

# Crisis Intervention Team (CIT) Program: Montpelier and Washington County

# CIT Program

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# A Brief History of Mental Illness and Treatment

- De-institutionalization of mental illness began in 1955<sup>1</sup>
- In 1955, there were 558,239 severely mentally ill patients in the nation's psychiatric hospitals. In 1994, this number was decreased to 71,619<sup>1</sup>
- As society transitioned to community-based treatment models, people with mental illness who were in crisis were (are) all too often unnecessarily incarcerated
- In 2018, a report by NPR's KCUR found County Jails in New York, Los Angeles and Chicago to be the largest institutions providing psychiatric care in the U.S. <sup>2</sup>
- A 2019 article reported while Vermont has a high rate of access to mental health care, it has a high incidence of mental health conditions with a growing rate of suicide. The same report also estimated over 24 million individuals experiencing a mental health illness are going untreated<sup>3</sup>

# A Brief History of Mental Illness and Treatment Cont.



- In Montpelier, from 2016 to 2020, there were 590 calls for service initially identified as mental-health related (this does not include calls in which MPD later learned of an underlying mental health-related issue)
- In 2019 and 2020 alone, there were 237 calls for service initially identified as mental-health related (again, this does not include calls in which MPD later learned of an underlying mental health-related issue)

# What is CIT (Crisis Intervention Team)?

- **September 24, 1987, 27-year-old Joseph Dewayne Robinson was shot and killed during an incident with the Memphis Police Department. NAMI challenged mental health-related crisis responses and Maj (Ret.) Sam Cochran, led a community stakeholder effort of training and response to those in mental health crisis. CIT was born and is often referred to as the “Memphis model.”**
- **A Crisis Intervention Team (CIT) program is more than first responder training. It is a community partnership of law enforcement, mental health, medical and addiction professionals, individuals who live with mental illness (and/or their families), and other advocates who forge a response model that promotes access to treatment rather than entry into the criminal justice system**

# What is CIT (Crisis Intervention Team)? Cont.

## Basic Goals of CIT are:

- 1) Improve the safety of officers and the person in crisis
- 2) To help persons with mental disorders and/or addictions access medical treatment rather than place them in the criminal justice system due to illness related behaviors

## Research and Benefits of CIT are:

- 1) Efficient crisis response times
- 2) Increase in jail diversion for those with mental illness
- 3) Continuity with community providers
- 4) Significantly decreased injuries among police officers

# Who are the Stakeholders Involved in CIT Planning?

- **Individuals and Families w/ Lived Experiences**
- **Mental Health Professionals**
- **Resource and Advocacy Organizations Such as NAMI**
- **Medical Professionals**
- **Fire and EMS**
- **Police**

# Who is Trained in and What Does the Training Consist of?

- **Designed for Police Officers, EMS and Dispatchers**
- **40-hour training: Community involvement, de-escalation emphasis and skills, empathy building, scenario-based training, behavioral health components**
- **Agencies must ensure access to less-than-lethal options when use of force may be necessary: Less-than-lethal policies should reflect best practices that emphasize de-escalation and the preservation of life**

# How is a CIT Program Established?

- **A CIT Steering Committee is Formed with Primary Stakeholders**
- **Sequential Intercept Model (SIM) Mapping of the Existing Crisis Response System**
- **Build the Infrastructure**
- **Plan and Deliver Officer and First Responder Training**
- **Sustain and Grow the Program**

# What Happens Once CIT is stood Up?

- Public can request CIT-Trained Officers
- Responding Officers Assess: a) whether a crime has been committed, b) determine if the person's behavior indicates that mental illness may be a factor, c) ascertain whether the person appears to present a danger to self or others, d) use skills to try to safely de-escalate situations involving someone who is behaving erratically or is in crisis. These are procedures MPD currently practices.
- Emphasis on community options and resources other than police as a primary response
- CIT does not eliminate the necessity of a law enforcement response



Questions?