



## FREEDOM OF INFORMATION REQUEST



**Request Number:** F-2015-00150

**Keyword:** Organisational Information/Governance

**Subject:** PSNI Policies, Suicide, Mental Health And Standard Of Ethics

**Request and Answer:**

### Question 1

Could you please send me the PSNI policy in relation to Suicide Prevention?

Clarification Sought: Your question 1 seeking the PSNI Policy in relation to suicide prevention. Please confirm if this is in the context of the welfare of police officers and staff or are you asking about something else?

Clarification Received: In relation to suicide prevention, my request would naturally relate to both the PSNI, and members of the public.

### Answer

Please see the document below on pages numbered 1-4 which is the protocol that OHW mental health service staff use for guidance with client's presenting with suicidal thoughts, and risk of suicide.

### Question 2

Could you please send me the document on Standards and Ethics required for police officers?

### Question 3

Could you please send me the PSNI policy on the Mental Health of police officers and the handling of firearms?

### Answer

Section 17(1) of the Freedom of Information Act 2000 requires the Police Service of Northern Ireland, when refusing to provide such information (because the information is exempt) to provide you the applicant with a notice which:

- (a) states that fact,
- (b) specifies the exemption in question and
- (c) states (if not otherwise apparent) why the exemption applies.

The exemption/s, as well as the factors the Department considered when deciding where the public interest lies, are listed below:

## Section 21 – Information Reasonably Accessible By Other Means

The PSNI Code of Ethics may be viewed at:

[http://www.nipolicingboard.org.uk/final\\_code\\_of\\_ethics-2.pdf](http://www.nipolicingboard.org.uk/final_code_of_ethics-2.pdf)

The PSNI Policy Procedure and Guidance relating to Use of Force and firearms is accessible via the link below reference should be made specifically to chapters 8 & 9

[http://www.psni.police.uk/index/about-us/publications/publications-by-category/policies\\_and\\_service\\_procedures/policies\\_and\\_procedures\\_conflict\\_management\\_manual.htm](http://www.psni.police.uk/index/about-us/publications/publications-by-category/policies_and_service_procedures/policies_and_procedures_conflict_management_manual.htm)

If you have any queries regarding your request or the decision please do not hesitate to contact me on 028 9070 0164. When contacting the Freedom of Information Team, please quote the reference number listed at the beginning of this letter.

If you are dissatisfied in any way with the handling of your request, you have the right to request a review. You should do this as soon as possible, or in any case within two months of the date of issue of this letter. In the event that you require a review to be undertaken, you can do so by writing to the Head of Freedom of Information, PSNI Headquarters, 65 Knock Road, Belfast, BT5 6LE or by emailing [foi@psni.pnn.police.uk](mailto:foi@psni.pnn.police.uk).

If following an internal review, carried out by an independent decision maker, you were to remain dissatisfied in any way with the handling of the request you may make a complaint, under Section 50 of the Freedom of Information Act, to the Information Commissioner's Office and ask that they investigate whether the PSNI has complied with the terms of the Freedom of Information Act. You can write to the Information Commissioner at Information Commissioner's Office, Wycliffe House, Water Lane, Wilmslow, Cheshire, SK9 5AF. In most circumstances the Information Commissioner will not investigate a complaint unless an internal review procedure has been carried out, however the Commissioner has the option to investigate the matter at his discretion.

Please be advised that PSNI replies under Freedom of Information may be released into the public domain via our website @ [www.psni.police.uk](http://www.psni.police.uk)

Personal details in respect of your request have, where applicable, been removed to protect confidentiality.

## Mental Health Service, Occupational Health and Wellbeing

### Guidelines for Managing Police Officers/Staff who present during a routine OH&W appointment expressing thoughts of suicide.

If during a routine initial assessment or review appointment, an individual expresses thoughts of suicide or life not worth living, the task of the Therapist / Counsellor is to establish if the client is deemed to be at high risk of imminent suicide using the following guidelines:

1. Determine the severity and nature of the individual's problems.

2. Determine if the individual is intending to harm themselves.

If they have a plan that has evidently been thought through in detail.

Establish the details of the plan?

If they have the immediately available lethal means to take their own life?

What access do they have to their Personal Protection Weapon (PPW) or other means to suicide?

Can the individual provide reassurance that they will not commit suicide in the immediate 24 hours?

Use the following questions as guidance to determine their level of risk:

*Have you ever had suicidal thoughts?*

*Can you describe them?*

*When was the last time you had them?*

*How long have you been thinking this way?*

*What was happening in your life when these thoughts started?*

*What is preventing or has prevented you from acting on them?*

*What would you do if these thoughts re-occurred?*

*Have you harmed yourself at any time?*

*Describe what happened when you tried to harm yourself?*

*Did you make a plan to harm yourself? Can you describe the plan?*

*Did you make an attempt to avoid being discovered? If so, how?*

*What were your reasons for the attempt?*

*What did you expect to be the outcome of the attempt?*

*How do you feel about what you did now?*

*Do you have a history of using alcohol or drugs?*

*It may be helpful to ask the client to score their intensity of suicidal thoughts on a 0 – 10 scale (0 = no intention to act and 10 = an immediate intention to act).*

Answers from the individual that indicate an intention and detailed plan to commit suicide, with an immediately available lethal means, and no reassurance given that

they will not harm themselves, must be treated very seriously and action taken immediately, as follows:

**3.** If required, ensuring the individual will remain in the room safely, excuse yourself for 10 minutes, and seek to speak with the following individuals in order of priority, and according to availability:

Mental Health Services Manager  
An Employee Support Officer  
Chief Medical Advisor  
Medical Advisor  
Chief Nursing Advisor  
OHW Branch Manager

The purpose of this conversation is to ensure that the advice you will provide to the at-risk individual is appropriate within the context of the individual's current circumstances.

**4. Contain the individual:**

In cases of imminent suicide risk, assuming co-operation, staff can help to minimise the risk by supporting the individual and containing the situation. A trusting relationship and listening with empathy will encourage disclosure of important information, and can in itself reduce despair.

**Let the client know that you will be arranging an emergency appointment with their local/on-call GP. Establish if there is anyone the individual would like you to phone, e.g., a spouse, partner, parent, close friend or relative, who could be with the individual before during and after their GP appointment?**

**5. Remove access to the method of self-harm:**

Where the threat is imminent the non-disciplinary removal of a PPW should be arranged with the Officer's duty Inspector as soon as possible. Obtain the phone number of the Officer's Inspector/Duty Inspector (this should be on the IA form), otherwise the administration team should be able to help obtain the relevant station phone number, to then request to speak to the duty Inspector. How the removal of the PPW is carried out is the responsibility of the authority and must be carried out under the 'Emergency Seizure' procedures (Policy Directive 03/08: Access to Firearms and Ammunition- Suitability of Police Officers and Police Staff).

**6. Arrange an emergency appointment with the individual's local or on-call GP:**

The GP's surgery number should be provided on the IA form. If the number is not available on the form, the surgery address will be provided, and the administration staff should be able to obtain this number. If the individual is not fit to travel to the emergency appointment on their own, or there is a concern that the individual will not attend, arrange for the individual to be transported to the GP's office by a friend, spouse, colleague, or police colleague if necessary.

If the individual has already attempted self-harm (e.g., you suspect they have taken an overdose for example), have the individual taken to local A&E for treatment and

further assessment. Transport can be arranged through a 999 call to the Ambulance Service.

**7. Arrange a follow-up Appointment:** Prior to the individual leaving to attend the emergency appointment with their GP, arrange a follow-up appointment with them (write the appointment details on a card), and ensure that you remind the client by phone several days prior to the appointment. The appropriateness and timing of this follow-up appointment will be determined by the decisions regarding the individual's care made by the primary care team/crisis intervention specialists. If the individual does not attend for their next appointment, make contact with their Line Manager (the station location is on the front of the IA form, and the administration team should be able to provide you with a phone number). Establish the current situation with the Line Manager, and what the next best course of action should be to ensure the ongoing welfare of the client.

**8. Inform the individual's Line Manager:** Let the individual know that confidentiality will now be breached in order to notify appropriate professionals within the organisation including their Line Manager. Obtain the individual's Line Manager's name and contact details (the station location is on the front of the IA form, and the administration team should be able to provide you with a phone number), and contact the Line Manager to inform them of your concerns and actions.

**9. Record Notes:** record the content of your session with the client, and include records of phone conversations with names and contact details, and outcomes.

**10. Discuss the individual as soon as possible with the Mental Health Services Manager.**

**11. Arrange a follow up meeting with the Mental Health Services Manager** for case discussion and follow up arrangements.

## Resources for Police Officers and Police Staff

**THE SAMARITANS.** 08457 909090 <http://www.samaritans.org/Samaritans> provides confidential non-judgemental emotional support, 24 hours a day for people who are experiencing feelings of distress or despair, including those that could lead to suicide.

**BEFRIENDERS WORLDWIDE.** <http://www.befrienders.org/work> worldwide to provide emotional support, and reduce suicide. They listen to people who are in distress. They don't judge them or tell them what to do - They listen.

**CARECALL.** If there are concerns about any member of staff between the hours of 5.00pm and 9.00am weekdays, or weekends (when OHW services are unavailable) please use Carecall's 24 hour Confidential freephone telephone helpline number 0808127881. Processes currently exist for client's who are deemed to require (or who request) counselling or another type of intervention other than phone counselling via Carecall. In these cases with the consent of the client, Carecall will seek advise from the OHW Practice Manager.

**LIFELINE** 08088088000

**NSPCC CHILD PROTECTION HELPLINE** 0808 800 5000

**BELFAST REGIONAL CONTROL** [REDACTED]

**Not relevant to Request**

**SEAPARK SECURITY** [REDACTED]