

NC Division of Mental Health, Developmental Disabilities and Substance Abuse Services

Frequently Asked Questions (FAQ) About Crisis Intervention Teams (CIT)

What is a CIT program?

Persons with serious mental illness or co-occurring developmental disabilities or substance abuse problems who are in crisis are at high risk for being arrested, typically for minor “nuisance” crimes, such as trespassing or disturbing the peace. Often, these individuals cycle in and out of our county jails, and are not effectively linked to treatment or support services upon their release.

CIT programs are police-based jail diversion programs that aim to prevent the arrest and incarceration of persons with mental illness, developmental disabilities or substance abuse problems for minor crimes, and instead, divert them to treatment, when this can be done at little risk to public safety. Law enforcement agencies having CIT programs recruit officers with natural skills and abilities in helping people in crisis, and provide them with 40 hours of training designed to build upon their strengths in dealing with people in crisis. These agencies then establish policies and procedures that help assure that these specially trained officers are dispatched to “mental disturbance” calls.

What is the value of CIT programs?

A Raleigh Police Department captain who attended the CIT train-the-trainer classes in Memphis, Tennessee described CIT as “a win – win proposition for everyone!” CIT programs have been shown to:

- Decrease both consumer and officer injury rates
- Decrease the need for lethal force by law enforcement
- Reduce the unnecessary incarceration of persons with mental disabilities
- Reduce jail costs and jail census
- Improve linkages of consumers with and treatment and support resources
- Improve community relationships, particularly between law enforcement and consumers and family members
- Enhance community policing efforts
- Improve ability of law enforcement to effectively manage individuals with mental illness, developmental disabilities and/or substance abuse problems
- Improve attitudes of law enforcement officers who intervene with people with mental illness, developmental disabilities and/or substance abuse problems.

Who is involved in CIT programs?

A wide variety of local agencies must partner together for the successful implementation of a CIT program in any given community. The local partners most critical to the success of CIT programs include:

- County sheriffs
- Police departments
- Local management entities (LMEs)
- Consumers
- Advocacy groups
- Providers
- Community Colleges

Local law enforcement agencies and county sheriffs must be willing to participate by recruiting and sending officers to CIT trainings, by designating staff to coordinate CIT within their agency, by helping to plan the CIT trainings, and by establishing new policies and procedures that support CIT. LMEs must help plan the CIT training programs, help coordinate these trainings, recruit volunteer trainers and role players, and assure that the crisis services infrastructure exists to support CIT in their area. Advocates and consumers are active and critical participants in the planning of CIT programs and training of CIT officers. Providers and private professionals volunteer their time and energy helping to teach CIT classes, and to participate in the role playing portions of CIT training. Some private provider agencies have taken the lead in organizing CIT programs in some areas. Community colleges must be involved to certify these CIT training programs, and to provide equipment and resources for these CIT programs.

What is needed to develop CIT programs?

The essential ingredient necessary for starting a CIT program is the willingness of the mental health and law enforcement communities to collaborate to develop it. Technical assistance from the Division of MH/DD/SAS and mentoring from currently operating CIT programs can help develop the CIT plans and policies to make CIT work effectively. In North Carolina, CIT training programs are sponsored through the community colleges and are offered free of charge to law enforcement officers. CIT programs also rely upon volunteer instructors. Therefore, relatively few start-up costs are incurred, and once begun, CIT programs typically receive funding for training materials and supplies from the sponsoring community college. Small amounts of funding are sometimes needed to purchase additional training supplies, CIT pins, and for the CIT award ceremony.

However, successful implementation of the CIT model requires a crisis response infrastructure, and particularly a crisis unit or community hospital psychiatric unit to which law enforcement can take consumers in crisis. This crisis unit or psychiatric inpatient unit should be able to accept all consumers brought by law enforcement, and provide CIT officers a very quick turnaround, as the CIT model emphasizes making it

more convenient for officers to take consumers in crisis to treatment rather than to jail. Development of this crisis infrastructure, as is currently underway, will help enable the full and successful implementation of CIT programs throughout North Carolina.

Is there an organization or advisory group for CIT in North Carolina?

To help guide the Division of MH/DD/SAS in its development of CIT programs statewide, and to help provide guidance for North Carolina CIT programs, an NC CIT advisory board has been established. This advisory board has helped set guideline for CIT programs in North Carolina, and provided the Division of MH/DD/SAS guidance on its activities to develop CIT programs, including funding decisions and development of the annual NC CIT conference. The CIT advisory board is composed of representatives from all of the currently existing CIT programs in North Carolina, and from the following agencies and organizations:

- Local Management Entities
- NC Sheriff's Association or county sheriffs (or their representative)
- NC police chiefs, or their representatives
- Community colleges
- Advocates
- Consumers
- Private providers

What has the Division of MH/DD/SAS done to develop CIT in North Carolina?

Division of MH/DD/SAS staff have been engaged in many activities that have helped establish CIT programs throughout the state. Division of MH/DD/SAS staff:

- Obtained grant funding from the Governor's Crime Commission for the development of the first two CIT programs in North Carolina.
- Obtained grant funding from the Governor's Crime Commission & other sources for the 1st statewide CIT conference helped plan & organize this conference.
- Helped develop the policies, procedures, and training plans for North Carolina's first CIT programs
- Provided technical assistance to develop all currently existing and most of the developing CIT programs
- Helped train officers in most of the CIT programs and training classes that have been provided in North Carolina
- Helped the NC Justice Academy to produce a CIT training and marketing video
- Developed the CIT data sheet used in all CIT programs statewide
- Written CIT training curriculum used in all current CIT programs
- Obtained training materials for other CIT instructors
- Delivered formal presentations about CIT to law enforcement, mental health providers, advocates, and other groups in twenty (20) of the LMEs in our state.

(Presentations will be offered in the remaining four (4) LMEs by the end of FY 08-09).

What is meant by “statewide CIT?”

We have defined “statewide CIT” to mean that CIT training programs will be operating in all LMEs in North Carolina. CIT programs require a large investment of time to organize, and many mental health professionals to implement. The size and scale, as well as the role of our LMEs as overseers of the local mental health system, make them the most appropriate coordinators of a CIT training program. Once CIT training programs exist in all LMEs, they will be able to help train officers in every county and community in North Carolina. Typically, CIT starts with just a small number of law enforcement agency participants, but once CIT training programs begin, other local law enforcement agencies quickly see the benefit of CIT and join their local CIT collaboration. For example, CIT first started in Wake County with participation from only three law enforcement agencies, but now almost all of the 20 law enforcement agencies in Wake County are participating in the Wake CIT program, including the Capitol Area Police Department, North Carolina State University Police Department, and the RDU airport police.

What role should the Division of MH/DD/SAS take in establishing CIT statewide?

CIT programs are challenging to implement because they involve collaboration between complex systems and affect multiple stakeholders. According to a recent journal article on the experience of implementing CIT statewide in Ohio, “***Although state mental health authorities may want to use a top-down approach to ensure uniform, high-quality implementation, [CIT] programs may be more likely to succeed if they arise as bottom-up, grassroots innovations.***”¹

Division of MH/DD/SAS staff have planted the seeds of CIT across the state and fostered their local germination and growth. Our goal is to help these local partners establish grassroots, innovative and collaborative efforts to develop CIT programs that best take advantage of the resources of their local communities while retaining the elements found to be critical to the success of the CIT model. Statewide implementation of CIT is a goal towards which much progress has already been made. We believe that, with the support of the legislature and our state and local partners in this effort, the plans set forth in this document will assure that CIT programs will exist “from Murphy to Manteo.”

¹ Munetz, M., Morrison, A., Krake, J., Young, B., & Woody, M. (2006). *Statewide implementation of the Crisis Intervention Team program. Psychiatric Services*, V. 57, No. 11, pp. 1569-1571.