

Missouri Crisis Intervention Team
(MO CIT) Council



Overview of Missouri Crisis Intervention Team and Jail CIT

Missouri Jail Administrators Conference
May 13, 2021

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Objectives

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1. Explain the history and objectives of CIT in Memphis and Missouri.
2. Describe CIT as collaboration and an example of a successful community policing program.
3. Describe the implementation of Jail CIT training and the potential to both jail staff and offender.

Crisis Intervention Team:
Law Enforcement
Partnering with
Communities.



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The Memphis Model: The Beginning

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- The first CIT Model was developed in Memphis, TN in 1988
- In response to a lethal use of force by police involving a person with a mental illness
- A local effort to bring together law enforcement personnel, mental health professionals and advocates
- Goals of the CIT program are to recruit, train and support police officers to respond effectively to individuals experiencing a mental health crisis



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Missouri Model of Crisis Intervention

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The Missouri CIT program is a partnership of law enforcement and other first responders, behavioral health providers, hospitals, courts, individuals with lived experience and community partners who are dedicated to implementing the Missouri Model of CIT.



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Expected Outcomes of CIT

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- ➕ Diversion from the criminal justice system to community resources;
- 🛡️ Increased officer and citizen safety;
- 👤 Higher success rate in resolving community crisis situations;
- 👥 Extended skills for officers;
- 🔄 Reduces recidivism;
- 📄 Increased community resources for law enforcement officers;
- ⚖️ Decreased liability and litigation for officers;
- 🤝 Improved community relations

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GOALS of MO CIT

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- Promote more effective interactions between law enforcement and individuals in crisis, through a 40 Hour training centered on behavioral health education and de-escalation skills;
- Improve the safety of the officer and individuals in crisis;



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GOALS of MO CIT

- Help individuals in crisis by connecting them with appropriate community resources, in an effort to divert involvement with the Criminal Justice System;
- Reduce stigma; and
- Expand CIT across the state, especially to the rural areas.



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Taking Missouri to the Next Level

- DMH funded a State CIT Coordinator Position
- Beginning January of 2016, DMH contracted with the Missouri Coalition for Community Behavioral Healthcare to provide support for CIT.
- Better accountability for funding and support.
- Development and implementation of the Missouri Model.
- Expansion



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Missouri CIT Council

- Law enforcement agencies with established CIT Programs
- Law enforcement agencies working to develop CIT programs
- Department of Mental Health
- Missouri Behavioral Health Council
- Community Behavioral Health Agencies
- Hospitals
- National Alliance on Mental Illness (NAMI)
- Other state agencies: Corrections, Health and Senior Services, Social Services



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Community Mental Health Liaisons (CMHLs)

31 CMHL's

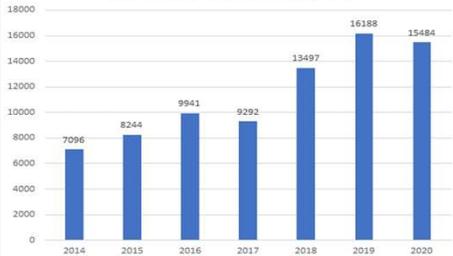
- Every Missouri county has access to a CMHL
- Only work with Law Enforcement & courts
- Assist in CIT Expansion



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CIT Referrals to CMHLs

Law Enforcement Referrals by Year



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34 Local Councils

- Boonslick
- Bootheel Area
- Callaway
- Capital Area
- East Central
- Four Rivers
- Franklin County
- *Grand River
- Great Rivers
- Green Hills Regional
- Jefferson County
- Johnson County - JOCOMO
- Mid-America - MACIT
- Mid-Missouri - MIDMO
- *Mid-South
- Missouri River
- *M&M
- Mineral Area



* = expansion site

- Missouri River
- North Central
- Northeast - NEMO
- Northwest
- Ozarks Area
- Polk/Bolivar
- Saints Avenue
- *Show Me
- South Central
- Southeast
- Southwest
- *St. Clair
- St. Louis Area
- Three Rivers
- TRI-CIT
- Truman Area
- West Central

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Definition of a Local MO CIT Council

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1. Meets regularly for at least a year (the recommendation is monthly meetings, but at least quarterly meetings are required).
2. Have CIT trained officers/deputies in their area. (The local council does not have to provide CIT training. The Council can send officers/deputies to established CIT trainings in other areas).
3. Council is implementing the "Missouri Model" of CIT, including using the Missouri CIT Curriculum, following standardized data collection practices, etc.
4. Must have active participation by a member of the local Council (in person, by teleconference) in four of the six state MO CIT meetings annually and,
5. Requesting council submits a letter explaining how your council meets the criteria to the MO CIT Council for approval.



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Benefits of a Local CIT Council Meeting

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- Team Collaboration
- Case Studies
- **Determine Best Practices/Response**
- Local Resource Identification
- Local Agency/Resource Spotlight
- Training/Event Calendar

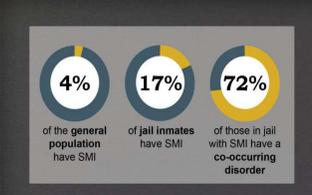


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Prevalence of BH in Jails

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Jails and Mental Disorders



- 1 of every 6 people coming into the county jail are dealing with a serious mental illness
- What if 1 in 6 were coming in with a serious medical issue (e.g., heart problems)? We would do something to address it.



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GOALS

- Provide safety, and quality of life for all
- Keep out of jail and promote treatment
- Promote and support recovery
- Provide constitutionally adequate treatment in jail
- Link to comprehensive, appropriate, and integrated community-based services



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Jail Officer CIT Course

- Identified a "Work Group" to develop the course
- Worked over one and a half years
- 24 hours POST approved
- Similar modules to MO DOC/National Institute of Corrections
- Identified need to training Jail staff who are non-commissioned
- Cost effective, 24 compared to 40 hour
- Det. Crystal Kent- Fulton Police Department/ MO CIT Training Coordinator
- Officer Marc Canovi- Kansas City Police Department/CIT Officer
- Jonel Coleman- St. Charles County Dept. of Corrections/Suicide Prevention Officer
- Eric Terry- Previous Jail Admin for Vernon County Sheriff's Office
- Laura Heitmann- CMHL for Arthur Center/ Audrain, Monroe, Montgomery, Ralls, Pike, and Callaway Counties
- Jessica Cox- CMHL for Compass Health+ Network/ Bates, Benton, Cedar, Henry, Hickory, St. Clair, and Vernon Counties



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Jail Officer CIT Course

- Overview of CIT
- The First 48 in CIT
- Overview of Behavioral Health Disorders
- Substance Use and Co-Occurring Disorders
- Suicide Prevention in Jails
- First Responder Wellness
- De-Escalation
- Treatment Courts
- Special Populations
- Police and Liability
- Lived Experience Panel
- Community Resources



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Justice Reinvestment Initiative

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- In 2017 MO leaders requested and received support from US Department of Justice – Bureau of Justice Assistance to look at several criminal justice challenges.
- Bipartisan task force was formed to address the issues
- Worked with Council of State Governments to analyze CJ data
 - 15 million records spanning over 10 years
 - MO DOC, OSCA, MSHP
 - 100 in-person meetings and conference calls




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Justice Reinvestment Initiative

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Crisis Response Work Group

- **Charge:** Support **diversion** from traditional criminal justice case processing for **nonviolent offenders** with **behavioral health conditions** (mental health disorders, substance use disorders, or both) that are significant factors in bringing them into contact with the justice system. The goal is to promote fiscal, public safety, social and health benefits for participants, communities, justice systems, health systems and taxpayers.



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Goal 1: Expand LE Diversion

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- Promote CMHL/SUDL expansion (**jail/court navigators**) (50 new)
- Support regional Crisis Stabilization Units (CSUs) (11 new)
- Prioritize the use of CIT with law enforcement and community participation
- Prioritize statewide CIT Reporting System
- Identify/promote LE diversion programs such as LEAD, Stepping Up, etc.
- Consider the development of statewide Sequential Intercept Model (SIM)
- Conduct a Diversion forum and develop a mapping tool outlining existing MH and CJ collaborations and strategies
- Assess CSG Police-MH Assessment tool
- **Promote implementation of jail screening tools and jail services**



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Jail Screening Tool

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- Evidence Based Assessment Tool
- Is a booking tool to screen incoming detainees in jail and detention centers for the need for further mental health assessment
- Developed by Policy Research Associates (PRA) with funding from the National Institute of Justice
- Generally takes less than 3 minutes and consists of eight yes/no questions

• <https://ps.psychiatryonline.org/doi/pdf/10.1176/appi.ps.56.7.816>



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Jail Screening Tool

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Missouri State Seal

Intercept 0
Intercept 1
Intercept 2
Intercept 3
Intercept 4
Intercept 5

Question	Yes	No	Assessment
1. Has the individual ever been arrested for a criminal offense involving violence or weapons?			
2. Has the individual ever been arrested for a criminal offense involving drugs or alcohol?			
3. Has the individual ever been arrested for a criminal offense involving a motor vehicle?			
4. Has the individual ever been arrested for a criminal offense involving a firearm?			
5. Has the individual ever been arrested for a criminal offense involving a child?			
6. Has the individual ever been arrested for a criminal offense involving a sex offense?			
7. Has the individual ever been arrested for a criminal offense involving a domestic violence offense?			
8. Has the individual ever been arrested for a criminal offense involving a hate crime?			

Intercept 1
Intercept 2
Intercept 3
Intercept 4
Intercept 5

CONSENT TO COMPLETE THE MISSOURI JAIL SCREENING TOOL

I, the undersigned, hereby consent to the Missouri State Seal, Inc. collecting and analyzing my personal information for the purpose of screening for mental health needs. I understand that my information will be used for the purpose of screening for mental health needs and that my information will be shared with the Missouri State Seal, Inc. for the purpose of screening for mental health needs. I understand that my information will be used for the purpose of screening for mental health needs and that my information will be shared with the Missouri State Seal, Inc. for the purpose of screening for mental health needs. I understand that my information will be used for the purpose of screening for mental health needs and that my information will be shared with the Missouri State Seal, Inc. for the purpose of screening for mental health needs.

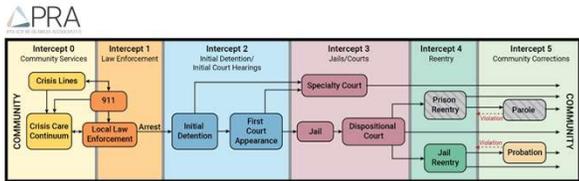
Signature: _____
Date: _____



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Sequential Intercept Model

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Abreu, D., Parker, T. W., Nothher, C. D., Stoddman, H. J., & Case, B. (2017). Revising the paradigm for jail diversion for people with mental and substance use disorders. *Intercept 0, Behavioral Sciences & the Law*, 35(2-4), 380-395. <https://doi.org/10.1002/bsl.2200>

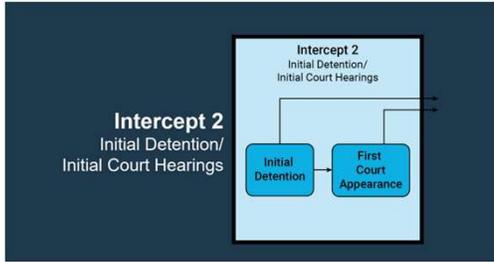
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SIM- Intercept 2

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SIM- Intercept 2

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- Post Booking Diversion
 - Identify and divert people after arrest and at or before booking
- Pre-trial Release
 - Determination for eligibility for release is made at individual's initial court appearance
- Deferred Prosecution
 - Decision to release individual lies primarily with the prosecuting attorney
- During Incarceration
 - People with Mental Illness are identified through a screening, have a constitutional right to treatment, and services needed beyond medication
- Use of Management Information System
 - Can help identify and re-link individuals to community treatment



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First Responder Provider Network

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- Directory of approved culturally competent clinicians and therapist who want to serve first responders
- Specialize in First Responder care/trauma
- Will work with insurance, cash, sliding scale, pro bono
- Currently 25 vetted providers

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