

## **DEPARTMENT GENERAL ORDER 04-11**

OFFICE of the CHIEF OF POLICE  
REPLACES: General Order 04-01

DATE: April 12, 2004

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### **CRISIS INTERVENTION TEAM**

#### **I. PURPOSE.**

To establish procedural guidelines governing the functions and responsibilities of the department's Crisis Intervention Team.

#### **II. DEFINITIONS.**

CIT Council – A committee comprised of law enforcement officials, court officials, and mental health advocates, responsible for training and policy concerning various Crisis Intervention Teams. The council also serves as a review board that meets to discuss individual cases and formulate recommendations.

Crisis Intervention Team – Sworn officers specially trained and designated to handle crisis situations involving the mental ill.

Mental Health Crisis – A situation where an individual's normal coping mechanisms have become overwhelmed causing that individual to pose an immediate and significant risk to self or others.

Mental Illness – A range of conditions, each with its own specific characteristics to include, but not be limited to:

Schizophrenia	Major Depression
Bipolar Disorder (Manic depressive)	Panic Disorder
Schizo-affective Disorder	Personality Disorder
Obsessive-Compulsive Personality Disorder	
Other mental illnesses that can cause disturbances with others or the environment.	

### III. GENERAL.

The department's Crisis Intervention Team (CIT) shall be composed of specially trained officers whose function is to respond to incidents which involve a mental health crisis, where the officer's specialized skills may be used to successfully conclude such an incident, and to provide future assistance as may be necessary. The long-range objectives of the program shall be to identify individuals suffering from extended bouts of mental health problems and to initiate measures to reduce the frequency of police contacts. Information will be channeled back to the field to promote increased safety for both police personnel and the population at large.

The policies contained in this order shall not supersede the guidelines promulgated in general orders involving the "Use of Force" or the notification process required to request assistance from specialized units (e.g. TACT, hostage negotiation, etc.).

### IV. SELECTION OF CIT OFFICERS.

Members of the Crisis Intervention Team (CIT) will preferably be volunteers with at least one years police experience with the Clayton Police Department, and who possess the following traits:

- Good communication skills.
- Active listening skills.
- Ability to work under pressure.
- Ability to maintain a positive attitude under stressful situations.
- Ability to absorb verbal abuse without negative response.
- Ability in exercising good judgement and decision making.

Team members will be selected following an interview with the designated CIT coordinator and appropriate platoon commander. However, the Chief of Police and/or the commander of the Field Operations Bureau shall possess full authority to reject a specific volunteer if, in their belief, the department would be better served by an alternate candidate.

#### A. Selection of CIT Coordinator

A supervisor assigned to the Field Operations Bureau will be designated to serve as the CIT program coordinator by the bureau commander. This supervisor will then be responsible to:

- Ensure that all CIT slots are appropriately filled.
- That members of the unit receive required training.
- Forward required reports and/or other information through the established chain of command to the appropriate patrol lieutenant.
- Prepare an annual statistical report to be submitted to the Chief of Police.
- Serve as a liaison with mental health and justice services personnel.

## V. OPERATIONS PROCEDURES.

CIT officers will function in a generalist role, responding to routine calls for service when not acting in a CIT or other specialist-type capacity. CIT assignment criteria shall be as follows:

- Attempt suicide calls.
- Disturbance calls involving an individual known or suspected to suffer from mental illness or disability.
- Assault calls involving an individual known or suspected to suffer from mental illness or disability.
- Voluntary and involuntary commitment calls where a police presence is required.
- Check the welfare calls involving an individual or family member where mental illness is known to be present in the household.
- An incident where an individual, known or suspected of suffering from mental illness or disability, is reported to be making threats against themselves or others.
- OBS calls of an undefined nature.

### A. Dispatch Procedures

When communications personnel receive a report of a situation known to involve a mental health crisis, the dispatcher will immediately dispatch two officers to the incident (district and assist officer). The assist officer position shall be filled by a CIT officer whenever possible. Upon the officer's arrival at the scene, a supervisor and/or additional assist units may be dispatched contingent upon initial reports from the first responders.

If communications receives a report of a situation that is not immediately recognized as a mental health crisis, once the first arriving officer determines that a CIT officer is needed, their presence will be requested at the scene.

In the event an adjoining municipality requests a CIT officer assist them with a mental health crisis, the on-duty Clayton supervisor or commander must give prior approval before any Clayton personnel are committed to another jurisdiction. Should manpower levels be such that the deployment of a CIT officer would cause a hardship, the request for assistance will be denied.

Dispatch will document CIT calls in accordance with established procedures.

#### B. Control of Incident Scene

The on-scene CIT officer shall have primary responsibility for the incident scene on any mental health crisis call unless a supervisor is present.

In those cases where a supervisor or commander is present at the scene, the ranking officer shall have primary control over the scene. The CIT officer will then be relegated to the use of his/her specialized skills to successfully conclude the incident.

Officers who respond to an incident where a CIT officer was not dispatched, and determine the call involves a mentally ill or disturbed individual, will request a CIT officer assist at the scene. On the CIT officer's arrival, he/she shall assume control of the scene, contingent upon the above guidelines.

#### C. Responsibilities of CIT officer

Upon arrival at the scene of a mental health crisis, the CIT officer will determine the circumstances and be responsible for the initiation of the appropriate response.

Should the CIT officer determine that the individual involved poses a threat to himself or others, the CIT officer shall be responsible to arrange for transportation.

Upon arrival at a treatment facility, the CIT officer will arrange admission, if feasible, and complete any affidavits that may be required.

In the event an individual is not taken into custody, the CIT officer will be responsible for notifications to be made to mental health professionals for further care of the individual (e.g. Behavioral Health Response).

The CIT officer shall also notify Justice Services of any mental health concerns when an individual is lodged at the Justice Center for a crime.

The CIT officer will complete all appropriate reports and paperwork.

#### D. Responsibilities of CIT Coordinator

The CIT Coordinator will monitor the activities of the officers assigned to the CIT unit. This shall include, but not be limited to:

- Ensuring that CIT officers complete the Crisis Intervention Team Report when applicable, and that each team member maintains a file of his/her individual CIT reports.
- Making certain that CIT officers conduct follow-up investigations on cases investigated by them, as necessary.
- Ensuring that CIT officers make warrant applications, as necessary.
- Overseeing the assignment of CIT officers to attend CIT Council-Review Board meetings, as requested.

In addition to the preceding, the CIT Coordinator shall be responsible to establish and maintain a central file containing all CIT Reports. These shall be indexed by year and case number, and maintained in accordance with Missouri State Statutes governing records.

The CIT Coordinator will review CIT files each month and produce a monthly statistical report which shall be placed in the CIT central file. Other copies will be forwarded through the chain of command to the commander of the Field Operations Bureau and the CIT Council. The coordinator will flag any specific issues that may require special attention.

#### E. Transportation Procedures

Sworn personnel will transport individuals suffering from a mental health crisis in accordance with guidelines established in Departmental General Order: "Transportation of Sick, Disabled or Injured Prisoners."

#### F. Report Procedures

The officer initially assigned the call shall routinely be responsible to complete the original incident report in regard to the assignment.

The CIT officer shall generally be responsible for the completion of a CIT report, a supplemental report, and any and all forms associated with the admission of the individual into a treatment facility (if required). CIT officers shall also have primary responsibility for any notifications made to mental health professionals. Should a warrant application be required, the CIT officer will be responsible to perform same, except in cases where CID has taken over the investigation.

In each case where a felony offense has been committed by an individual in a mental health crisis, no attempt at diversion will be initiated and routine warrant application will be made. In those instances where a misdemeanor offense or ordinance violation has been committed by an individual in a mental health crisis, warrant application may be made or the case may be referred to the Mental Health Court. The direction chosen will be contingent upon the type of offense and other relevant circumstances.

When a CIT officer is unavailable during a mental health crisis assignment, responding officers will be responsible to complete the original incident report, the CIT report, and provide any immediate assistance available to the individual involved. The responding officer will notify their supervisor of the incident, who will ensure that the appropriate CIT officer is apprised of the event at the earliest possible time. The CIT officer will then assume responsibility for the incident and make such contacts, and complete those supplemental reports that may be required. The CIT officer will also be responsible for warrant application, if any.

#### VI. REFERRAL OF CIT CASES TO MENTAL HEALTH COURT

As feasible, attempts will be made to divert individuals believed to suffer from mental illness, and who are taken into custody for a minor ordinance or misdemeanor offense, away from the criminal justice system in favor of the Mental Health Court. Guidelines for such referrals are as follows:

No felony offenses shall be directed to the Mental Health Court.

Cases involving domestic violence with no or a very minor injury, without a past history of violence, or threats of future violence, may be directed to the Mental Health Court. Cases which involve escalating violence, or those cases involving parties with a history of violence (with injury) should not be referred to the Mental Health Court, unless directed to do so by the St. Louis County Prosecuting Attorney's Office.

Certain misdemeanor offenses, as well as city ordinance violations (stealing, peace disturbance, trespassing, etc.) may be directed to the Mental Health Court, if in the view of the CIT officer/CIT coordinator the individual meets the health court criteria, and can best be served in that forum.

**It must be noted however that the client must agree to allow the case to be handled through the Mental Health Court.**

The CIT officer will notify his/her supervisor and the CIT coordinator of the need for a referral. The CIT coordinator will then notify the St. Louis County Counselor's Office via e-mail (retaining a copy for their records) of the incident's report number. The contact person in the County Counselor's office can be reached at the following e-mail address: First Initial/Last Name@stlouisco.com or by public service. (The St. Louis County Counselor's Office has access to CARE reports, so the CIT coordinator need only e-mail the report number.) The counselor's office will confirm that the report number was received, and will advise whether the Mental Health Court will entertain the case. The CIT coordinator is responsible for checking on the status of any reports not confirmed by the county counselor's office.

The CIT coordinator is authorized to direct all appropriate cases to the Mental Health Court, and need not notify the City of Clayton Prosecuting Attorney of the incident.

Should an individual be involved in a more serious offense where the defendant presents a threat to their own or others physical well-being, department personnel will proceed to process and place the individual according to established procedure. This will include recording a written warning on the booking sheet to criminal justice or mental health personnel who may come into contact with the individual. Upon delivery of the individual to the justice center, another law enforcement agency, or a mental health facility, the officers will also verbally warn the receiving staff of the potential threat. In cases where diversion took place, CIT officers will initiate periodic contact with the defendant's family, and provide such follow-up services as may be needed.

BY ORDER OF:

THOMAS J. BYRNE  
Chief of Police

TJB:dld

CALEA Reference: 1.1.3/1.2.6