Investigations:**
Investigations undertaken by the Department of Corrections and kept within the Department. Such investigations may not involve outside agencies and the outcome of the investigations would typically not be released outside of the Department.
- **Administrative Investigations:**
Investigations based on the possibility that the event or conduct of the person in question may have involved some form of misadministration (such as the breach of a policy), with the aim of corrective action or discipline when warranted.
- **Criminal Investigations:**
Investigations to determine whether the event or conduct of the person in question may have been criminal in nature.

Medical Information:

Any written, verbal or electronic information about a person's health status (past or present) or the provision of health care.

Professional Conduct:

Behavior befitting a person employed in a position of public trust.

Unethical Behavior:

Behavior that falls outside of what is considered morally right or proper for a person, profession or an industry, including behavior which conflicts with the Alaska Executive Branch Ethics Act (AS 39.52) or the Department's Code of Ethical and Professional Conduct (DOC P&P 202.01).

PROCEDURES:

The following rules and standards express in general terms the conduct expected of DOC employees. Violations

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of these principles may result in corrective or disciplinary action, up to and including dismissal. Instances of egregious misconduct may result in immediate dismissal. The following list is not all-inclusive. In addition to generally accepted principles of employment (e.g., employees may not steal from their employers), the State of Alaska and each DOC office or institution has site specific policies and procedures, the violation of which may result in corrective or disciplinary action.

I. General Provisions:

- A. Employees shall comply with and obey all federal, state and municipal laws.
- B. Employees shall comply with and obey all DOC regulations, policies and procedures, operational memoranda, orders, and instruction. Employees shall not aid, abet, or incite another employee to violate these guidelines.
- C. Employees shall promptly obey directives given by supervisors. If a directive is in conflict with a previous directive, the employee shall inform the supervisor of the conflict. If the supervisor does not retract or alter the directive, it shall stand; however, employees shall not be compelled to obey any directive that would require them to commit or abet an unlawful act.
- D. Failure to obey an order lawfully issued by a supervisor or the use of abusive language toward a supervisor shall be deemed an act of insubordination.
- E. Unlawful discrimination, workplace harassment, or creating a disrespectful workplace will not be tolerated. Employees, offenders, and their families shall be treated professionally at all times regardless of their race, religion, color, creed, national origin, physical or mental disability, sex, marital status, changes in marital status, pregnancy, parenthood or age.
- F. The DOC complies with the State's Equal Employment Opportunity (EEO) Act (AS 39.28) that prohibit retaliation against an employee in any aspect of employment including promotion, job assignment, or any other terms or conditions of employment because that employee filed a charge of discrimination, complained about illegal discrimination, or because they participated in an employment discrimination proceeding such as an investigation.
- G. When dealing with the public, offenders, and each other, employees shall be courteous and respectful. Employees shall not use violent, profane or abusive language or gestures.
- H. Employees shall be truthful and forthright in their statements and communications regarding other employees or offenders.
- I. Employees will avoid any conduct, on or off duty, which compromises their integrity and betrays the trust, faith, and public confidence in the DOC.
- J. Employees are obligated to be accountable and efficient in the use of state resources. Employees shall not use or allow the use of state time, supplies, or state-owned or leased property and equipment for their

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personal gain. Use of state equipment and resources must not violate the State's Executive Branch Ethics Act (AS 39.52). Loss, misuse, misplacement, theft or destruction of state property must be reported to the appropriate supervisor immediately. Employees shall not appropriate any lost, found, evidential, or DOC property for their own use.

- K. Employees shall report fit for their duty assignment, punctually at the time and place directed. Employees are prohibited from engaging in unprofessional conduct which prohibits immediate response in case of emergency.
- L. Employees are required to remain alert and attentive during duty hours. Sleeping, or being distracted by non-job related activity that in itself constitutes an unprofessional use of state time is strictly forbidden. Examples of unprofessional use of state time include playing games, extended and recreational reading of newspapers, books and magazines; extended periods of non-work related internet use, including web surfing; engaging in lengthy personal phone calls and any other action which results in a failure to be attentive of the security and safety of the institution / office. This list is not all inclusive, and there are other activities that are non-job related which may also constitute an unprofessional use of state time warranting discipline, up to and including dismissal.
- M. Employees shall not knowingly falsify any document nor willfully depart from the truth in giving testimony or in connection with any official duty or investigation.
- N. Employees shall not interfere with any action or investigation assigned to another employee or interfere with DOC operations.
- O. Any level of intoxication or the use or possession of any kind of alcoholic beverage, legal intoxicant or illegal or non-prescribed controlled substance, or drug paraphernalia on the job or on DOC property is prohibited. Employees on duty are not to smell of or to be under the influence of alcohol or marijuana. Employees smelling of or appearing to be under the influence of alcohol or marijuana may be requested to be the subject of an alcohol / drug test. Nor may employees report for duty under the influence of any over-the-counter or prescription controlled substance if that substance adversely impacts the employee's ability to perform their duties.

II. Conflicts Of Interest:

- A. Employees shall avoid situations that give rise to a financial or personal conflict of interest, and shall abide by the provisions of the Alaska Executive Branch Ethics Act (AS 39.52).
- B. Employees shall refuse to accept any gifts, presents, subscriptions, favors, gratuities, scholarships, or promises that could be interpreted as being offered to the employee in order to cause a DOC employee to refrain from performing his or her official duties, or to provide special favor or status to offenders or contractors providing services to the DOC.
- C. Employees shall not accept private or special advantage from their official status as employees of the DOC. DOC credentials, uniforms, identification cards, or badges may not be used to coerce, intimidate,

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or deceive others or to obtain any privilege or articles not otherwise authorized in the performance of official duties.

- D. Employees shall not engage in any other employment during scheduled work hours, nor shall any State resources be used in furtherance of off-duty employment (paid or unpaid), volunteer, or business activities. Time off for volunteer activities (emergency search and rescue, volunteer fire service, etc.) is subject to the normal leave provisions. This restriction shall not apply to employees involved in legitimate military service, such as the AK State Defense Force or Army National Guard.
- E. Employees shall accept no position, paid or unpaid, that conflicts with their duty to report wrongdoing by offenders, volunteers, staff or members of the public.

III. Relationships Between Supervisors And Subordinates And Relationships Between Peers:

- A. Dating, romantic, sexual relations, or engaging in joint business relationships between supervisors and subordinates when the subordinates are within the direct supervisory chain of command of the supervisor is prohibited. If such a relationship exists or develops, the employees involved shall report it to the office or institution manager to discuss the arrangements that must be made (e.g., shift or supervisory reassignments) to comply with this policy. Exceptions to the policy require written approval by the Commissioner. It is understood that a transfer of one party may be the result of such a relationship and that such an action shall not be considered an act of discipline.
- B. Dating, romantic, sexual relations, or engaging in joint business relationships between employees and a supervisor in their chain-of-command at any level is also prohibited. If such a relationship exists or develops, the employees involved shall report it to the appropriate Division Director and duty reassignments may be made to comply with this policy.
- C. Dating, romancing, sexual relations, engaging in joint business or the ending of such relationships with a coworker shall not interfere with the performance of the employee's duties nor create a hostile workplace for co-workers.
- D. Supervisors shall not give, accept or solicit gifts, money, or favors to or from peers or employees under their supervision. Gifts of minor monetary value (e.g., Christmas, birthday, and retirement presents) or collections for flowers or gifts on occasions of grief or celebration are not considered contrary to the spirit of this policy. At no time shall such gifts be purchased with State funds.
- E. Supervisors shall not use abusive or obscene language toward a subordinate nor shall subordinates use abusive or obscene language toward a supervisor.
- F. At no time shall a supervisor show undue favoritism to a subordinate. Undue favoritism is a conflict of interest with an employee's obligation to exercise fairness and professional judgment in the conduct of State business. Employees shall avoid participation in situations that may create undue favoritism.

IV. Relationships With Offenders And Family Members Of Offenders:

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- A. Brutality, physical violence, or verbal abuse of offenders by employees will not be permitted. Employees are authorized to use only that level of force necessary to control an offender or to enforce legitimate and legal commands as provided in the Department's use of force policy.
- B. Employees will not exchange special treatment or favors, or make threats to obtain information from offenders.
- C. Except as set out in D. below, employees may not knowingly maintain social, sexual, business or financial associations with offenders that are under the supervision of the DOC, or a member of the offender's immediate family. This prohibition applies to any state or federal offender under the supervision of the DOC, whether the offender is actively detained or incarcerated at a DOC institution, or whether the offender is not incarcerated but is on probation, parole, or furlough supervised by the DOC. This includes, but is not limited to, telephone calls, letters, notes, social media communications or other communications outside the normal scope of employment. Business relationships do not include the purchase of merchandise or groceries from a legitimate retail outlet or the purchase of services from a legal business. Exceptions to this rule include pretrial defendants released on bail unless the defendant is under the supervision of a probation office and those employees who are actively involved in common pro-social activities with offenders such as work, school, treatment programs, sports leagues and supportive re-entry efforts.
- D. Employees shall not directly or indirectly give to, or accept from any offender or member of the offender's family anything in the nature of a gift or promise of a gift.
- E. Employees shall not engage in any unauthorized game, contest, sport, or betting with any offender. Exceptions to this rule include pro-social, organized sports activities.
- F. During the performance of their duties or while acting as representatives of the DOC, employees may not sign any petition, letter, or recommendation to the courts or to representatives of the courts regarding leniency, pardon, probation, parole or any other form of criminal case disposition on behalf of an offender unless:
 - 1. To do so is a requirement of his or her position; or
 - 2. The employee has received authorization from the institution or office manager.
- G. Regardless of where the employee works in the DOC, in cases where a close personal relationship with an offender or offender's family member existed prior to the offender coming under the supervision of the DOC, the employee shall notify their chain-of-command in writing immediately. The institution or office manager shall determine the appropriate parameters of the employee's conduct toward the offender or offender's family. It is understood that a transfer of one party may be the appropriate reaction to such circumstance and will not be considered disciplinary.
- H. Employees shall not discuss their personal life or another employee's personal life with offenders.

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- I. Employees shall not bring into or carry out of any DOC institution any items for offenders. All items received or purchased from offenders or given to offenders will be through official sanctioned channels and will have prior approval of the office or institution manager. The introduction of any items of contraband onto the grounds of any secure institution is prohibited.

V. Illegal or Unethical Behavior:

- A. Employees are expected to obey all federal, state, and local laws. Neither the absence of a criminal complaint or conviction, nor the dismissal of or acquittal on a criminal charge, shall preclude internal administrative investigation and discipline regarding allegations of illegal or unethical conduct, on or off duty.
- B. DOC employees have an affirmative obligation to report immediately in writing to their office or institution manager any knowledge of criminal activity or unethical action on the part of other employees while on duty or on DOC premises.
- C. When an employee is the subject of an external criminal investigation, has been arrested for, charged with, or convicted of any felony or misdemeanor (except minor traffic violations), or is required to appear as a defendant in any criminal court, that employee shall immediately inform and provide a written report to the employee's chain-of-command. The officer or institution manager shall inform the Director of the division in which the employee is a member and the appropriate Human Resource Manager.
- D. While off duty, employees shall not associate or deal with persons who are known to be involved in illegal activities.

VI. Reports and Investigations:

- A. Reports and logs submitted by employees shall be truthful and complete. No employee shall knowingly enter or cause to be entered any inaccurate, false or improper information, nor shall they fail to include pertinent information known to them regarding the matter at issue.
- B. Employees shall not convert to their own use, conceal, falsify, destroy, remove, tamper with, or withhold any property or evidence.
- C. During the course of an official investigation an employee can be ordered to cooperate in an internal / administrative investigation and must truthfully answer questions that are specifically, directly and narrowly related to the employee's official conduct, to include providing a signed statement or affidavit if requested. Statements made pursuant to an order to cooperate in an internal / administrative investigation and evidence that is derived from the statements cannot be used against the employee in any criminal proceeding.

An employee will not be compelled in any criminal investigation to be a witness against themselves. Employees interviewed in conjunction with a criminal investigation will be afforded all rights under

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Miranda v. Arizona (1966) and the Fifth Amendment of the US Constitution.

VII. Medical Information:

- A. Employees are reminded that medical information that the DOC gathers and maintains is protected by federal and state laws and regulations, such as the Health Insurance Portability and Accountability Act (HIPAA).
- B. All medical information (including mental health and substance abuse information) is considered confidential and employees may not disseminate or release any medical information without first ensuring that:
 1. The release is authorized by law or the person whose information it is; and
 2. The person (or entity) requesting the information is authorized to receive it.
- C. Employees are expected to handle medical information in a way that preserves its confidentiality at all times. This means restricting access to stored medical information, not leaving medical information accessible when it is not being used and transmitting medical information in a secure manner so that it may not be viewed or intercepted by those not authorized to view or receive it.
- D. Employees who come in to contact with medical information indirectly, such as officers escorting offenders to medical appointments or clerical staff working in clinics, are also expected to keep the information confidential. Any medical information that employees may see or hear as part of their normal duties should be handled appropriately and kept confidential.
- E. If an employee is witness to any misuse or mishandling of medical information they shall immediately report it to their supervisor. Reports of misuse or mishandling of medical information will be taken seriously and will be investigated. Employees found to have misused or mishandled medical information may face discipline.

VIII. Criminal Justice Information:

- A. Employees are reminded that criminal justice information that the DOC gathers and maintains (whether hand written or electronic) is protected by federal and state laws and regulations, such as the Federal Bureau of Investigations (FBI) Criminal Justice Information Services (CJIS) Security Policy and Alaska Statute 12.62.160.
- B. According to the FBI (CJIS Security Policy, Appendix A) and Alaska Statute (AS 12.62.900) criminal justice information may include:
 1. Biometric data;
 2. Identity history;
 3. Person data;
 4. Organization data;

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5. Property (when accompanied by any personally identifiable information) data;
6. Case / incident history data;
7. Non-conviction information;
8. Correctional treatment information; and
9. Information relating to a person to be located, whether or not that person is wanted in connection with the commission of a crime.

- C. The DOC makes use of several different repositories for criminal justice information including the Alaska Public Safety Information Network (APSIN) operated by the Department of Public Safety and the DOC's own Alaska Corrections Offender Management System (ACOMS). This policy shall apply to any additional criminal justice information systems that are either created or adopted in the future for DOC use.
- D. Access to these databases is restricted and employees shall only access information in these databases when a legitimate business need exists. No employee shall access these databases for personal use.
- E. DOC employees are also prohibited from altering or deleting any documentation or criminal justice information entered in to a criminal justice information system (such as the DOC offender management system) by another person, without first securing the approval of their Superintendent, Chief Probation Officer or equivalent supervisor or their designee. Before granting approval for an employee to alter or delete documentation or criminal justice information entered by another person, the supervisor or designee shall be satisfied that the alteration / deletion is legitimate and necessary for business needs.
- F. All criminal justice information is considered confidential and employees may not disseminate or release any criminal justice information without first ensuring that:
 1. The release is authorized by law or the person whose information it is; and
 2. The person (or entity) requesting the information is authorized to receive it.
- G. Employees are expected to handle criminal justice information in a way that preserves its confidentiality at all times. This means restricting access to stored criminal justice information, not leaving criminal justice information accessible when it is not being used and transmitting criminal justice information in a secure manner so that it may not be viewed or intercepted by those not authorized to view or receive it.
- H. If an employee is witness to any misuse or mishandling of criminal justice information they shall immediately report it to their supervisor. Reports of misuse or mishandling of criminal justice information will be taken seriously and will be investigated. Employees found to have misused or mishandled criminal justice information may face discipline, as well as legal action.

IX. Public Statements and Disclosure of Information:

- A. All official statements for public release concerning the affairs of the DOC must be authorized by the Commissioner, a Deputy Commissioner, a Division Director, or designee.

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- B. In any public statement, employees will clearly distinguish between those that are positions of the DOC and those that are personal views. Employees are responsible for the accuracy of their statements.
- C. Employees shall not disclose confidential information (ranging from personal data concerning employees and offenders to information that would breach security or endanger any person) unless authorized in policy or having been directed to do so by the employee's Director or designee. Employees who receive such a request for information will refer the inquiring party to the office or institution manager.
- D. Social Media:
1. When identifying yourself as a DOC employee on social media or if you have a position for which your DOC association is known to the general public, ensure your profile and related content is consistent with how you wish to present yourself as a professional employee, appropriate with the state and public trust associated with your position. DOC employees shall have no expectation of privacy when using social media tools.
 2. All posts or comments on social media that may be related, directly or indirectly, to your employment by the State of Alaska and the Department of Corrections shall be preceded by a disclaimer that clearly states that the opinions or views expressed are yours alone and do not represent the views of the DOC or your institution or office.
 3. Without written permission from the Commissioner, or designee, the use of any image or photograph of images that belong to the DOC is prohibited, including:
 - a. Department shoulder patch;
 - b. Department official logo;
 - c. Photographs or any graphic rendition of any DOC building, office, institution, or grounds; and
 - d. Any image of an offender (with or without permission).
 4. Without written permission from the Lieutenant Governor, the use of the state seal is prohibited.
 5. In a publicly accessible forum, employees shall not discuss any DOC related information that is not already considered public information. The discussion of sensitive, privileged or protected information is strictly prohibited. This rule applies even in circumstances where password or other privacy controls are implemented.
- E. Employees are prohibited from accessing official records of any kind unless doing so is a part of the employees' job requirements.
- F. Employees shall not remove any documents or other items from files or make copies of records or documents, except in accordance with established procedures or upon proper authorization. Employees shall not use, or release for use, official information for private purposes.

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G. Former employees will be granted access only to DOC information available to other members of the public, and will have no greater standing than members of the public.

X. Clothing and Uniforms:

While on duty all employees will adhere to the DOC's policies on uniforms and appearance.

XI. Egregious Misconduct:

Egregious misconduct may warrant immediate dismissal on a first offense. The following lists are not all inclusive. Executive Branch employees are subject to additional statutes, regulations, policies, and other directives, the violation of which may result in dismissal for a first offense. Also, the totality of circumstances in a given circumstance may warrant immediate dismissal on a first offense whether or not a specific violation is listed below.

A. All DOC employees are prohibited from:

1. Engaging in unlawful discrimination or harassment;
2. Engaging in dishonesty, including dishonesty during an investigation into misconduct alleged to have been committed by the employee or by the employee's co-workers;
3. Theft of State time or resources;
4. Gross disobedience or insubordination;
5. Use, possession or being under the influence of alcohol or any illegal controlled substance on DOC's time or premises;
6. Engaging in physical assault or misconduct, abusive, or lewd behavior;
7. Abandonment of duties;
8. Involvement in illegal activities, including but not limited to conviction of a felony or misdemeanor when the activity or offense giving rise to the conviction or the conviction itself (including a conviction based on a plea of no contest), could adversely affect the employee's availability, ability, or fitness to perform the employee's duties, or adversely impacts the DOC's ability to carry out its mission;
9. Intentionally aiding or abetting on offender's escape or attempted escape;
10. Introducing contraband onto the grounds of a secure institution;
11. Using excessive force on an offender;

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12. Engaging in undue familiarity, including but not limited to sexual contact, with an offender;

13. Intentionally or negligently endangering or breaching security, including releasing of confidential information when such release has the effect of endangering security; and

14. Being involved in illegal activities, on or off duty, regardless of whether charged or convicted of a crime.

B. Egregious misconduct includes:

1. Conviction of any felony; and

2. Conviction of a misdemeanor when the activity or offense giving rise to the conviction or the conviction itself (including a conviction based on a plea of no contest) adversely affects the employee's availability, ability or fitness to perform the employee's duties, or may adversely impact the DOC's reputation or ability to carry out its mission. Misdemeanor convictions involving domestic violence (whether or not charged as a crime of domestic violence), DUI, refusal of chemical breath test, sexual assault or abuse, or the illegal possession, use, transport, transfer or sale of a controlled substance, by their nature may subject an employee to disciplinary action up to and including termination.

XII. Responsibilities:

A. Division Directors shall ensure dissemination, posting, training, and enforcement of this policy.

B. Office and institution managers and supervisors shall ensure that all employees or persons from other agencies, whose assignment is primarily on the premises of DOC institutions or offices, have read, understand, and adhere to this policy. Failure of managers or supervisors to do so may result in discipline up to and including dismissal.

C. Failure on the part of any employee to implement this policy may constitute grounds for disciplinary action up to and including dismissal from public service.

D. The Human Resources Office shall provide all new employees with a copy of this policy as part of the new employee information packet.

E. All employees shall sign the *Standards Of Conduct Certificate Of Review And Compliance* (Attachment A), which will be placed in the employee's permanent personnel record. If an employee does not understand any section of this policy, it is the employee's responsibility to obtain clarification from the employee's supervisor prior to signing the Certificate.

F. Any variance from this policy must have prior written authorization from the Commissioner or their designee.

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		Effective:	6-15-2015	Reviewed:	
		Distribution:	Public	Due for Rev:	6-15-2020
	Chapter:	Personnel			
	Subject:	Prohibition of Sexual Harassment			

I. Authority

In accordance with 22 AAC 05.155 the Department will maintain a manual comprised of policies and procedures established by the Commissioner to interpret and implement relevant sections of the Alaska Statutes and 22 AAC.

II. References

Alaska Statutes

AS 18.80.220, AS 18.80.255, AS 39.28, AS 39.52.110-140

Alaska Administrative Code

22 AAC 05.155, 13 AAC 85.230

Administrative Orders

AO No. 75, AO No. 81.

III. Purpose

To provide examples of prohibited conduct, as well as reporting and investigation requirements for line staff, supervisors, managers, and human resources personnel in order to maintain a professional, respectful, and safe environment in DOC offices, facilities, and other work-related settings.

IV. Application

All employees of the Department of Corrections (DOC), persons assigned to other Departments working with DOC staff, as well as any person working in a DOC facility or office.

V. Definitions

Sexual Harassment

Unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature constitute sexual harassment when this conduct explicitly or implicitly affects an individual's employment, unreasonably interferes with an individual's work performance, or creates an intimidating, hostile, or offensive work environment.

VI. Policy

The DOC is committed to providing a workplace that is free from sexual harassment. Sexual harassment will not be tolerated. When the Department determines that an allegation of sexual harassment is credible, it will take prompt and appropriate corrective action. The objectionable behavior does not have to rise to the level of *illegal* sexual

harassment in order for the Department to find disciplinary or corrective action warranted.

VII. Procedures

- A. Objectionable sexually harassing behavior can be verbal, non-verbal, physical, or of a visual nature:
1. Examples of sexually harassing behavior include, but are not limited to, items such as those listed below:
 - a. Verbal abuse of a sexual nature;
 - b. Offensive remarks about a person's sex or gender to include demeaning stereotypes;
 - c. Demands or requests for sexual favors;
 - d. Unwelcome sexual advances or propositions;
 - e. Jokes or "humor" with sexual overtones;
 - f. Graphic or verbal commentaries about an individual's body or sexual prowess (or lack thereof);
 - g. Implied or overt threats with explicit or implicit sexual overtones;
 - h. Pinching, massaging, grabbing, groping, or other inappropriate touching;
 - i. Unnecessary touching, standing too close, or brushing against another's body;
 - j. Suggestive, insulting, obscene, or demeaning comments or gestures of a sexual nature;
 - k. Display in the workplace of sexually suggestive objects, wording, or pictures;
 - l. Pranks, teasing, jokes, or innuendo of a sexual nature in person, email, radio, telephone, or any other device;
 - m. Repeatedly asking a person to socialize during off-duty hours when the person has said no or has indicated he or she is not interested (supervisors in particular should be careful not to pressure their employees to socialize);
 - n. Giving gifts or leaving objects that are sexually suggestive;
 - o. Making sexually suggestive gestures;
 - p. Making or posting sexually demeaning or offensive pictures, cartoons, or other materials in the workplace;
 - q. Off-duty, unwelcome conduct of a sexual nature that affects the work environment or violates the Code of Ethical Professional Conduct;
 - r. Leering or whistling.
 2. Both victim and the harasser can be either a woman or a man, and the victim and harasser can be the same sex. Sexual harassment may occur from supervisor to subordinate; subordinate to supervisor; co-worker to co-worker; or between employees and non-employees to include applicants for employment.

3. Sexually harassing behavior is expressly prohibited in the workplace itself and in other work-related settings such as business trips, court appearances, Department sponsored social events, etc.
 4. All employees are responsible for monitoring their own behavior to ensure that they do not engage in behavior that is or may be perceived to be sexual harassment.
 5. All employees responsible for directing or supervising the work of others have an affirmative obligation to monitor the behavior of their subordinates to ensure that they do not engage in behaviors that are or may be perceived to be sexual harassment, to promptly report violations of this Policy and Procedure, and to take appropriate action to eliminate sexually harassing behavior from the work environment. Failure to meet this obligation may result in disciplinary action up to and including dismissal.
 6. Consenting romantic or sexual relationships between employees or between a supervisor (including lead workers and foremen) and a subordinate may lead to unforeseen consequences.
 - a. Each employee should be aware of the possible risks of a consensual romantic or sexual relationship.
 - b. Employees who enter into a welcome dating, romantic, or sexual relationship with another DOC employee where there is a difference in rank or authority between the persons involved should realize that, if a complaint of sexual harassment is subsequently made, it may be difficult to defend against such charges on grounds of mutual consent. No dating-type behavior is to occur in the workplace.
 - c. The DOC may alter the responsibilities or assignments of co-workers engaged in a consenting personal relationship to diminish the professional contact they may have with each other when the romantic or sexual relationship could reasonably be expected to interfere with the performance of duties.
 - d. Dating, romantic, or sexual relationships between supervisors (including lead workers and foremen) and subordinates within the direct supervisory chain-of-command of the supervisor are prohibited under Policy and Procedure 202.15 (Standards of Conduct). If such a relationship exists or develops, staff involved shall report it to the office or facility manager to discuss the arrangements (e.g., shift or supervisory reassignments) required to comply with this rule.
- B. Reporting allegations of sexual harassment.
1. The DOC strongly encourages employees who believe they are being harassed to clearly and promptly notify the instigator orally or in writing that the behavior is unwelcome.
 2. If for any reason an individual does not wish to confront the instigator directly, or if such confrontation does not successfully end the objectionable behavior, the individual should report his or her allegations to a higher level supervisor or to Human Resources.
 3. An initial report may be made orally or in writing.
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4. A supervisor who receives a report of sexual harassment will make every reasonable effort to forward the written complaint to the Human Resource Manager within twenty-four (24) hours of receipt of the report.
 5. The DOC does not impose a timeframe or deadline for reporting allegations of sexual harassment; however, failure to make a prompt report may make it difficult to investigate or confirm the allegations.
 6. Employees may also file internal complaints of sexual harassment with the State's Equal Employment Opportunity Program in the Department of Administration under AS 39.28.060(a).
- C. Investigations of sexual harassment allegations
1. Allegations of sexual harassment brought to the attention of the DOC will be promptly investigated by DOC Human Resources staff. (Note: AS 39.28.060(b) requires that the Department notify the Division of Personnel's Equal Employment Opportunity Program office when the Department receives a complaint.)
 2. Confidentiality will be maintained throughout the investigatory process, to the extent practical and appropriate under the circumstances.
 - a. Individuals who are interviewed should be advised that discussing the interview with others may degrade the integrity of the investigation. Thusly, employees are encouraged to keep all matters regarding their interview confidential.
 - b. The investigative interviewer will distribute information as appropriate to persons who have the right or ability to respond to, corroborate, or deny any allegation.
 3. An individual under investigation is entitled to know the allegations made against him or her, and to have an opportunity to respond to those allegations.
 4. The investigator will take the wishes of the complainant into account; however, it is ultimately the DOC's responsibility to determine how to investigate allegations of sexual harassment in order to ascertain the relevant facts in connection with the complaint.
 5. The investigator may recommend segregating the complainant from the alleged instigator while the investigation is underway, which may require, for example, a temporary reassignment or transfer of one or both parties.
 6. On completion of the investigation, the investigator will communicate the findings to the appropriate director.
 7. Interfering with, obstructing, or refusing to cooperate in an investigation is prohibited. Employees who do so may be subject to disciplinary action up to and including dismissal.
- D. The role of HR staff is to conduct a fair and thorough investigation. Disposition of a complaint
1. Complaint confirmed
If Human Resources concludes that the allegations have been substantiated, in whole or part, and discipline or corrective action is warranted, the appropriate parties shall be notified of the determination.
 2. Complaint unconfirmed
-

If Human Resources concludes that the allegations have not been substantiated and that a policy violation did not occur, the appropriate parties shall be notified of the determination.

- a. If the investigation results in a finding that the complainant wrongly accused another employee of sexual harassment intentionally or frivolously, the complainant may be subject to disciplinary action, up to and including dismissal.
3. In the event that the executive head and the Human Resource Manager are unable to agree on a finding or a course of action, the matter shall be referred to the Division of Personnel, Department of Administration, and/or the Attorney General as necessary, and they shall determine the appropriate action to be taken.
- E. Retaliation against an individual for reporting or participating in an investigation of allegations of sexual harassment is expressly prohibited. Any person found to have engaged in retaliation may be subject to disciplinary action, up to and including dismissal.

VIII. Implementation

This policy and procedure is effective as of the date signed by the Commissioner. Each manager shall incorporate the contents of this document into local policy and procedure. All local policies and procedures must conform to the contents of this document.

June 10, 2015

Signature On File

Date

Ronald Taylor, Commissioner
Department of Corrections

STATE OF ALASKA DEPARTMENT OF CORRECTIONS  POLICIES & PROCEDURES	SECTION: Health and Rehabilitation Services		PAGE: Page 1 of 13
	CHAPTER: 807	NUMBER: 807.20	P&P TYPE: Public
	TITLE: Suicide Prevention and Intervention		
ATTACHMENTS / FORMS: A. Suicide Prevention Status Orders - Placement B. Suicide Prevention Status Orders - Removal C. SAFE-T Form D. Suicide Prevention Safety Plan	APPROVED BY:  Nancy A. Dahlstrom, Commissioner		DATE: 09/06/2019
	AUTHORITY / REFERENCES: 22 AAC 05.005 22 AAC 05.120 22 AAC 05.121		

EFFECTIVE DATE:

This policy has a future effective date of October 17, 2019.

POLICY:

- I. It is the policy of the Department of Corrections (DOC) to have in place procedures to provide staff with the tools and skills needed to successfully prevent, intervene, and treat prisoners at risk of self-injury and / or suicide.
- II. It is the policy of the Department to have in place a comprehensive suicide prevention program to ensure prisoners are properly screened, that those at risk of suicide are identified, and therapeutic interventions are provided. Elements of the program shall include:
 - A. Training;
 - B. Identification;
 - C. Referral;
 - D. Evaluation;
 - E. Treatment;
 - F. Housing and monitoring;
 - G. Communication;
 - H. Intervention;
 - I. Notification;
 - J. Review; and
 - K. Debriefing.
- III. It is the policy of the Department that each institution shall establish a suicide prevention plan which must be approved by the Chief Mental Health Officer.

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APPLICATION:

This policy and procedure shall apply to all Department employees and prisoners housed in institutions and Community Residential Centers (CRC).

DEFINITIONS:

As used in this policy, the following definitions shall apply:

Acutely Suicidal:

Prisoners who engage in self-injurious behavior or threaten suicide with a specific plan.

Chief Mental Health Officer:

Position responsible for the oversight of behavioral health services to include mental health, substance abuse and sex offender services.

Clinical Precautionary Diet:

A meal provided to prisoner in a suicide resistant container (i.e. paper sack lunches) that is free of any potential hazards and can be eaten without the use of utensils. This meal shall contain the same nutritional quality as meals served to the general population.

Close Observation:

Observation of a prisoner by staff at irregular staggered intervals not to exceed every 15 minutes.

Constant Observation:

The continuous, clear and unobstructed visual observation of a prisoner, that allows staff to respond immediately to immediate threats of harm. A single staff member may provide constant observation to one (1) or more prisoners in the same room. A camera cell is not a substitute for constant observation.

Critical Incident Stress Debriefing (CISD):

Specific technique designed to assist others in dealing with the physical or psychological symptoms that are generally associated with exposure to a traumatic event.

Emergency Mental Health Care:

Care for an acute mental health symptom(s) that cannot be deferred until the next scheduled mental health clinic or routine appointment.

Health Care Staff:

Includes physicians, psychiatrists, psychologists, physician assistants, registered or practical nurses, advanced nurse practitioners, dentists, dental assistants, dental hygienists, mental health clinicians, social workers, psychological associates, and that provide preventive, curative, promotional or rehabilitative health care services.

Imminent Risk of Harm:

Based on the totality of the circumstances, there is a risk that the prisoner will harm or kill themselves without

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immediate intervention.

Least Restrictive Alternatives:

Treatment and placement options that are interventions that are no more intrusive or restrictive of freedom than reasonably necessary to achieve a substantial therapeutic benefit or to protect prisoners from physical injury.

Mental Health Staff:

A person with professional training, experience and demonstrated competence in the treatment of mental illness, emotional and behavioral issues who is a physician, psychiatrist, psychologist, masters level clinician or social worker, psychiatric nurse practitioner or other qualified person as determined by Alaska statute.

Modified Observation:

Observation status modified by a mental health professional that details the level of intervention required to observe a prisoner on suicide prevention status.

Non-Acutely Suicidal:

Prisoners who express current suicidal ideation and / or have a recent history of self-destructive behavior, or prisoners who deny suicidal ideation or do not threaten suicide but demonstrate other concerning behavior(s).

Non-Suicidal Self-Injury:

Deliberately injuring oneself without suicidal intent.

Observation:

Visual assessment to ensure that a prisoner is safe, alive and well. Staff shall observe to ensure skin and movement are visible during the assessment.

Protective Factors:

Factors that reduce the likelihood of suicide and enhance resilience.

Serious Suicide Attempt:

A suicide attempt that without intervention would result in death.

Suicide Assessment Five-Step Evaluation and Triage (SAFE-T):

A tool to assist clinicians in conducting a suicide assessment of a prisoner.

Suicide Blanket:

Specialty blanket designed to reduce the risk of being utilized for self-harm which is made from tear resistant material.

Suicide Prevention Aide:

A prisoner specifically trained by mental health staff to be a peer observer for individuals on close or modified suicide prevention status, in addition to staff observation.

Suicide Prevention Cell:

A housing assignment that is as suicide resistant as reasonably possible, free of obvious protrusions and that

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provides full visibility.

Suicide Prevention Status:

Precautionary measures for all prisoners identified as being at risk for suicide. This shall include constant observation, close observation or modified observation.

Suicide Sleep System:

A suicide prevention sleeping mat designed to reduce the risk of being utilized for self-harm which is made from tear resistant material.

Suicide Smock:

A tear-resistant single-piece outer garment designed to reduce the risk of being utilized for self-harm which is made from tear resistant material.

Therapeutic Restraint:

An intervention initiated by a mental health professional using devices designed to safely limit a prisoner's movement. (DOC P&P 1207.02, Therapeutic Restraint and Seclusion)

PROCEDURES:

I. Identification and Screening:

- A. All prisoners shall be screened for potential suicide risk by health care staff or security staff (when no health care staff are available (within 30 mins of arrival at an institution, but no later than one (1) hour after booking).
- B. As part of the initial booking process, mental health screenings shall be conducted on all prisoners within 24 hours of arrival and documented on the Criminal Booking Screen or Title 47 Remand Screen of the DOC offender management system per DOC P&P 807.14 (Health Examinations).
- C. All suicidal statements and behaviors by prisoners shall be taken seriously and referrals made to a mental health clinician.
- D. Prisoners identified as being at risk for suicide shall receive follow up by mental health staff, within four (4) hours of being admitted to the institution. If there are no mental health staff on-site, the prisoner shall be placed on suicide prevention status until a mental health assessment can be completed. The mental health assessment shall occur within 24 hours of being placed on suicide prevention status and shall be conducted by mental health staff or their designee.
- E. Communication between security, health care, mental health staff and remanding officers regarding a prisoner's status plays a vital role in identifying a prisoner's potential suicide risk. Employees remanding the prisoner should ask arresting officers for information regarding possible suicidal statements or behavior during arrest.

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- F. Security and health care staff shall update the Criminal Booking Screen of the DOC offender management system within 24 hours of initial admission to an institution or prior to moving the prisoner from the booking area.
- G. Health care staff shall review previous suicide prevention statuses from other institutions and prior incarcerations.

II. Authorization to Implement and Remove Suicide Prevention Status:

- A. Suicide prevention status shall not be used as a means of coercion or punishment; for the sole purpose of convenience of the staff; or when less restrictive alternatives can be used safely and effectively.
- B. Suicide prevention status may be ordered by mental health staff, or if mental health staff are unavailable, by the Superintendent or designee and documented on the Suicide Prevention Status Orders – Placement (Attachment A). Any employee who identifies a prisoner as being at risk for suicide shall follow the procedures outlined in section III below, to ensure the safety of the prisoner.
- C. Suicide prevention status shall be removed as soon as the prisoner no longer presents at risk of self-injury or suicide. The order shall be documented on the Suicide Prevention Status Orders – Removal (Attachment B). This form shall be completed by the mental health staff or their designee in consultation with mental health staff.
- D. If a member of the mental health staff is unavailable, a member of the nursing staff shall interview the prisoner and in consultation with the psychiatric on-call provider may discontinue suicide prevention status.
- E. Removal of suicide prevention status shall include the procedures outlined in DOC P&P 804.01, (Administrative Segregation) for removal or modification of segregation status.

III. Initiation of Suicide Prevention Status:

When a prisoner is identified as being at risk for suicide, the prisoner shall be placed on suicide prevention status and staff shall:

- A. Not leave the prisoner unattended;
- B. Secure the environment and remove any items that may be used to inflict harm;
 - 1. Immediate removal of items may be delayed in circumstances where the prisoner is non-compliant, but is not actively engaged in suicidal or self-harming behaviors and is in constant observation of staff;
- C. Notify the Superintendent or designee of the prisoner's suicidal behaviors or ideations;
- D. Notify the mental health staff or if they are unavailable, the health care department;

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- E. Ensure the prisoner is housed in a suicide prevention cell on the appropriate suicide prevention status. If a suicide prevention cell is not available, the prisoner shall be housed in a safe location designated by the Superintendent;
- F. Ensure that a Suicide Prevention Status Orders-Placement (Attachment A) is completed and routed to designated staff; and
- G. Observe the prisoner based on the order documented on the Suicide Prevention Status Orders – Placement (Attachment A).

IV. Management of Suicidal Title 47 Commitments:

The Department shall provide suicide prevention and intervention services for all Title 47 commitments placed in protective custody with the Department.

- A. All individuals shall be screened for potential suicide risk using Title 47 Remand Screening Form (Attachment B of DOC P&P 807.14).
- B. As part of the initial booking process, mental health screenings shall be conducted on all Title 47 commitments within 24 hours of arrival and documented on the Title 47 Remand Screen of the DOC offender management system.
- C. In cases where individual(s) committed to the custody of the Department under Title 47 are in danger of hurting themselves or others, and less restrictive alternatives have been exhausted, staff are authorized to place Title 47 commitments on suicide precautions status.
- D. Staff shall utilize the Mental Health Progressive Referral System in the Procedures Section A. In addition, T47 commitments shall be managed as outlined in Section B (Authorization and Removal from Suicide Precautions).
- E. Title 47 commitments identified as being at risk for suicide shall receive follow up by mental health staff, as soon as possible and within four (4) hours of being admitted to the institution.
 - 1. If there are no mental health staff on-site, the individual shall remain on suicide prevention status until a mental health assessment can be completed.
 - 2. The mental health assessment shall occur within 24 hours of being placed on suicide prevention status and shall be conducted by either a:
 - a. Mental health contractor;
 - b. Telehealth provider; or
 - c. Health care or security staff in consultation with the mental health on call.
- F. If employees have concerns regarding potential suicide risk for an intoxicated prisoner or non-criminal

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hold, the prisoner or hold shall be placed on suicide prevention status, close observation until cleared by a mental health staff or their designee. If a higher level of observation is required, this must be approved by mental health staff or designee.

V. Referral:

All prisoners identified as at risk of self-injury, suicide and / or injury to others shall be referred to mental health.

A. Referrals can be initiated verbally to mental health staff but shall be followed up in writing:

1. Using an either Incident Report Form per DOC P&P 809.04 (Disciplinary Committee, Hearing Officers and Basic Operation) or a Special Incident Report Form per DOC P&P 104.01 (Special Incident Reporting) to document the self-injurious and / or suicidal behavior.
2. A copy of the incident report shall be provided to mental health staff or their designee to review.

VI. Evaluation:

All prisoners identified as at risk of self-injury, suicide or injury to others shall be evaluated by the mental health staff or designee within 24 hours to determine the degree of risk, level of supervision needed, treatment, and to determine if the prisoner's suicide risk is associated with symptoms of mental illness, substance use or situational. The SAFE-T assessment protocol shall be used in the evaluation:

- A. While on suicide prevention status, mental health staff shall meet with the prisoner every work day to reassess the prisoner's suicide risk using the SAFE-T assessment protocol on the SAFE-T form (Attachment C).
- B. If mental health staff are unavailable, a member of the nursing staff shall use the SAFE-T form (Attachment C) and call the on-call provider for consultation.
- C. If a prisoner is actively engaging in self-harm, mental health staff may authorize the use of therapeutic restraints as outlined in DOC P&P 1207.02 (Therapeutic Restraint and Seclusion). Staff shall notify the Superintendent or designee of any use of restraints.
- D. It is the mental health staff or designee responsibility to communicate the prisoner's suicide prevention plan to all employees responsible for the safety of the prisoner.
- E. Any suicidal prisoner who cannot be safely managed at the institution shall be considered for transfer to another institution which can provide the additional mental health services needed by the prisoner. This determination shall be made by the Superintendent in conjunction with mental health staff. If a transfer cannot occur, the reasons shall be documented by the Superintendent or mental health staff.

VII. Housing:

Any prisoner determined to be at increased risk of self-injury or suicide shall be housed in a suicide prevention cell. Employees shall respect and ensure the safety and well-being of prisoners when on suicide prevention status:

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A. Each institution shall designate a suicide resistant cell(s) or areas that ensure:

1. A clear and unobstructed view of the prisoner at all times. Windows shall not be covered;
2. Staff interaction with the prisoner; and
3. Quick intervention should the prisoner engage in self-injurious behaviors.

B. Prior to the prisoner being placed in the suicide prevention cell or area, a thorough search of the prisoner and cell shall be conducted per DOC P&P 1208.08 (Searches of Prisoners and Institutional Areas). All items, devices, and materials the prisoner could use to engage in self-injurious behavior shall be removed.

C. Prisoners shall only be given items specified on the Suicide Prevention Status Orders – Placement (Attachment A). Property restrictions may only be used to ensure safety of the prisoner and may not be used as a punitive measure.

D. Under emergency conditions, a prisoner considered at risk of self-injury or suicide may be placed in an alternate cell / location until a designated suicide resistant cell is available. The prisoner must be moved to a designated suicide prevention cell as soon as possible.

E. Prisoners on suicide precautions may be housed with other prisoners on suicide precautions, based upon the recommendations of the mental health staff or designee.

F. Any prisoner at a Community Residential Center (CRC) or work farm who is considered to be at risk of self-injury or suicide shall be transferred immediately to the closest correctional institution with suicide resistant cells for monitoring and evaluation.

VIII. Treatment:

A safety plan shall be developed by mental health staff or designee for all prisoners at risk of self-injury and suicide. The treatment plan shall be based on the SAFE-T assessment protocol:

A. The mental health staff shall address the underlying reason for the suicidal behaviors or ideations. The mental health staff shall develop an initial safety plan using the Suicide Prevention Safety Plan (Attachment D) to address the suicide risk which shall incorporate identifying protective factors, future goals, and support system.

B. The mental health staff shall develop a treatment plan to include monitoring strategies to prevent future relapse. This treatment plan shall be documented in the prisoner's medical record.

C. The mental health staff or designee shall document any condition which indicates a need to change the suicide prevention status. Changing the suicide prevention status includes:

1. Moving to a higher suicide prevention status;

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2. Gradual removal of suicide prevention status; or

3. Discharge / release from suicide prevention status.

D. Discontinuation of suicide prevention status shall be determined only by mental health staff or their designee in consultation with mental health staff and documented using the Suicide Prevention Status Orders-Removal (Attachment B).

E. Any prisoner who has been on suicide prevention status for a serious suicide attempt while in DOC custody shall be monitored by mental health staff for a minimum of one (1) year following removal from suicide prevention status. The mental health staff shall have contact with the prisoner:

1. At least weekly for the first month post removal, and

2. At least monthly thereafter, if assessed to be clinically stable.

IX. Approved Safety Interventions:

A. Employees shall give consideration to the following interventions when determining the least restrictive means to provide for the safety of the prisoner and others. These interventions shall only be implemented by mental health staff or their designee in consultation with mental health staff:

1. Suicide prevention status:

- a. Constant;
- b. Close; or
- c. Modified.

2. Suicide Prevention Safety Plan (Attachment D);

3. Suicide smock, blanket, sleep system;

4. Suicide Prevention Aide;

5. Observation per DOC P&P 602.01 (Prisoner Case Record Management);

6. Therapeutic restraints;

7. Suicide prevention cell; and

8. Clinical precautionary diet.

B. The Superintendent or designee in conjunction with the mental health staff shall inspect / review safety interventions to include safety smocks and suicide prevention cells monthly. These inspections / reviews

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shall be noted on the Director's Monthly Report per DOC P&P 101.04 (Monthly Reports).

X. Monitoring:

The level of monitoring intervention can only be set by mental health staff or their designee in consultation with the mental health staff:

- A. The prisoner shall be placed on the appropriate suicide prevention status based on the prisoner's suicide acuity:
 1. Acutely suicidal prisoners shall be placed on constant observation.
 2. Non-acutely suicidal prisoners shall be placed on close observation.
- B. While on suicide prevention status, the prisoner and cell shall be searched at least once per shift for potentially harmful objects.
- C. Security staff shall observe the prisoner to ensure the prisoner is breathing. If it is not evident that the prisoner is breathing, security staff shall elicit a response from the prisoner.
- D. The minimal observation of a prisoner on suicide prevention status will be in accordance with the recommendations of mental health staff (typically 15-minute intervals).
- E. A prisoner on close or modified observation may be assigned a peer who is a trained Suicide Prevention Aide as outlined in section XIV below. Suicide Prevention Aides shall not be used as a substitute for required staff observation.
- F. A prisoner removed from constant observation shall be transitioned to close observation before being removed from suicide prevention status. The length of time a prisoner is to remain on close observation is at the discretion of mental health staff or designee.
- G. A prisoner's suicide prevention status may be modified by mental health staff based on the prisoner's clinical condition. The mental health staff shall document changes in suicide prevention status, interventions, property and privileges by using the Suicide Prevention Status Orders – Placement (Attachment A). Modifications the mental health staff may determine include:
 1. Housing;
 2. Clothing;
 3. Bedding;
 4. Clinical precautionary diet;
 5. Visitors;
 6. Off unit / off institution movement;
 7. Ability to use sharps, razor, utensils, hygiene items;
 8. Form 602.01B Observation Cumulative;
 9. Suicide Prevention Aides;

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- 10. Therapeutic restraints [Refer to DOC P&P 1207.02 (Therapeutic Restraint and Seclusion)]; and
- 11. Restriction of phone access to legal calls only unless otherwise clinically indicated.

H. Travel / transport of a prisoner on suicide prevention status must be approved by the mental health staff or designee. The mental health staff or designee shall ensure all parties involved are aware of the prisoner's current status.

I. A camera cell shall not be substituted for a form of direct observation. Direct observations shall be conducted in person by security staff.

XI. Suicide Intervention:

Employees who discover a prisoner actively engaging in self-harm shall:

- A. Immediately and quickly survey the scene to assess the severity of the emergency / safety concerns.
- B. Immediately notify appropriate staff needed to respond to the incident including health care staff, rovers and the Shift Supervisor utilizing the incident command structure.
- C. Take the appropriate steps to eliminate the risk of the prisoner's behaviors.
- D. If the prisoner is unresponsive, employees shall not presume that the prisoner is dead, but initiate appropriate life-saving measures. If the employee is alone, he or she shall continue to observe the prisoner until a minimum of two (2) employees are available to ensure the safety and security of all individuals involved.
- E. If the prisoner does not need emergency life-saving procedures, but requires medical attention, the health care staff shall be on scene to assess and respond to the prisoner's medical needs. If there is no health care staff available, the prisoner shall be transported to the local hospital emergency room.
- F. If determined that additional medical care is needed beyond the capacity of the institution, the Shift Supervisor is responsible to ensure emergency medical services (EMS) is activated.

XII. Suicide Attempts:

All suicide attempts shall result in automatic placement of the prisoner on suicide prevention status and require an assessment by mental health staff or their designee.

XIII. Staff Training:

- A. All employees who have prisoner contact shall be trained on suicide prevention, intervention, and treatment. Employees shall receive a minimum of eight (8) hours of training within their initial year of hire and two (2) hours of training annually thereafter.
- B. It is each Superintendent's responsibility to ensure that suicide prevention training is conducted.
- C. The Superintendent shall identify employees who have contact with prisoners and ensure they receive the

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required training.

- D. All training records of suicide prevention training shall be maintained by the institution's Training Officer and copies forwarded to the DOC Training Academy.
- E. Health and Rehabilitation Services (HARS) shall develop and administer the training.
- F. All training on suicide prevention shall be approved by the Chief Mental Health Officer and shall be provided by mental health staff or their designee.
- G. The training shall include, but is not limited to:
 - 1. Identifying the warning signs and symptoms of suicidal behavior;
 - 2. Understanding the risk and protective factors;
 - 3. Understanding the cultural differences and demographics of suicidal behavior;
 - 4. Responding to suicidal and self-injurious prisoners;
 - 5. Communication between security, non-security, health care staff;
 - 6. Referral procedures;
 - 7. Suicide prevention status and procedures;
 - 8. Follow-up monitoring of suicidal and self-injurious prisoners;
 - 9. Reporting and documentation;
 - 10. Employees' roles in prevention, intervention, and treatment of suicidal prisoners; and
 - 11. Employee wellness and selfcare.

XIV. Suicide Prevention Aide Selection and Training:

- A. To assist with employees' close or modified observation requirements, a sufficient number of aides shall be selected, and trained by the institution; with alternate candidates available.
- B. Aides shall be selected based upon their ability to perform the specific task but also for their reputation within the institution.
- C. Aides must be able to perform their duties with minimal need for direct supervision.
- D. All aides shall be screened by mental health and approved by the Superintendent.

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- E. Prisoners selected as suicide prevention aides are considered to be on an institution work assignment.
- F. Each suicide prevention aide shall receive at least two (2) hours of initial training provided by mental health staff before being assigned their duties and at least two (2) hours of training semi-annually.
- G. Each training session shall review policy requirements and instruct the prisoners on their duties and responsibilities including: close or modified observation requirements; summoning staff during all shifts; and identifying the warning signs and symptoms of suicidal behavior. This training shall be conducted by mental health staff or their designee at each institution.
- H. Supervision of suicide prevention aides shall be provided by staff that are in the immediate area of the prisoner on suicide prevention status. In all cases, when a suicide prevention aide alerts staff to an emergency, staff must immediately respond to the prisoner on suicide prevention status and take necessary action to prevent further harm.
- I. In no case shall a suicide prevention aide be assigned to a watch without adequate provisions for staff supervision or without the ability to obtain immediate staff assistance. While performing their duties, the suicide prevention aide shall be in camera view. Aides shall not be considered a substitution for staff.

XV. Reporting:

In accordance with DOC P&P 104.01 (Special Incident Reporting):

- A. The Shift Supervisor or designee shall verbally notify the Superintendent or designee of any serious suicide attempt in an institution as soon as possible after emergency life-saving measures have been implemented.
- B. The Superintendent or designee is responsible for ensuring that a report regarding the incident is completed and submitted to the Director of Institutions per timeframes listed in DOC P&P 104.01.
- C. The Director of Institutions shall ensure that special incident reports are distributed to all other pertinent DOC Division heads.

XVI. Debriefing:

A timely debriefing shall be offered to affected employees and prisoners. The Superintendent shall ensure that all employees involved with a serious suicide attempt or completion shall be offered Critical Incident Stress Debriefing (CISD):

- A. The Superintendent shall make accommodations available within the institution for the debriefing and shall notify all employees involved of the debriefing.

XVII. Administrative Review:

If a prisoner commits suicide the Department shall conduct an administrative review of the incident following the procedures outlined in DOC P&P 104.04 (Death of a Prisoner).

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