



DEPARTMENT OF THE NAVY
OFFICE OF THE JUDGE ADVOCATE GENERAL
WASHINGTON NAVY YARD
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IN REPLY REFER TO

JAG/COMNAVLEGSVCCOMINST 1720

Code 61

OCT 12 2010

JAG/COMNAVLEGSVCCOMINST 1720

From: Judge Advocate General

Subj: SUICIDE PREVENTION PROGRAM

Ref: (a) OPNAVINST 1720.4A

Encl: (1) OJAG Suicide Prevention Crisis Response Plan
(2) OJAG Suicide Behavior Phone Checklist

1. Purpose. To implement a Suicide Prevention Crisis Response Plan and set annual Suicide Prevention training requirements for personnel assigned to the Office of the Judge Advocate General (OJAG) and Naval Legal Service Command (NLSC).

2. Background. Reference (a) sets forth guidelines for the Navy's Suicide Prevention Program.

3. Applicability. The provisions of this instruction apply to all personnel under the cognizance of Commander, Naval Legal Service Command and personnel assigned to the Office of the Judge Advocate General, including active and reserve service members, civilian employees, and full-time contractors.

4. Action

a. OJAG Division Directors shall:

(1) Ensure all personnel are aware of and have reviewed enclosures (1) and (2).

(2) Ensure all personnel receive annual Suicide Prevention training. A primer training is located on the JAG Corps webpage of the Navy Knowledge Online website (<https://www.nko.navy.mil>).

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b. Commanding Officers shall:

(1) Ensure an effective suicide prevention program is established and maintained within their commands consistent with the requirements of reference (a), including the establishment of a written Suicide Prevention Crisis Response Plan, similar to enclosure (1) that includes a process for identification, referral, access to treatment, and follow-up procedures for personnel who indicate a heightened risk of suicide in accordance with paragraph 5b(1) of reference (a).

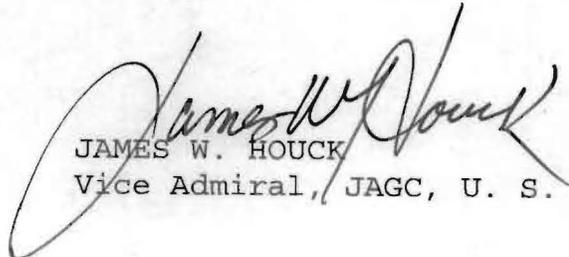
(2) Designate, in writing, a Suicide Prevention Coordinator to assist in implementing the unit suicide prevention program.

(3) Ensure that a local suicide prevention phone checklist similar to enclosure (2) is readily accessible for all assigned personnel.

(4) Ensure all assigned personnel receive annual Suicide Prevention training. A primer training is located on the JAG Corps webpage of the Navy Knowledge Online website (<https://www.nko.navy.mil>).

5. Point of contact. The OJAG/NLSC Suicide Prevention Coordinator can be reached via telephone at (202) 685-7715, DSN 325-7715; or by contacting OJAG (Code 60) directly at (202) 685-5190, DSN 325-5190.


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Distribution:

Electronic only via the OJAG website, www.jag.navy.mil and the Navy Directives Web site <http://neds.daps.dla.mil>.

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SUICIDE PREVENTION CRISIS RESPONSE PLAN

1. Purpose. It is not possible to plan for every event. Having a written crisis response plan that is easily accessible in the main office spaces will enable personnel to more effectively respond to situations requiring immediate action.

2. Suicidal behavior. Suicidal behavior can range from: (1) threats or statements to hurt themselves; (2) statements that the world or others would be better off without them; (3) taking actions to hurt themselves; and (4) actually taking their lives.

3. What to Do. It is best for mental health or medical professionals to assess and manage suicidal individuals; however, there may be times when personnel find themselves on the phone or in person with a suicidal individual. In any situation, if an individual threatens suicide, take him/her seriously. You may have limited time and only one chance to intervene. It is important to take immediate action as the circumstances permit.

a. In general. Below are general guidelines to follow regardless of the manner the suicide information comes to your attention.

(1) Treat the individual with respect. Remember the acronym ACT (Ask, Care, Treat).

(2) Be yourself. "The right words" are unimportant. If you are concerned, your voice and manner will show it.

(3) Listen attentively, stay calm, be supportive, and kind.

(4) Focus on the person, not the rules.

(5) Do not be judgmental or invalidate the person's feelings. Let the person express emotions without negative feedback.

b. By Phone:

(1) Establish a helping relationship.

(2) Express that you are glad the individual called.

Enclosure (1)

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(3) Immediately ask for the telephone number that the individual is calling from in case you are disconnected.

(4) Find out where the individual is located.

(5) Get as much information as possible about the individual's plans, access to means of self-harm, and intent.

(6) Listen and do not give advice.

(7) Keep the individual talking as long as possible until help can reach them, but avoid topics that agitate him/her.

(8) Contact the appropriate helping resources.

(9) Follow up and ensure the individual is evaluated.

c. In Person:

(1) Find out the background and circumstances of the individual.

(2) Use open-ended questions such as: "How are things going?"

(3) Share concern for his/her well-being.

(4) Be honest and direct.

(5) Listen to words and emotions.

(6) Repeat what he/she says using their own words.

(7) Ask directly about their intent, i.e., "Are you thinking about suicide?"

(8) Keep the individual safe - DO NOT leave them alone; have a capable person with them at ALL times.

(9) Take steps to remove potential means of self-harm including firearms, pills, knives, and ropes.

(10) Involve security if the individual is agitated or combative or is a threat to you.

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(11) The command should escort the individual to the nearest military treatment facility (MTF) at or civilian emergency room (ER) if the MTF is unavailable.

(12) Follow up and verify that the individual was evaluated.

(13) If psychiatric hospitalization is required, talk to the MTF staff about what assistance is needed (e.g., arranging for necessary belongings, child care, or pet care).

(14) Monitor the individual until you are convinced the individual is no longer at risk. Follow up care should include mental health, chaplains, and other medical professionals as applicable.

(15) The individual may be so intent on suicide that he/she becomes dangerous to those attempting to help him/her. Talk to a mental health provider for advice on whether to call an ambulance or transport him/her yourself. If the advice is to transport him/her in your vehicle, a person must sit at each door to prevent the suicidal individual from exiting the moving vehicle. Have your appointed contact person give the mental health provider the unit commander's telephone number for feedback following the evaluation. During duty hours, contact your command chaplain, flight surgeon, and MTF. After duty hours, contact the ER. Mental health evaluations must be conducted in a location where medical support and security are available. When in doubt, you may always call 911 or take to the ER.

c. What to Avoid: Commanding Officers and Division Directors encourage their personnel to ask for help. It is imperative that the following actions are avoided:

- (1) Do NOT minimize the problem.
- (2) Do NOT overreact to the problem.
- (3) Do NOT create a stigma about seeking mental health treatment.
- (4) Do NOT give simplistic advice.
- (5) Do NOT tell the individual to "suck it up," or "get over it."

- (6) Do NOT make the problem a source of command gossip.
- (7) Involve others on a need-to-know basis.
- (8) Do NOT delay a necessary referral.
- (9) Do NOT tell the individual how he/she is feeling.
- (10) Do NOT make decisions for the individual.
- (11) Do NOT say anything that would cause the individual to feel that you disbelieve what he/she is saying.

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OJAG SUICIDE BEHAVIOR PHONE CHECKLISTEMERGENCY SERVICES (FIRE/AMBULANCE/POLICE)

POLICE (WNY/ANA) (202) 433 - 2411
 TELECOMM EMERGENCY NUMBER (800) 381 - 3444

COMMAND DUTY OFFICER NUMBERS

CDO CELL NUMBER (703) 473 - 6842

FREQUENTLY CALLED NUMBERS (FCN)

AMERICAN RED CROSS EMERGENCY (877) 272 - 7337
 BELLEVUE HOUSING (202) 433 - 0346
 NDW DENTAL (202) 433 - 2480
 NDW MEDICAL (202) 433 - 2640
 BRANCH MEDICAL CLINIC (WNY) (202) 433 - 2640
 CASUALTY ASSISTANCE (202) 685 - 1568
 DISTRICT CHAPLAIN (202) 433 - 2057
 FRAUD, WASTE & ABUSE (202) 433 - 4080
 FUNERAL HONORS (202) 433 - 4589
 MELWOOD (CLEANING) (240) 216 - 1867
 NAF WEATHER HOTLINE (301) 420 - 6744
 NAMALA (202) 685 - 0101
 NAVAL MEDIA CENTER (202) 433 - 8528
 NAVY COLLEGE OFFICE (202) 433 - 3615
 NDW BASE SECURITY (202) 433 - 3018
 NDW COMMAND CMEO (301) 817 - 2828
 NDW COMMAND DAPA (202) 433 - 0455
 NDW EMERGENCY CALL LINE (202) 433 - 9999
 NDW EO MILITARY HOTLINE (202) 433 - 6850
 NLSO (202) 685 - 5580
 NLSO (Legal Assistance) (202) 685 - 5569
 NRL (202) 767 - 3333
 PARKING NDW HOTLINE (202) 433 - 2239
 PASS AND ID OFFICE (202) 685 - 0283
 PHARMACY (NDW) (202) 433 - 6808
 PSD (Anacostia) (202) 433 - 2498
 RECYCLING (202) 437 - 2265
 RLSO (202) 685 - 5856
 SATO (202) 433 - 2265
 SAVI (202) 685 - 1171

Enclosure (2)

If you receive a call concerning a suicide or suicide behavior:

1. Identify the caller:

Name: _____

Phone Number: _____

Date/Time: _____

2. Identify the facts:

Location of Sailor: _____

Where did incident occur? _____

Approximate age of Sailor: _____

Is there a weapon there? _____

Is there someone else there as _____

Who? _____

Have you/they taken drugs or alcohol? _____

3. Call Command Rep: _____

4. Ask: Has medical assistance been called? Yes _____ No _____

If yes, who was contacted: Name: _____

Phone number: _____

5. Ask: Has Security/Law enforcement been called? Yes ___ No ___

If yes, who was contacted: Name: _____

Phone number: _____

6. Has NCIS or local authorities been notified: No ___ Yes ___

If yes, who was contacted: Name: _____

Who notified them: Name: _____

Agent/Officer Phone Number: _____