Suicide Prevention Program

Intervention Protocols

Protocols are as follows: Ideation, Attempt and Suicide

Ideation- Service member (SM) identified or makes another SM aware that he is thinking about killing themselves or at least not taking measures to ensure their own personal safety.

1. If harm to self and/or others is occurring or about to occur; If the service member is unable to participate in the intervention (drunk, intoxicate, psychotic, etc.). **Activate emergency response and call** 911.
2. If the person at risk is armed and does not surrender voluntarily his weapon. **Activate emergency response and call** 911.
3. If person at risk can participate in the intervention.
	1. Ensure the person is safe and NEVER LEAVE THE PERSON ALONE.
	2. Remain calm. Listen and always take suicide ideations seriously.
	3. Intervene, ACE model base on level of knowledge. Ensure to get person at risk to the next level of care.
	4. Notified Unit Suicide Prevention Liaison and let them continue with the intervention. Intervention concludes when ideation is disable.
	5. Notified Battalion.
	6. Within **24 hours** notify chain of command.
	7. Within **24-48 hours** the commander initiates a Commander Critical Information Requeriments (CCIR) and unit S-1 sends it to Senior Command and Provost Marshal.
	8. Within **24-48 hours** notify Suicide Prevention Program Manager.
	9. If needed the person at risk could be put on active-duty status to conduct a psychological evaluation.
	10. If the psychological evaluation is conducted and LOD needs to be completed.
4. Follow up and ensure service member has all the resources required and is getting appropriate support from unit and command (see resources available)
5. Commanders play an integral part during this phase, as it is their responsibility to ensure a particular problem or crisis has been resolved before assuming that the threat has passed. (IAW AR 4-6 b).