

CRISIS INTERVENTION TEAM RESPONSE

Cleveland Division of Police G.P.O. #

Purpose

- Guidelines for CDP members to interact with individuals suffering from a crisis by
- Improving Safety
- Promoting Community Solutions
- Diversion from Criminal Justice System–

C.C.S. Responsibilities

- Shall, when available, dispatch a CIT Specialized Officer to all crisis incidents
- If none available, dispatch call to first available Two Man Car, and Specialized CIT Officer dispatched as soon as possible, from a lower-priority call, or even from another District, if necessary.

Crisis Incident Response All Officers

Responding to a Crisis Incident Officers shall:

- Assess safety risks
- Ensure Specialized CIT Officer is on scene, or request.
- Request EMS, if necessary (Medical/Violent)
- Remember, individual may be non-compliant due to a variety of factors - Can they process what you are saying?
- Information-gathering – Family or Friend?
- De-escalate where possible

Specialized CIT Officer Response

- Make individual aware you are a CIT Officer – Wear Pin/Introduce yourself
- Take primary responsibility for scene
- De-escalate
- Inform individual of next steps
- Give referrals if possible
- Diversion – consider health care system vs criminal justice

Juvenile Response

- Age-Appropriate response including language
- Contact Child Response Team CRT of Mobile Crisis – to find most appropriate level of care -not all psych facilities are appropriate for juveniles

De-escalation

- Differs from Use-of Force De-escalation
- Tactical vs Verbal

Use of Force

- Only Force that is necessary/proportional/objectively reasonable
- NOT to be used for expediency
- Be aware of positional asphyxiation

Handcuffing

- Officers may (not shall) use handcuffs on individuals solely in custody for Psych. Evaluation.
- Consider totality of circumstances
- Explain use of handcuffs to the individual and parent family members


Diversion and Transport Options

- Once scene/individual is secure ask 2 questions:
 1. Is there a legal obligation to arrest, or is diversion an option?
 2. Does the individual need hospitalization or referral to mental health/social service agency? - Use resource cards, Mobile Crisis as resources for referral options.

Response: Non-Violent Individual able to seek care on their own

- Provide individual/family remember with name/#/address of a referral agency
- Notify referral agency of the referral
- Complete Crisis Intervention Report/CIT Stat Sheet

Emergency Behavioral Health Resources

The following resources are available 24/7 for emergency situations that might require the assistance of mental health, addiction, or other non-law enforcement professionals. 

<p>Emergency Crisis Services</p> <p>(216) 623-6888</p> <p>Mobile Crisis, Suicide Hotline, Children Who Witness Violence, Traumatic Loss Response Team</p>	<p>Rape & Sexual Assault</p> <p>(216) 619-6192</p> <p>Cleveland Rape Crisis Center Crisis Hotline</p>
<p>Domestic Violence</p> <p>(216) 391-4357</p> <p>Domestic Violence & Child Advocacy Center HelpLine</p>	<p>Psychiatric Emergency</p> <p>24-hour emergency psychiatric departments</p> <p>(216) 636-2538</p> <p>St. Vincent's Psychiatric Emergency Department 2351 East 22nd Street</p> <p>(216) 791-3800</p> <p>Louis Stokes VA Medical Center's Psychiatric Emergency Department 10701 East Boulevard</p>
<p>United Way's Help Center</p> <p>Dial 211</p> <p>One-stop, comprehensive information about social, health, and government resources.</p>	

Homeless Services

EVERYONE on Weekdays from 8:00 AM to 8:00 PM

Everyone: Go to Central Intake at Frontline Services for men, women, & families.
Central Intake @ FrontLine (216) 674-67100
1736 Superior Ave., 2nd FL
Mon. to Fri.: 8AM to 8PM

Men, Women, & Families after 8:00 PM on Weekdays or on Weekends

Men: Go to the 2700 Lakewood Men's Shelter, located at 2100 Lakewood Avenue, Cleveland 44103.
Women: Go to the Norma Herz Women's Shelter, located at 2227 Payne Avenue, Cleveland 44114.
Families: Call 211. They will connect you with a place to stay.

Updated 2/2/2016.
For more resources, visit
www.adamhs.org



mhac
Mental Health & Addiction
Advocacy Coalition



ADAMHS
BOARD OF CUYAHOGA COUNTY
Mental Health & Addiction
Advocacy Coalition

Response: Non-Violent Individual who needs immediate care

- Determine Options for emergency care and transport or arrange transport in a safe manner to the appropriate facility – Options can be EMS, ZC, Family Member, etc.
- Complete Crisis Intervention Report/CIT Stat Sheet

Response: Possibly Violent Individual Non Voluntary

- Determine options for emergency care and arrange safe transport to facility
- If the individual is violent, call EMS to transport
- Complete Crisis Intervention Report/CIT Stat Sheet

Transporting Violent Individuals

- CDP Officers are responsible for securing the individual to the EMS cot with the supervision/assistance of EMS (VIDEO)
- When individual is secured, a CDP officer (Specialized CIT preferred) shall ride in the back of the EMS Unit to the hospital, with the other officer following in the ZC
- If arrested, individual shall be handcuffed and conveyed by ZC to CPU after treatment

Supervisor Responsibilities

- Daily Roster to CCS with Specialized CIT Officers indicated
- Respond to CIT calls when requested. Seek input of Specialized CIT Officers regarding strategies for crisis resolution
- Report review

Pink Slip – Law Enforcement

- O.R.C. Sec. 5122.10 gives police officers the power to take a person in custody *involuntarily* – and transport to a facility for mental evaluation - *if the individual represents a substantial harm to self or others if allowed to remain at liberty pending examination*
- “Pink Slip” preferred method of admission to hospital for evaluation

Health Authority Emergency Admission

- An officer presented with a pink slip by *an authorized professional* **shall** transport the individual to the designated facility
- ❖ *Authorizing Professional* – Psychiatrist (M.D.), Licensed Clinical Psychologist, Licensed Physician, Police Officer, Sheriff/Deputy Sheriff, County Health Officer– NOT Social Worker, Aide, etc.
- ❖ Must have properly filled out slip, and explain circumstances and reasons for the admission
- ❖ Professional must have confirmed specific facility where the individual will be accepted for evaluation

Ohio Department of Mental Health
 Application for Emergency Admission
DMH 9025

In Accordance with Sections 5122.01 and 5122.16-ORC

TO: The Chief Clinical Officer of _____
(Regional Psychiatric Hospital - BPS Facility Name) _____
(Date/Time)

The undersigned has reason to believe that: _____
(Name of Person to be Admitted)

1. Is a mentally ill person subject to hospitalization by court order under division B Section 5122.01 of the Revised Code, i.e., this person

- (1) Represents a substantial risk of physical harm to self as manifested by evidence of threats of, or attempts at, suicide or serious self-inflicted bodily harm;
- (2) Represents a substantial risk of physical harm to others as manifested by evidence of recent homicidal or other violent behavior, evidence of recent threats that place another in reasonable fear of violent behavior and serious physical harm, or other evidence of present dangerousness;
- (3) Represents a substantial and immediate risk of serious physical impairment or injury to self as manifested by evidence that the person is unable to provide for and is not providing for the person's basic physical needs because of the person's mental illness and that appropriate provision for those needs cannot be made immediately available in the community; or
- (4) Would benefit from treatment in a hospital for his mental illness and is in need of such treatment as manifested by evidence of behavior that creates a grave and imminent risk to substantial rights of others or himself.

2. Represents a substantial risk of physical harm to self or others if allowed to remain at liberty pending examination.

Therefore, it is requested that said person be admitted to the above named facility.

STATEMENT OF BELIEF

Must be filled out by one of the following: a psychiatrist, licensed clinical psychologist, licensed physician, health or police officer, sheriff or deputy sheriff.

(Statement shall include the circumstances under which the individual was taken into custody and the reason for the person's belief that hospitalization is necessary. The statement shall also include a reference to efforts made to secure the individual's property at his residence if he was taken into custody there. Every reasonable and appropriate effort should be made to take this person into custody in the least conspicuous manner possible.)

Original - Medical Record, Copy - Suspense File
 DMH 9025 (Rev. 01/11)

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APPLICATION FOR EMERGENCY ADMISSION
 DMH Health 1016

Probate Warrants

- Specialized CIT Officers will serve Probate Warrants
- To be handled in a manner consistent with handling crisis calls

AWOL

- Contact the Hospital individual is AWOL from.
- If Hospital accepts, convey, if possible
- If Hospital does not accept, determine if individual needs psychiatric evaluation.
- Contact MCT for guidance, if necessary

Crisis Intervention Reports/CIT Stat Sheets

- Incident Report with “Crisis Intervention” in the title **and** a CIT Stat Sheet shall be completed whenever officers respond to a crisis call
- Even if individual is not arrested or conveyed to a mental health facility – e.g. counseled and referred to an agency.
- If a Specialized CIT officer is on scene, that officer will do reports
- If no Specialized CIT officer is on scene reports will be completed by another officer on scene

**CLEVELAND DIVISION OF POLICE
/ CRISIS INTERVENTION MENTAL HEALTH/AOD STATISTIC
SHEET**

Date: _____ Time: _____ Incident type: _____
 Incident # _____ Location: _____
 Requested by: CCS Z/C Family Case Worker Fire/EMS Other

SUBJECT:
 Name: _____
 Gender: _____ Race: _____ DOB: _____ SSN: (Last 4) _____
 Best means of contact/locating: _____

CHECK ALL THAT APPLY:
 MH Client Alcohol/Drug Related Homeless Veteran
 Was the subject armed? Yes No Type of weapon: _____
 Injury to Subject? Injury to Officers? Injury to others

TOOLS/TECHNIQUES USED:
 Verbal De-escalation/Crisis Intervention techniques
 Use of Force: Pain compliance Take Down Handcuffs
 ASP OC Spray Taser Other: _____
 UDFIT notified RMS Completed

DISPOSITION:
 Complaint Unfounded Information received / advised Citation issued
 Subject/Incident stabilized requiring no further action Confer w/Mobile Crisis
 Conveyed/Transported to (Facility) _____ By: _____
 Voluntary Non-Voluntary Probated Pink Slipped
 EMS On Scene? Unit # _____ Arrested Charge _____

Name/Address of caller: _____

 Point of Contact (Case worker, Dr., etc.) _____

 Reason for interaction: _____

 Any concerns (safety) whatsoever, for this subject (or) address: _____
 CCS Notified?

Supervisor on scene: Yes No
 Officer(s): Name / Badge # _____ CIT certified
 Name / Badge # _____ CIT certified

Please forward this form only (no staples/reports) to the CIT Coordinator via Divisional Mail.