
Policy Number: 301.075
Title: Crisis Intervention Team (CIT)
Effective Date: 10/2/18

PURPOSE: To outline the crisis intervention team (CIT) program and techniques staff use in de-escalating situations involving offenders in crisis.

APPLICABILITY: All facilities

DEFINITIONS:

Crisis – a situation in which a person’s behaviors puts them at risk of hurting themselves or others or when they are not able to resolve the situation with the skills and resources available to them.

Crisis intervention team (CIT) – staff members specially trained to prevent and respond to incidents involving offenders in crisis, up to and including use of force, using de-escalation techniques (CIT training) and referring offenders to appropriate mental health services.

Crisis intervention team coach – CIT staff member who is selected and subsequently completes necessary requirements to provide coaching during CIT trainings.

PROCEDURES:

A. General

1. The DOC offers a crisis intervention team (CIT) program based on current research and best practices for the purpose of increasing facility safety and reducing use of force incidents involving offenders in crisis.
2. The DOC maintains a CIT steering committee to guide and ensure consistent implementation of the CIT program throughout DOC facilities.
 - a) CIT steering committee members includes:
 - (1) The assistant commissioner of facility services;
 - (2) The director of behavioral health services;
 - (3) A community-based mental health advocate;
 - (4) One facility representative for each facility using CIT (member of the facility CIT committee);
 - (5) The director of employee development or designee;
 - (6) The research director or designee; and
 - (7) The field services director or designee.
 - b) The CIT training committee membership is defined by the CIT steering committee.
 - c) The CIT steering committee meets on a semi-annual basis to:
 - (1) Review recommendations from the facility CIT committees;
 - (2) Review program outcomes;
 - (3) Ensure consistent implementation across the agency;
 - (4) Serve as a liaison with county partners; and
 - (5) Establish training and policy.

3. DOC maintains CIT committees at each facility utilizing CIT to guide implementation of the program.
 - a) The warden or associate warden of operations, or designee, acts as the facility CIT coordinator.
 - b) Each facility CIT committee meets a minimum of two times per year.
 - c) Facility CIT committee members include, at a minimum:
 - (1) The associate warden of operations;
 - (2) The facility mental health director;
 - (3) One community-based mental health advocate; and
 - (4) One line staff member with CIT training.
 - d) The facility CIT committee meets to:
 - (1) Ensure that watch commanders have an updated list of all CIT staff in the facility;
 - (2) Coordinate facility CIT implementation;
 - (3) Review incidents involving CIT;
 - (4) Plan facility-wide CIT staff meetings;
 - (5) Review CIT coaching applications and coaching development;
 - (6) Provide feedback and quarterly reports to the CIT steering committee;
 - (7) Ensure data collection and reporting; and
 - (8) Ensure facility adherence to CIT principles.
 - e) Meeting minutes must be maintained by the facility's CIT coordinator or a designated staff member and saved in the facility's shared CIT folder.
4. The implementation of CIT throughout the department includes involvement by outside mental health representation.
 - a) Each committee includes at least one community-based mental health advocate member, if available. This member provides input from the perspective of people who live with mental illnesses, family members, or both.
 - b) The mental health advocates' role is, at a minimum, to:
 - (1) Attend and provide input at committee meetings, as available;
 - (2) Review and provide feedback on any recommended changes to the CIT training curriculum;
 - (3) Assist in presentations about the CIT initiative to various audiences, as appropriate;
 - (4) Identify and suggest community-based resources to support the department's CIT initiative, such as potential site visit locations and training speakers;
 - (5) Identify people to speak on the advocacy panel for CIT training classes, as necessary; and
 - (6) Facilitate the advocacy panel and site visits for CIT training classes, as necessary.

B. CIT staff qualifications, application, selection, and removal processes are available on the [CIT iShare page](#). A CIT staff person who receives formal discipline, written reprimand or above, may be removed from the CIT program and coaching for up to one year.

1. The facility associate warden of operations makes the decision about removal. The supervisor maintains information on the removal and keeps it in the employee's supervisory file, not the human resources file.
2. A staff person must request reinstatement following removal. Requests must be submitted to the facility's associate warden of operations. The decision to allow a staff member to return to CIT service is made on a case-by-case basis by the facility associate warden of operations.

C. CIT Training

1. Staff must successfully complete the department's 40-hour CIT training program to be certified. All training must be documented in the electronic learning management system.
2. CIT-trained staff must complete a minimum of eight hours of refresher training every two years to retain CIT certification. Refresher training consists of four hours of classroom and four hours of coaching.
3. CIT coaches must;
 - a) Successfully complete eight hours of CIT trainer/coach training; and
 - b) Coach under the direction of a coaching mentor for at least one session.

D. Crisis intervention activation and response

1. As a situation develops, CIT trained staff may use CIT tools without requiring authorization from the watch commander or master control.
2. As a situation continues, the CIT trained staff must evaluate the circumstances and available information and determine what further response (if any) is necessary. This includes notifying the watch commander, incident commander, or master control of the incident or activating the incident command system (ICS).
3. If CIT trained staff is not immediately available and non-CIT staff determine CIT tools may be beneficial in an escalating situation, staff must call or radio the watch commander, master control, or designee for activation of a CIT staff member. Staff do not need to initiate an ICS prior to requesting activation of CIT-trained staff.

F. Reporting

1. When CIT staff are activated and utilize their training in an incident, an incident report must be completed and retained at the facility. Staff must include information on the use of CIT tactics, check the box indicating "CIT was used," and submit the report by the end of their shift.
2. Each quarter, the facility CIT coordinator must generate a report on the use of CIT at the facility during the previous quarter. The report must include:
 - a) The number of incident reports filed in the last quarter indicating the use of CIT techniques;
 - b) The number of active CIT members; and
 - c) A summary of significant accomplishments or points of interest.
3. The facility associate warden of operations must make the CIT coordinator aware of CIT staffing changes quarterly.

INTERNAL CONTROLS:

A. Staff training is documented and retained in the electronic training management system.

B. Incident reports are maintained by the facility.

ACA STANDARDS: None

REFERENCES: [Policy 100.010, "Mission, Values, Vision, and Goals of the Department of Corrections"](#)
[Policy 301.081, "Use of Force and Restraints – Adult"](#)
[Policy 300.300, "Incident Reports"](#)

REPLACES: Policy 301.075, "Crisis Intervention Team (CIT)," 6/5/18.
All facility policies, memos, or other communications whether verbal, written, or transmitted by electronic means regarding this topic.

ATTACHMENTS: None

APPROVALS:

Deputy Commissioner, Community Services

Deputy Commissioner, Facility Services

Assistant Commissioner, Facility Services

Assistant Commissioner, Operations Support