



YORKVILLE POLICE DEPARTMENT

338 - Crisis Intervention Team (CIT)

SUBJECT: Crisis Intervention Team (CIT)
EFFECTIVE DATE: January 14, 2021
DISTRIBUTION: All Personnel

Purpose: This order identifies and implements the role of the Yorkville Police Department's Crisis Intervention Team and its goal to improve the Department's response to incidents involving persons who are known or thought to have a mental illness, developmental limitations, or who may be in crisis.

Policy: The need to recognize the dynamics of crisis management for those with mental illness and developmental limitations are routine requirements of employees performing enforcement and investigative functions. Working with individuals in crisis or enforcement situations with persons who are known or thought to have emotional or mental illness and developmental limitations requires an employee to have the knowledge and skill to assist the person effectively and appropriately.

Mission Statement: The Crisis Intervention Team (CIT) is a partnership between the Yorkville Police Department working with mental health consumers and family members. Our collective goal is to champion dignity and compassion for those experiencing mental health crisis and those with developmental limitations. CIT will exist to assist citizens to normalize and understand their physical and emotional reactions to mental health crisis and developmental limitations. CIT officers will be part of a specialized team, which can respond to a crisis at any time and will work with the community to assist in progressing physical and emotional recovery from crisis events.

Vision Statement: A partnership between the Yorkville Police Department and community where people in mental health crisis and those with developmental limitations find safety, help and hope.

To achieve this purpose, the Department will create a Crisis Intervention Team (CIT) consisting of specially trained employees working with the Kendall County Health Department, and other local resources to respond to incidents involving persons who are known or thought to have mental illness and persons who are known or thought to have developmental limitations or who may be in crisis, in order to reduce the number of repeat calls requiring public safety resources, to help de-escalate the potential volatility of the circumstance, and to connect the person to appropriate services.

This Policy will be comprised of the following sections:

- I. Definitions**
- II. Team Structure**
- III. Team Selection**
- IV. Procedures**
- V. De-Escalation**
- VI. Mutual Aid Requests**
- VII. Training**
- VIII. Documentation**
- IX. Compliance**

X. Effective Date

I. DEFINITIONS

- A. **Case Management:** A collaborative process of assessment, planning, facilitation, evaluation, and advocacy for options and services to meet an individual's needs.
- B. **Crisis Intervention Team (CIT) Coordinator:** The CIT coordinator is a Yorkville Police Department employee designated to direct and coordinate the purpose and activities of the CIT. This is a collateral duty within the Department.
- C. **Crisis Intervention Team (CIT) Core Group:** A group that will be responsible for the direction and supervision of the CIT. The group will have representation from Patrol, Command, and Support Services. The CIT core group shall meet on a regular basis.
- D. **Crisis Intervention Team (CIT) Officer:** A sworn officer who has successfully completed a 40-hour course of instruction in crisis intervention strategies through the Illinois Law Enforcement Training and Standards Board or equivalent. This is a collateral duty within the Department. CIT officers' duties shall conduct in person follow up visits with citizens whom the CIT has identified as those that could benefit from the services of the CIT.
- E. **Crisis Intervention Team (CIT) Stakeholders Group:** Persons or organizations who share a common interest in and/or directly affected by the response to mental illness in the community. These may include, but are not limited to, schools, health care providers, public mental health service providers, the criminal justice system and other stakeholders who will assist in completing CIT's mission and purpose.
- F. **Crisis Intervention Team (CIT) Support Employee:** Non-sworn Yorkville Police Department personnel that provide support to the CIT, in the form of various case management duties, statistical analysis and assisting with access to resources. This is a collateral duty within the Department.
- G. **Mental Illness Crisis:** A situation where a person's normal coping mechanisms have become overwhelmed causing the person to pose an immediate and significant risk to himself/herself or others.
- H. **Mental Illness:** A mental or emotional disorder that substantially impairs a person's thought, perception of reality, emotional process, judgement, behavior, or ability to cope with the ordinary demands of life, but does not include a developmental disability, dementia or Alzheimer's disease absent psychosis, a substance abuse disorder, or an abnormality manifested only by repeated criminal or otherwise anti-social conduct (405 ILCS 5/1-129).
- I. **Developmental Limitations:** In general, a severe chronic disability of an individual that is attributable to a mental or physical impairment or combination of mental and physical impairments, manifested before the person attains age 22, is likely to continue indefinitely, results in substantial functional limitations in 3 or more of the following areas of major life activity: self-care, receptive and expressive language, learning, mobility, self-direction, capacity for independent living, and economic sufficiency; and reflects the person's need for a combination and sequence of special interdisciplinary or generic services care, individualized supports, or other forms of assistance that are life long or extend duration and are individually planned and coordinated (20 ILCS 4010/2002).

- J. **Cognitive Impairment:** For the purpose of this policy, persons living with cognitive impairment (i.e. Dementia, Alzheimer's) will be included alongside those with mental illness and developmental limitations for services provided by CIT officers.

II. TEAM STRUCTURE

- A. The Department shall operate a CIT in order to respond to persons known or thought to have mental illness or who may be in crisis and those with developmental limitations. It shall consist of a CIT coordinator, sworn CIT officers, non-sworn CIT support employees, and a CIT core group. In addition to the CIT, there shall be a CIT stakeholders' group of persons and organizations in the community.

III. TEAM SELECTION

- A. **CIT Officer:** A Yorkville Police Officer who has successfully completed certified crisis intervention training.
- B. **CIT Support Employee:** The CIT coordinator selects support employees. The member must exhibit good judgement, interact well with the public, and have received satisfactory Department performance evaluations.
- C. **CIT Coordinator:** The Chief of Police or designee shall select the CIT Coordinator.

IV. PROCEDURES

- A. CIT officers shall not assume unreasonable risk of injury while interacting with a person with mental illness or developmental limitations. The CIT officer shall use his/her best judgement and follow safety procedures and legal protocols when intervening. The CIT officer's response shall be in accordance with Yorkville Police Department policy 319 – Mental Health Protocol.
- B. Whenever possible, a CIT officer will be assigned to incidents involving an individual who is suspected or known to have a mental illness while in crisis or those with developmental limitations. A supervisor may assign a CIT officer to a call for service if there is a reasonable belief that the person in crisis may benefit from the CIT officer's specialized training and knowledge.
1. Intervention – Following an assessment of the individual and situation, if it is ascertained that a CIT response is needed, the CIT officer will follow through with one of the following:
 - a. Informal – If there is no imminent danger to self or others, allowing the individual to seek treatment in accordance with the individual's treatment schedule. This may include referral to the Kendall County Health Department or other local resources. Case management may also be used, e.g. de-escalation techniques and subsequent follow up.
 - b. Formal – Petition for commitment to a mental health treatment facility.
 - c. Criminal Arrest – The actions of the subject in crisis fulfill the elements of a criminal offense and the person is arrested. This intervention should consider other types of dispositions including mental health court and other diversion programs.

- C. Following the initial incident, the case shall be referred to the CIT coordinator for follow up cases to CIT officers as appropriate. The assigned CIT officer shall follow up the case in accordance with Department policy and CIT training, and document the follow up actions in a Supplemental Report or by utilizing CAD notes.

V. DE-ESCALATION

- A. Absent an imminent threat to the public, Officers should consider that taking no action or passively monitoring the situation may be the most reasonable response to a mental health crisis. Consider strategic disengagement which may, as circumstances dictate, include removing or reducing law enforcement or other responding resources. CIT officers should avoid confrontation in favor of utilizing distance, cover, and time to pursue a positive outcome.
- B. Once it is determined that a situation is a mental health crisis and immediate safety concerns have been addressed, responding members should be aware of the following considerations and should generally:
 - 2. Evaluate safety conditions.
 - 3. Introduce themselves and attempt to obtain the person's name.
 - 4. Remain calm, confident, firm.
 - 5. Be patient, polite, courteous and avoid overreacting.
 - 6. Speak and move slowly and in a non-threatening manner.
 - 7. Moderate the level of direct eye contact and give distance.
 - 8. Remove distractions or disruptive people from the area.
 - 9. Demonstrate active listening skills (e.g. summarize the person's verbal communication).
 - 10. Get on their level – do not compromise officer safety, utilize cover officer.
 - 11. Avoid joking, negative reactions.
 - 12. Don't take what they say personal.
 - 13. Provide for sufficient avenues of retreat or escape should the situation become volatile.
 - 14. Avoid stances or tactics that can be interpreted as aggressive.
 - 15. Avoid allowing others to interrupt or engage the person.
 - 16. Avoid cornering a person who is not believed to be armed, violent or suicidal.
 - 17. Don't argue, speak with a raised voice, use threats or use deception to obtain compliance.

VI. MUTUAL AID REQUESTS

- A. CIT officers may respond to the request of an outside law enforcement agency for a person with mental illness/developmental limitations in crisis if the person would benefit from the skills, knowledge and ability. CIT officers will only respond following the formal request from the outside agency.
- B. When responding in this capacity, the CIT officer will act in a complementary manner to the requesting agency.

VII. TRAINING

- A. Officers designated as CIT officers will attend initial training designed to develop their abilities to function effectively as a team and practice their skills in handling persons in crisis due to mental illness/developmental limitations.
- B. Sworn officers selected to serve on the CIT shall attend an approved and accredited 40-hour Crisis Intervention Training designed to develop their skills in working with a person with mental illness.
- C. CIT members shall be required to attend any additional training deemed necessary.
- D. All training will be documented in the member's training log.

VIII. DOCUMENTATION

- A. All incidents involving mental health/developmental limitations cases shall utilize the UCR code guidelines below:
 - 1. 7700 CIT/CAR Registrations: Utilize when registering a Citizen at Risk.
 - 2. 7705 Mental Illness: Crisis Intervention: Utilize when the underlying cause for the call is due to mental illness.
 - 3. 7708 Suicide Threat: Utilize for investigation that does not result in involuntary committal paperwork. Document any voluntary transport, either through CAD notes, or if appropriate a report.
 - 4. 7710 CIT Follow Up: Utilize when doing a follow up to any mental illness incidents.
 - 5. Attempt Suicide Codes: A report must be pulled.
 - 6. 9302 Detention of Mental Patient: Utilize for involuntary committal of persons for any reason. Report number must be pulled.
 - 7. Note *** Assist Ambulance is only to be used for physical injuries, not Mental Health Calls.
- B. Documentation of mental health/developmental limitations Call in CAD or Report shall include:
 - 1. Completed involuntary committal paperwork.
 - 2. Any transports, voluntary or involuntary.
 - 3. Synopsis of the call.

4. Prior call history.
 5. Living arrangements, e.g. homeless, family, independent, assisted living.
 6. Prior mental health hospitalization or other treatment.
 7. Current mental health treatment and/or physician.
 8. Any admission of mental health diagnosis.
 9. Prescribed mental health medications and whether currently using or not.
 10. Triggering or calming actions or information.
 11. Observations: abnormal behavior/appearance, hallucinating, anxiety, paranoia, rigidity, violent behavior, depressed, manic, impulsive, lack of fear, social withdrawal, loss of memory, suicidal talk, suicidal gestures, signs of alcohol/illegal drug use, possible developmental disability, and weapons.
 12. Dispositions: Homeless shelter, PADS, health department, hospital, substance abuse facility, other.
- C. All incidents of mental health/developmental limitations calls will be reported to the CIT Coordinator or designee.
1. The CIT Coordinator or designee will maintain an in-house database of citizens at risk within the city limits who have registered for the voluntary citizens at risk program (YPD Policy 315). This database will be audited annually.
 2. The CIT Coordinator or designee will evaluate each mental health service call to determine if CIT follow up is required. A CIT officer will be assigned to follow up with appropriate citizens and provide the citizen with a community resource packet (Attachment A) and explain the Citizen At Risk Program (YPD Policy 315).
 3. CIT officers assigned to follow up with citizens will present the citizen with the community resource packet (Attachment A) which is to be completed including the CIT officer's business card and contact information. The CIT officer will familiarize themselves with the contents of the community resource packet and be prepared to provide additional information and clarification to any document contained therein. CIT officers will attempt to contact the citizen within 12 hours of receiving the follow up assignment. If initial contact is not made with citizen, the CIT officer shall leave contact information and continue attempting contact until successful contact is made with citizen.

IX. ATTACHMENTS

Attachment A: Kendall County Community Services Directory

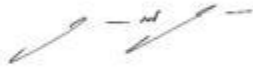
X. COMPLIANCE

It is the responsibility of all Officers, Supervisors, and Administrative Personnel to comply with all sections of this directive. This Policy supersedes all previous written and unwritten policies and procedures of the Yorkville Police Department on the above subject.

XI. EFFECTIVE DATE

This order shall become effective on: **January 14, 2021**

By order of]

A handwritten signature in dark ink, appearing to read "Jensen", written over a horizontal line.

James Jensen
Chief of Police