Wexford Health Sources, Inc. Works With National Commission on Correctional Health Care and Other Correctional Health Care Providers for Suicide Prevention Summit

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October 13, 2017 – Representatives from five national providers of correctional health care came together for a day of discussion and problem-solving in the shared interest of preventing suicide in jails and prisons.

At the invitation of the National Commission on Correctional Health Care (NCCHC), senior staff from multiple organizations, including Wexford Health Sources’ Ronald Smith, Psy.D., CCHP-MH, Corporate Director of Behavioral Health, met in Chicago for a day-long summit on suicide prevention.

Suicide continues to be a leading cause of death in jails and prisons. Compared to the national community suicide rate, the rate among incarcerated individuals is alarmingly high. These deaths are tragic and highly traumatic not only for the person’s loved ones, but also for facility staff, health professionals, and other inmates. Many of these deaths are preventable.

The August 30 meeting was convened by NCCHC as a unique opportunity to bring together national experts from the largest private providers of health care services to jails and prisons. The participants examined the suicide issue, shared challenges faced in their facilities and approaches that have been helpful, brainstormed possible process and training improvements, and discussed other ways to keep suicidal inmates safe.

“Suicide prevention and continued intensive mental health services are such important pieces of the care we provide to our clients,” said Dr. Smith. “Working together, we can create better mechanisms and programs to prevent many of the suicides that are committed in correctional facilities.”

The meeting began with a presentation by Lindsay Hayes, MS, director of jail suicide prevention and liability reduction at the National Center on Institutions and Alternatives. Mr. Hayes, widely regarded as the nation’s foremost experts on the topic, presented his “Guiding Principles to Suicide Prevention in Correctional Facilities.”

The day ended with several proposals for possible components of a national response and a commitment to ongoing conversation, starting with a meeting at the National Conference on Correctional Health Care in November. Ideas to be explored include possible improvements in data collection and analysis, suicide screening tools, psychological autopsies, suicide watch protocols,