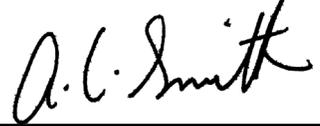




Department of
Rehabilitation & Correction

SUBJECT: Crisis Intervention Team (CIT)	PAGE <u>1</u> OF <u>10</u>
	NUMBER: 71-SOC-11
RULE/CODE REFERENCE:	SUPERSEDES: 71-SOC-11 dated 01/07/19
RELATED ACA STANDARDS:	EFFECTIVE DATE: March 2, 2020
	APPROVED: 

I. AUTHORITY

Ohio Revised Code 5120.01 authorizes the Director of the Department of Rehabilitation and Correction, as the executive head of the department, to direct the total operations and management of the department by establishing procedures as set forth in this policy.

II. PURPOSE

The purpose of this policy is to establish guidelines for the development and utilization of Crisis Intervention Teams (CITs) as a collaborative, multi-disciplinary approach to the prevention of and response to offender crisis.

III. APPLICABILITY

This policy applies to all persons employed by the Ohio Department of Rehabilitation and Correction (ODRC) and to those providing a service to the ODRC.

IV. DEFINITIONS

Crisis - A situation outside the normal behavior that requires immediate intervention and the possibility exists that a resolution could involve the use of force.

Crisis Intervention Team (CIT) - A team approach that trains correctional staff to be more effective by enhancing their knowledge and skills; aids administrators in improved management and care for special populations; reduces liability and cost; improves community partnerships for increased access to resources and supports; and increase safety for all.

Crisis Intervention Team Coach - A CIT team member who is selected and subsequently completes necessary requirements to provide coaching during CIT training.

Crisis Intervention Team Coordinator - A CIT team member appointed by the state-wide CIT coordinator, in cooperation with the institution's managing officer, who is responsible for the CIT facility committee functions at their institution. It is recommended they be a part of the Hostage Negotiation Team.

Crisis Intervention Team Local Committee - A group of specific people chosen to guide and support implementation of the CIT program within a specific institution. Sub-committees of this committee include the CIT Facility Committee and the CIT Training Committee.

Crisis Intervention Team Staff - A team member who successfully complete forty (40) hours of CIT training; who uses verbal and crisis intervention skills to resolve crisis situations.

Crisis Intervention Team (CIT) Shift Responder - A CIT member who completes the 40-hour CIT course and an additional 8 hours of training that revolves around crisis or hostage situations who uses verbal and crisis intervention skills to resolve non-hostage crisis situations.

Crisis Intervention Team Statewide Steering Committee - A group of specific people chosen to guide and support implementation of the CIT program throughout all ODRC institutions and Adult Parole Authority (APA) regions.

Force - The exertion or application of a physical compulsion or constraint.

Mental Health Advocate - An entity/agency that represents or advocates for individuals with mental illness such as National Alliance on Mental Illness (NAMI).

Mental Health Community Provider - An agency in the community that provides mental health services to individuals with mental illness.

Mental Health Partner - An individual whose purpose on the CIT committee is to provide insight about real-life experiences with their own mental illness or with a family member who has mental illness in order to improve CIT services to offenders.

V. **POLICY**

It is the policy of the Ohio Department of Rehabilitation and Correction (ODRC) to have Crisis Intervention Teams (CIT) throughout every institution and Adult Parole Authority (APA) region. The real-life application of CIT may be demonstrated without formal CIT activation by CIT team members when they respond to incarcerated individual behavior using the tools, techniques and skills they learned in CIT training. Additionally, in times of crisis, CIT team members may be dispatched to evaluate the situation and assist with the necessary response based on their training. Whenever circumstances permit, CIT team members shall respond to and conduct planned interventions and de-escalation techniques to resolve the situation without force.

VI. **PROCEDURES**

A. **Overview**

1. CIT is a correctional approach that helps bridge the gap between traditional officer responses (such as the use of force on incarcerated individuals) and mental health care. The CIT approach has demonstrated success by fostering improved relationships between correctional security staff and mental health staff, and by facilitating meaningful conversation with mental health community providers, advocates, and consumers of mental health.

2. Every CIT program shall include Core Elements. The explanation of Core Elements and correlating procedures for the implementation of CIT are posted in two separate protocols – APA Crisis Intervention Team Protocol and ODRC Facility Crisis Intervention Team Protocol.
3. ODRC, in conjunction with the National Institute of Corrections (NIC), has developed a CIT program based on current research and best practices for increasing facility safety and reducing the use of force incidents involving offenders in crisis.
4. The voluntary, specialized training provides staff with the tools to intervene in a crisis involving offenders.
5. CIT is based on a partnership between corrections, mental health providers, and community mental health allies both during and after the forty (40) hour training. This partnership creates a foundation for addressing underlying issues and practices that lead to deeper criminal justice involvements, including high rates of placement in restrictive or special management housing and release violations, for people who live with mental illness.
6. The institutions shall have a minimum of thirty percent (30%) of all staff trained in CIT to provide enough coverage for all shifts.

B. Statewide CIT Steering Committee

1. The statewide CIT steering committee exists to guide and consistently implement the CIT program throughout all ODRC institutions and APA regions.
2. The statewide CIT steering committee membership includes the following staff or a designee:
 - a. Director of ODRC;
 - b. Deputy Director of Holistic Services;
 - c. Deputy Director of Prisons;
 - d. Behavioral Health Services Director;
 - e. Deputy Director of Special Operations;
 - f. 1199 Union Representation;
 - g. OSCEA/ASFME Representation;
 - h. S.C.O.P.E Representation
 - i. Superintendent of the Corrections Training Academy (CTA);
 - j. Mental Health Partner;
 - k. Mental Health Advocate or Mental Health Agency;
 - l. Superintendent of APA;
 - m. Chief of Labor.
3. The statewide CIT steering committee may form subgroups, such as the training committee, as necessary to achieve the goals of the group.

4. The statewide CIT steering committee shall develop a strategic plan by January 31st every two (2) years which shall be submitted to the Director/designee. This strategic plan shall include the following:
 - a. Previous year outcomes;
 - b. Goals for the upcoming year(s);
 - c. Additional training needs and resources.

5. It is the responsibility of the statewide CIT steering committee to:
 - a. Review recommendations from the facility CIT committees;
 - b. Review research;
 - c. Ensure consistent implementation across the institutions;
 - d. Serve as a liaison with county partners;
 - e. Establish training and policy;
 - f. Monitor CIT needs of the department.

C. Facility CIT Committee

1. Each ODRC institution utilizing CIT shall establish a committee to implement and monitor CIT. The institution CIT coordinator shall hold a meeting at least quarterly to evaluate and discuss CIT incidents, statistics, trends, ongoing training needs, and certification training needs. A CIT Committee Meeting Report (DRC5286) shall be completed at each facility CIT committee meeting and routed to the state-wide CIT coordinator within five (5) business days.

2. The ODRC Facility CIT Committee membership includes a recommended minimum of six (6) people:
 - a. Mental Health Administrator/Manager;
 - b. Training Officer;
 - c. Union representation;
 - d. One or more upper level operations manager (i.e., chief of security, captain, deputy warden);
 - e. Community-based mental health partner;
 - f. CIT Coordinator (as appointed by the state-wide CIT Coordinator).

3. The ODRC Facility CIT Committee shall meet to:
 - a. Manage the review, removal, and selection of CIT program participants;
 - b. Coordinate CIT implementation;
 - c. Review incidents involving CIT;
 - d. Plan and implement refresher training;
 - e. Review CIT coaching applications and coaching development;
 - f. Provide feedback and quarterly reports to the CIT steering committee;
 - g. Ensure data collection and reporting;
 - h. Discuss and resolve barriers to the CIT approach;
 - i. Ensure the adherence to CIT principles.

4. In addition, each institution CIT coordinator shall establish the number of certified staff that will comprise the local CIT team.

D. Mental Health Partner

1. Each committee includes at least one (1) community-based mental health partner member. This member provides input from the perspective of people who live with mental illnesses and/or their family members.
2. The mental health partner's role, at a minimum, is to:
 - a. Attend and provide input at a committee meeting, as described in sections VI.B and VI.C;
 - b. Review and provide feedback on any recommended changes to the CIT training curriculum;
 - c. Assist ODRC CIT team members in presentations about the CIT initiative to various audiences as appropriate;
 - d. Attend managing officers' quarterly community stakeholder meetings (facility CIT team members only);
 - e. Identify and suggest community-based resources to support the department's CIT initiative, such as potential site visit locations and training speakers;
 - f. As necessary, identify individuals to speak on the advocacy panel for CIT training classes; and
 - g. As necessary, facilitate the advocacy panel and site visits for CIT training classes.

E. CIT Core Elements

1. There are ten (10) core elements in the CIT model. It is important for every CIT committee member and every CIT-certified team member to have a basic understanding of the core elements. Further information about the core elements is available from CIT International online. CIT is more than additional training; it is a correctional approach that works by fostering improved relationships between correctional security staff and mental health staff, and by facilitating meaningful conversation with mental health community providers, advocates, and consumers of mental health. By striving for inclusion of all core elements in the CIT state-wide initiative, we will help bring about the true spirit of CIT with the purpose of saving lives and keeping staff safe.
2. The core elements are:
 - a. Partnerships: Law Enforcement, Advocacy, Mental Health;
 - b. Community Ownership: Planning, Implementation and Networking;
 - c. Policies and Procedures;
 - d. CIT: Officer, Dispatcher, Coordinator;
 - e. Curriculum: CIT Training;
 - f. Mental Health Receiving Facility: Emergency Services;
 - g. Evaluation and Research;
 - h. In-Service Training;

- i. Recognition and Honors;
- j. Outreach: Developing CIT in Other Communities.

F. Qualifications, Application and Selection Process

1. CIT Staff Applicant

- a. Employees who want to be considered as a CIT team member must submit a CIT Application (DRC5275) through the local designated process established by the institutional CIT steering committee.
- b. The applicant must have completed their initial probationary period, have a good employment record as determined by the managing officer including, but not limited to, a review of the employee's attendance record, disciplinary record, leave usage, and overall job performance.
- c. The local steering committee in cooperation with the local Training Advisory Committee shall establish a process to review the applications and conduct interviews.
- d. The employee must successfully complete the forty (40) hour CIT Certification Course sponsored by ODRC. Employees who have CIT certification from an outside organization shall go through the application process like any other employee and shall submit their CIT certification (if completed within the last 12 months) with their application. Prior certification may be cause for modification to the 40-hour training; this is determined by the institution CIT coordinator and the managing officer. If approved, the modified schedule shall be included in the training documentation for the course.
- e. Upon completion of the CIT Certification course, staff shall be placed on the roster of active ODRC CIT staff. This roster shall be completed by the institutional CIT coordinator and kept in the shift supervisor's office/Captain's Office.
- f. All CIT team members shall complete a minimum of six (6) hours CIT training at least annually to maintain their initial certification. This may include approved in-service training requirements that must meet the six (6) hours. The six (6) hours may also include topics related to mental health, communication skills, and de-escalation skills.

2. CIT Coaching and Training Applicants

- a. It shall be the responsibility of the managing officer to identify CIT staff that will assist in the ongoing training and maintenance of the CIT program at the local facility, as well as other institutions throughout the state.
- b. CIT coaches and trainers shall also be volunteers and in good standing with the CIT program.

- c. CIT coaches and trainers must meet CTA requirements for facilitating training.

G. Training

1. All CIT participants receive training in the CIT program curriculum (based on the National Institute of Corrections model).
2. To be CIT certified, employees must successfully complete the forty (40) hour ODRC CIT training program (or a modified version approved by the institutional CIT coordinator). Training will be documented using the learning management system that ODRC uses for all other training. Staff shall not enter CIT documentation in this system without the full knowledge and approval of the statewide CIT coordinator.
3. The CIT curriculum utilizes a combination of ODRC trainers and coaches in the following breakdown:
 - a. Sixty percent (60%) classroom education, including:
 - i. Mental health basics and mental illness in offender populations;
 - ii. De-escalation techniques;
 - iii. Medications;
 - iv. Suicide risk factors and prevention;
 - v. Treatment systems;
 - vi. Communication skills;
 - vii. Civil commitment;
 - viii. Cultural competency issues (post-traumatic stress);
 - ix. Resources; and
 - x. Policies and procedures for implementing CIT.
 - b. Thirty percent (30%) of the 40-hour certification course involves role playing activities with trained coaches and actors. Actors must simulate real-life correctional settings and highly realistic crisis and mental health issues. Role play scenarios are developed specifically to replicate correctional situations and settings.
 - c. Ten percent (10%) of the 40-hour certification course involves site visits at community based mental health organizations and correctional facility mental health units. Participants learn about the support systems available to offenders with mental illness in the community and correctional facility programming.
4. To maintain certification, CIT team members must complete a refresher training every fiscal year following the year in which they get certified. Refresher training may be related to mental health topics, communication skills, de-escalation skills, approved in-service training or other training approved by the Statewide CIT Steering Committee.

5. Coach and Instructor Qualifications:
 - a. Coaches and instructors must complete the ODRC forty (40) hour CIT certification course and maintain their certification;
 - b. Coaches and instructors must successfully complete eight (8) hours of ODRC Instructional Skills Training;
 - c. Coaches must coach under the direction of a coaching mentor for at least one (1) session;
 - d. Coaches and coaching mentors must be approved by the facility CIT committee to begin serving as a coach.

H. Crisis Intervention Response

1. As a situation is developing, CIT team members may utilize CIT tools without requiring authorization.
2. If the situation continues to escalate, the CIT team member must evaluate the circumstances and available information and determine what further response (if any) is necessary and respond according to this and other ODRC policies as applicable.
3. The shift supervisor's office will maintain a roster of CIT shift responders, identified by the local CIT coordinator that will be the first responders to a crisis or hostage situation. They will use verbal and crisis intervention skills to resolve non-hostage crisis situations.
4. Hostage Negotiation Team members should be identified on the shift rosters and called to respond to crisis and hostage situations.
5. CIT shift responders should be identified to respond to crisis and possible hostage situations if an HNT member is not on grounds.
6. CIT trained members should be identified to respond to crisis situations.

I. Crisis Intervention Activation

1. It is the goal of ODRC to have CIT team members and CIT shift responders trained and always on shift to respond to a crisis as appropriate.
2. It is the responsibility of the shift supervisor to be aware and have at hand a list of all CIT team members on shift. Prior to the start of shift, the supervisor should identify those CIT team members that would most likely be able to respond without creating other staffing issues. This list, to include identified CIT shift responders in a top category and CIT team members in a secondary category as the order in which to call them, shall be shared with the Control Center.
3. In the event of a crisis where no CIT team member is present at the scene, staff on scene shall ask the Control Center to dispatch a CIT team member to the scene. At that time, the Control Center shall dispatch a CIT team member as directed by the shift supervisor at the start of the shift.

4. The CIT team member or CIT shift responder shall report to the scene and get a briefing from the lead officer or staff at the scene. At that point in time, the CIT team member shall utilize tools and skills available to attempt to de-escalate the situation, not provide clinical counseling or therapy.
5. At any time, the CIT team member or CIT shift responder may utilize other means to control the situation following all other ODRC policies to ensure incarcerated individual and staff safety.
6. The CIT team member or CIT shift responder has full discretion to utilize other institution resources to assist with the situation (i.e., utilization of infirmary, utilization of constant watch, delivery to the mental health department for further evaluation and intervention, etc.).

J. Reporting

1. When CIT team members or CIT shift responders are activated and utilize their training to intervene in an incident, an Incident Report (DRC1000) must be completed marking that CIT was dispatched and the outcome (i.e., special management housing, use of force, constant watch, referral to mental health, etc.) prior to the end of their shift. For activations involving a use of force outcome, follow procedures as outlined in ODRC Policy 63-UOF-02, Use of Force Report. CIT shift responders must complete the Intervention Report Crisis/Hostage Situations (DRC2699).
2. At the quarterly meeting, a CIT Committee Meeting Report (DRC5286) shall be generated detailing the use of CIT at the facility during the previous quarter. The report must include the following:
 - a. Objective statistical data as determined by the CIT steering committee (identified outcomes);
 - b. Summary of significant accomplishments;
 - c. Primary concerns;
 - d. Facility goals.
3. This report shall be submitted quarterly by the 10th of the following month after the quarter.

K. Removal of CIT Staff:

1. If a CIT team member receives formal discipline, he/she shall be considered for removal from the CIT program for a minimum of six (6) months to a year. The managing officer has discretion about all removals. Information regarding the removal is kept in the employee's personnel file.
2. If a CIT team member has excessive tardiness, absenteeism or pattern abuse as determined by the Personnel department, they may be removed from the CIT program for a minimum of six (6) months.

3. The CIT team member must request reinstatement in writing to the managing officer following the removal. The recommendation to allow a team member to return to CIT service is made by the managing officer.
4. Any CIT team member may be suspended from participation pending review into conduct or circumstances that may affect their continued participation with the CIT program.
5. The facility CIT committee conducts the review and makes a recommendation, case-by-case, on suspensions and suspension lengths to the managing officer.
6. The CIT coordinator shall communicate all suspensions with the shift commander, so an accurate list of CIT team members is maintained.

Related Department Forms:

Incident Report	DRC1000
Intervention Report Crisis/Hostage Situations	DRC2699
Application for Crisis Intervention Team	DRC5275
CIT Committee Meeting Report	DRC5286