McKinney Police Department

Communica Standard Ope		801.17					
Call Taking: Attempted Suicide/Suicidal Threats/Overdose							
Ignuary 30, 2012	Reviewed Date		Revised Date				
Related General Orders		Related SOPs		Number of Pages 5			
TCPA Recognition Program Standards	CALEA Standards						
Related Public Safety Software Information	Comments						
Communications Manager Signature Archea Kirker	Date Signed Jan	uary 30, 2	012				

I. POLICY STATEMENT

A. It is the policy of the McKinney Police Department Communications Division to process calls for service related to attempted suicide/suicidal threats in an efficient manner to expedite the response of police department personnel, promote responder safety, and minimize risks to persons and property.

II. <u>PURPOSE</u>

A. To provide Communications personnel with clear direction for processing attempted suicide/suicidal threats calls for service.

III. NATURE CODE DEFINITIONS

- A. ATTEMPTED SUICIDE Used when a person has attempted suicide by a means other than overdose.
- B. **SUICIDAL THREATS** Used when a person has threatened suicide but has not actually attempted.
- C. OVERDOSE Used for an accidental or intentionally overdose of legal or illegal drugs or alcohol.

IV.

. <u>CA</u>	CALL TAKING PROCEDURE						
A.	Obtain the following information from the caller to be included in OSSI CAD event:						
	1.	Address of the emergency.					
	2.	Phone number that caller is calling from.					
	3.	Exactly what happened including when incident occurred (nature code).					
		(a) SUICAT – Attempted Suicide (will spawn FIRE event)					
		(b) SUICTH – Suicidal Threats					
		(c) OVER – Overdose (will spawn FIRE event)					
	4.	Any weapons involved.					
		(a) Type (gun, knife, club, explosive, other) and description.					
		(b) Location of weapons now.					
В.	Submit event.						
C.	Follow ProQA EMD protocol for overdose (card 23) and/or suicide attempt (card 25) events.						
D.	Continue questioning sequence by obtaining the following information for suicide attempt and suicidal thoughts events:						
	1.	1 st Party Caller:					
		(a) Caller name.					
		(b) Caller's intentions/means of suicide.					
		(c) Description of caller/suspect.					
		(1) Race.					
		(2) Gender.					
		(3) Clothing.					
		(4) Age (approximate).					

(5) Identifiable characteristics.

	(d)	Alone or with someone else?		
	(e)	Тур	e ar	nd status of any medical conditions or injuries.
	(f) Why caller wants to end his/her life.			ller wants to end his/her life.
2.	2 nd	/3 rd	Part	y Caller:
	(a)	Cor	nfirm	n caller safety.
		(1)	ls c	aller or anyone else in immediate danger?
			(i)	Yes: Move to a safe location. Take phone if possible or call back when at a safe location.
	(b)	Cur	rent	location of suicidal person now.
		(1)	Мо	de of travel.
		(2)	Veł	nicle description.
			(i)	Color.
			(ii)	Year.
			(iii)	Make/Model.
			(iv)	Body style.
			(v)	Additional Information.
			(vi)	License Plate.
			(vii)	State.
		(3)	Dire	ection of travel.
		(4)	Loc	ation suspect(s) are going to if known.
	(c)	Sus	pect	t description.
		(1)	Rac	re.
		(2)	Ger	nder.
		(3)	Clo	thing.

- (4) Age (approximate).
- (5) Identifiable characteristics.
- (6) Name (if known).
- (7) If detained, is suspect(s) cooperating.
- (8) Telephone number suspect can be reached at.
- (d) Is suicidal person violent or have a history of violence?
- (e) Does suicidal person live alone? If not, names/current locations of others who live at the location.
- (f) Medication, drugs or alcohol involved?
- (g) Suicidal person's intentions/means of suicide.
- (h) Number and status of any injured persons.
 - (1) Spawn FIRE event/provide EMD if appropriate.
- E. Provide the caller with the following information as appropriate.
 - 1. 2nd/3rd party callers:
 - (a) Speak calmly when communicating with suicidal person.
 - (b) List any known medication, drugs, or alcohol subject has taken.
 - (c) Subject location unknown: List any friends, family members or places suicidal person may have gone to or that officer's should speak with.
- F. If appropriate and safe for the caller, remain on the line until responding units arrive. Note any updates, changes or additional information in the Notes field of the OSSI CAD event.

V. EVENT SUBMISSION, RESPONSE UNITS, DISPATCH TIME

A. Communications shall submit the event and dispatch the response utilizing OSSI CAD AVL recommendations for each nature code listed within the following recommended time parameters whenever possible.

Nature Code	Recommended Event Submission Time	Response Units	Recommended Time to Dispatch
		2 Patrol / 1 Med	
SUICAT	60 Seconds	Unit	1 Minute
SUICTH	180 Seconds	2 Patrol	5 Minute
		2 Patrol / 1 Med	
OVER	60 Seconds	Unit	1 Minute

VI. POLICY RESTRICTION

A. This directive is for departmental use only and does not apply in any criminal proceeding. The department policy shall not be construed as a creation of higher legal standard of safety or care in evidentiary sense with respect to third party claims. Violations of this directive will only form the basis for departmental administrative sanctions.

VII. GENERAL PROVISION

- A. Any previous directive, rule, order, policy or regulation that pertains to this subject matter and its amendments shall remain in full force and effect prior to the effective date of this order.
- B. If any section, sentence, clause or phrase of this order is, for any reason, held to be invalid, such decision shall not affect the validity of the remaining portions of this order.
- C. The effective date of this order is stated in the header block.
- D. Any reference made in this order to any law, statute, code, ordinance, rule or regulation is intended to incorporate such material as it presently exists and also any future amendments, changes, revisions repeals or re-codifications of such material, unless otherwise expressly provided.

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