

# JUVENILE JUSTICE SERVICES

**Safety and Emergency Operations** 

Effective Date: 9/30/2010

**Issue Date: 9/30/2010** 

**Title: Person Found Hanging by the Neck** 

Procedure #: P.5.32.C

1 ISSUING AGENCY

Children, Youth and Families Department (CYFD)

2 SCOPE

Juvenile Justice Service (JJS)

3 APPLICABLE POLICY

### 8.14.5.32 EMERGENCY OPERATIONS:

In furtherance of the public trust, Juvenile Justice Services' maintains written emergency plans, and distributes and trains key personnel in the manner which these plans are to be carried out during an actual emergency. These plans also include specific information on a means to immediately release clients from locked areas and procedures to be followed in situations that threaten facility security. Emergency procedures shall include plans for work actions, strikes or staff walkouts; facility disturbances or riot control; natural disasters or inclement weather; escapes; utility failures; bomb threats and explosions; hostages and negotiations; epidemics or pandemics; fire emergencies or mass evacuations; a person found hanging by the neck and ERT or Emergency Response Teams.

# 4 STATUTORY AUTHORITY

NMSA 32A-2-1, 32A-2-2.E

5 FORMS

None

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# **7 DEFINITIONS:**

- 7.1 **"Emergency"** refers to an unplanned or imminent event that affects or threatens the health, security, safety, or welfare of the public, employees, clients, property or infrastructure in, on or surrounding a JJS facility.
- 7.2 **"First Aid"** refers to the immediate assistance from an individual(s) trained in the rudimentary provision of emergency medical care or comfort.

## 8. GENERAL INSTRUCTIONS

8.1 Each JJS staff member shall remain aware that neck and spinal cord injuries are common during hangings and twists and turns of neck and back should be avoided (not at the expense of trying to preserve the victims life).

- 8.2 If the victim is conscious, try to keep them calm and alert until the medical team arrives. Do not give them anything to eat or drink unless specifically requested to do so by the medical team.
- 8.3 Do not leave a conscious victim alone for any period of time.
- 8.4 A suicide or attempted suicide scene is considered a crime scene and should be handled in accordance to the crime scene preservation procedures listed 5.31.A Evidence Disposition.
- 8.5 Only official emergency response personnel (i.e., EMS personnel through establish protocol), a Physician or the Office of the Medical Examiner can pronounce a death.
  - 8.5.1 In case of death, the body should be covered, not removed from the scene and the Facility Superintendent shall notify the Office of the Medical Examiner for further instruction.
  - 8.5.2 The area shall be secured and nothing disturbed until the investigation is concluded.
  - 8.5.3 The Facility Superintendent shall contact the appropriate law enforcement, personnel and the Deputy Director of Facility Operations immediately upon a pronounced death. This is in addition to any other notification previously made.

### 9 INITIAL RESPONDER ACTIONS

- 9.1 If a JJS employee discovers a person hanging by the neck, they should take this immediate action:
  - 9.1.1 Call for immediate available help and the response team (either by phone, radio or yelling to nearby staff).
    - 9.1.1.1 If time permits, the staff member shall grab the life safety scissors while calling for assistance.
    - 9.1.1.2 Instruct or request the second staff member or internal response teams to bring the life safety scissors if the initial responder was unable to secure them.
  - 9.1.2 Describe the emergency and the emergency location as calmly and accurately as possible.
  - 9.1.3 Make a specific request for immediate medical attention.
  - 9.1.4 Survey the area and ensure the area is safe before entering.
- 9.2 Upon entering, the staff member finding the person shall immediately lift the victim from the tension on the neck and/or loosen the noose, if possible.
- 9.3 When a second person arrives to the scene, he/she shall cut the hanging instrument with the life safety scissors, if this has not already been accomplished, and bring the hanging victim down flat to the ground on their back.
  - 9.3.1 The staff member cutting the hanging instrument shall try to preserve the knot for law enforcement investigation, but not at the expense of saving the hanging victim.
- 9.4 If the hanging victim is conscious, monitor them and provide aide as needed until the medical team arrives.
- 9.5 If the hanging victim is unconscious, begin the CPR process as indicated.
  - 9.5.1 Continue the CPR process until the medical team arrives and relieves you, until you are relieved by another Juvenile Justice Staff member, or until you are too exhausted to continue and no relief is available.
- 9.6 Upon arrival of the response team, team members shall assist by relieving any assisting staff to the victim (i.e., CPR/rescue breaths, assisting medical, holding the victim, cutting the hanging instrument, etc.), securing other clients from the area and video recording.

## 10. NOTIFICATIONS

- 10.1 Upon learning of a suicide by hanging incident, the on-site supervisor shall initiate the notification process. The supervisor will attempt to obtain information from the reporting person as to severity of the situation, location and client(s) involved.
  - 10.1.1 The on-site supervisor shall immediately confirm that medical response is in route to the scene and ascertain if additional resources are required.
    - 10.1.1.1 If medical response is not en route or additional resources are required, the on-site supervisor must immediately take actions to obtain medical response or the additional resource requested.
  - 10.1.2 If additional resources are requested by the medical response team, it is determined that official emergency response has not been called, or due to the severity of the situation, the on-site supervisor shall direct the control center or other personnel to call for official emergency responders through 911.
- 10.2 The on-site supervisor will then make notifications to the on call manager in charge, Health Services Administrator, Behavioral Health Director, Facility Superintendent and Deputy Director of Facility Operations.
  - 10.2.1 The Deputy Director of Facility Operations shall notify the Director of JJS.
  - 10.2.2 The notification progression shall follow the chain of command. If a required notification cannot be made, the next person in the chain of command shall be notified.
- 10.3 The Director of JJS, in conjunction with the Cabinet Secretary of the CYFD shall make any subsequent high level notification (i.e., governor, legislators, commissions or committee members).
- 10.4 Upon notification, the Director of Behavioral Health shall:
  - 10.4.1 Immediately dispatch a counselor to the facility, or other designated location (i.e., community hospital) to conduct an assessment of the hanging victim and issue applicable handling instructions and conduct an assessment of the clients in the area who witnessed the suicide or suicide attempt, staff involved and if appropriate, provide additional handling orders and schedule subsequent counseling as appropriate.
  - 10.4.2 In conjunction with the Facility Superintendent, formulate an appropriate parent/guardian notification plan.

### 11 CONTINUOUS QUALITY IMPROVEMENT

- 11.1 A three part continuous quality improvement plan shall be used in the implementation of this procedure that includes the following:
  - 11.1.1 Annual review of this procedure and facility post orders to ensure that direction is up to date and applicable to current standards and practices.
  - 11.1.2 Incorporation into the drill schedule, with an emergency checklist, to ensure that facility staff members are practiced in carrying out the elements of the plan and that the appropriate resources are available.
  - 11.1.3 A Critical Incident Debriefing after each emergency to discuss the effectiveness of the emergency plan and note any deficiencies that warrant correction.

# **AUTHORIZED SIGNATURE:**

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APPROVED:	9/21/10	
Bill Dunbar, Cabinet Secretary	Date	
Children Vouth and Families Department		