DEPARTMENTAL GENERAL ORDER 20-086

ST. LOUIS COUNTY POLICE DEPARTMENT OFFICE OF THE CHIEF OF POLICE

October 14, 2020

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CIT Crisis Intervention Team
CIU Crisis Intervention Unit
CMHL
Emotionally Disturbed Person
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Mental Illness

Cancels: General Order 18-86

CRISIS INTERVENTION TEAM (CIT) PROGRAM

I. PURPOSE

The purpose of this General Order is to establish policy concerning the functions and responsibilities of the **Crisis Intervention** Unit **(CIU)** and Crisis Intervention Team officers.

The policies contained in this Order do not supersede those outlined in general orders involving use of force or the notification of specialized units for incidents where the situation mandates such a notification (**e.g.**, notifications to the Bureau of Crimes Against Persons, Tactical Operations Unit, etc.).

II. POLICY

The purpose of the St. Louis County Police Department **Crisis Intervention** Unit is to equip officers with the training, skills, methods, and tactics to safely de-escalate incidents involving persons in a mental health crisis. The mission of the **Crisis Intervention** Unit is to promote wellness and acceptance of those in the community who are **living with** mental illness and substance use, **as well as** to work collaboratively with community partners to divert persons in need from the criminal justice system to the community's system of care.

III. DEFINITIONS

- A. <u>Affidavit</u> DMH 142 is the affidavit form used for mental health involuntary commitments and becomes part of the court file and medical record. It is a handwritten statement of facts observed first-hand by the writer used to address issues of the suspected or observed mental disorder and the likelihood of serious harm.
- B. <u>Computer Assisted Report Entry(CARE)</u> A web-based computer program used for writing and maintaining police reports but also to collect statistical data for crime analysis.
- C. <u>CIT Coordinating Council</u> A council, comprised of law enforcement officials, court officials, mental health advocates and community behavioral health providers, responsible for training and policy concerning the Crisis Intervention Team.
- D. <u>CIU Supervisor</u> An employee who is responsible for the management and coordination of the CIT program. The **CIU Supervisor** participates in efforts of assisting, implementing, and sustaining **the** CIT as a community program. The **CIU Supervisor** acts as a liaison representing law enforcement and other community partnerships including local hospitals and behavioral health agencies. **The CIU Supervisor is also the coordinator the Crisis Negotiation Team.**
- E. <u>CIT Officer</u> A specially trained employee whose function is to respond to incidents involving mental health crisis where the officer's specialized skills may be used to

successfully **de-escalate and** conclude an incident and to provide further assistance beyond the actual call.

- F. <u>CIT Reporting System</u> An online computer application allowing officers to enter and track CIT incidents.
- G. <u>Computerized Case Management System</u> A computerized system where employees document cases assigned to them and where supervisors manage and monitor activity on cases assigned to employees they supervise.
- H. <u>Civil Involuntary Detention (CID)</u> A legal intervention by which a judge may order a person with symptoms of serious mental disorder and who presents a likelihood of serious harm to self or others, be evaluated by a medical doctor for admission to a mental health facility. This may include verbal threats, attempts, patterns of behavior that have historically resulted in harm and/or a reasonable fear of harm.
- Community Mental Health Liaison (CMHL) Additional resource for the Emotionally Disturbed Person, his/her family, and law enforcement. CMHL provides suggestions and direction toward appropriate health care providers. CMHLs assist the CIU and CIT Officers in follow-up investigations.
- J. <u>Emotionally Disturbed Person (EDP)</u> A person who exhibits behavior(s) which appear likely to be injurious to themselves or others whose behavior(s) are causing, or may cause, significant impairment or distress in social, occupational, or other important areas of functioning.
- K. <u>Employees</u> All commissioned and professional staff members, chaplains, and any other individual operationally attached to the Department, to include contractors and task force members. The definition is solely used for convenience of reading this policy and is not meant to establish an employment relationship with any individual(s) where such a relationship does not otherwise exist.
- L. <u>Mental Health Crisis</u> A situation where an individual is in a state of mind where they are unable to cope with and adjust to the recurrent stresses of everyday living in a functional, safe way (e.g., EDP, violent EDP, suicidal subject, etc.).

IV. CRISIS INTERVENTION UNIT RESPONSIBILITIES

- A. Develop and present basic and advanced training to law enforcement officers to better equip officers to respond to situations involving EDPs.
- B. Work with mental health providers to ensure individuals with mental health disorders are connected with appropriate resources.
- C. Work cooperatively with hospitals, community health providers, substance abuse providers, and community organizations to educate them about the CIT Program.
- D. Act as a liaison between the County and State Diversion Courts (e.g., Mental Health Court, Drug Court, Veterans Court, etc).
- E. Work with CMHL to follow up with individuals who have mental health disorders and have had contact with law enforcement.
- F. Review CIT reports and **Computer Assisted Report Entry (CARE)** reports to identify individuals in need of follow-up care. Follow-up care includes, but is not limited to, providing the individual with community resources, health care providers, community outreach organizations, and CMHL.

- G. Work with local resources to better ensure individuals living with mental health disorders receive options for on-going treatment and support.
- H. Reduce the stigma associated with mental health and substance use disorders.
- I. Work with cooperating agencies to expand use of CIT principles throughout Missouri.
- J. Assist the Bureau of Tactical Support with crisis negotiations.
- K. Provide **crisis intervention and** high-risk behavior assessment within the Department's jurisdiction and through assistance to the FBI's **Violent Crime** Task Force.
- L. Conducts follow-ups with family members or friends of those who died by suicide within St. Louis County jurisdiction. This is to offer wellness resources to the survivors.

V. SELECTION OF CIT PERSONNEL

- A. Precinct/Bureau commanders shall have primary responsibility of the selection of CIT officers and supervisors within a work element. Precinct/Bureau commanders shall ensure an adequate number of officers are CIT trained in order to respond to all CIT related calls for service.
- B. CIT officers chosen to attend the 40-hour training shall be those demonstrating strong communication and problem-solving skills who have a willingness to invest the time to connect individuals with mental health and substance use disorders to resources.

VI. PROCEDURE

A. Dispatch of Call

- 1. When the Bureau of Communications receives a report of a situation that is known to involve a mental health crisis, the dispatcher shall immediately dispatch the two closest beat officer(s).
 - The closest available CIT officer shall then be located and directed to respond to the call.
 - b. If the closest CIT officer is from a contract municipality, prior supervisor approval is required.
- 2. If the first arriving officer determines a CIT officer is needed, that beat officer shall immediately request a CIT officer to respond.
- 3. On-duty CIT officers in adjoining precincts may be utilized if the precinct responding to the call has no CIT officers on-duty/available and a supervisor in each **of the affected** precincts is notified by the Bureau of Communications. Supervisors of adjoining contract municipalities shall have discretion regarding whether a CIT officer will be sent out of the municipality to respond to a CIT call.
- 4. When an officer is dispatched to a call that was not originally classified as a "VEDP" or "EDP", and it is determined to be a CIT case requiring a CIT report, the officer shall request the nature be reclassified to "CIT" and provide the disposition of "Supplement 10-8". A CIT report shall be completed to document the interaction.

B. Control of Scene

1. The CIT officer with case responsibility shall maintain scene responsibility unless a supervisor is present.

2. In cases where a supervisor is on the scene along with a CIT officer, the supervisor shall have primary control of the scene. The CIT officer will have no further control of the scene beyond the use of his/her specialized skills to successfully conclude the incident.

C. Responsibilities of the CIT Officer

- The primary responsibility of the CIT officer on the scene is to use his/her specialized skills for the successful conclusion of the incident. Upon arrival at the scene of a mental health crisis, the CIT officer will determine the circumstances and shall be responsible for the initiation of the appropriate response.
- If the CIT officer determines that the individual involved is a danger to him/herself or others, the CIT officer shall have primary responsibility to arrange for transportation.
- Procedures outlined in the General Order 035, "Treatment and/or Transportation of Sick or Injured Persons", shall be followed when transporting an individual who was involved in a mental health crisis.
- 4. Admission to a treatment facility shall be arranged by the CIT officer.
 - a. The CIT officer may be required to write **an** affidavit(s).
 - b. CIT officers shall follow procedures outlined in General Order 035, "Treatment and/or Transportation of Sick or Injured Persons" when admission to a treatment facility is required.
- If the individual is not a danger to him/herself or others and therefore will not be taken into protective custody or taken into custody for a crime committed, the CIT officer will be responsible for notifications which shall be made to mental health professionals for further care of the individual (e.g., Behavioral Health Response-Mobile Outreach, CMHL).
- 6. It shall be the primary responsibility of the CIT officer to notify the Department of Justice Services (DJS) of any mental health concerns when an individual is being held for a crime committed. DJS is responsible for the initiation of providing mental health services to that individual while in DJS custody.
- 7. If it is determined that information concerning an individual should be entered into the CAD Alert File, this is the primary responsibility of the CIT officer. Procedures contained in the General Order 028, *Evaluation/Priority Assignment of Calls for Service*, should be followed when entering the individual into the CAD Alert File.
- 8. CIT officers will maintain responsibility for CIT reports in case management unless the **CIU Supervisor** is notified and agrees to take case responsibility.

D. Reporting Procedures

- A CARE report shall be completed for the following CIT calls for services:
 - a. Attempted suicide/self-harm; or
 - Any situation which requires a Civil Involuntary Detention (CID); or
 - c. Any situation where a supervisor deems it necessary.
- 2. If the officer is assisting the Sheriff's Office with a Mental Health Court warrant or a Probate Court Civil Commitment, a CARE report is not required, unless noteworthy circumstances exist.

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- 3. The primary beat officer shall have responsibility for completing the original **CARE** report concerning the call.
- 4. The CIT officer shall have responsibility for completing the CIT report through the Heads-Up Display dashboard (HUD), supplemental CARE reports, and completing any forms needed for the admission of the individual into a treatment facility.
 - a. The CIT Report ID number, indicating the reports completion, shall be documented in the narrative section of the supplement CARE report, if a CARE report was completed. If no CARE report was completed, the CIT Report ID number shall be documented in the Remarks Section of the CIT officer's Daily Activity Sheet.
 - b. If an Affidavit was completed for a CARE report, the CIT officer shall scan the Affidavit and include it as an attachment to the CARE report.
 - c. If warrant application is to be made on the individual, this shall also be the responsibility of the CIT officer.
 - d. No warrant application by a CIT officer shall supersede that of units that may have further responsibility for the incident (i.e., Burglary Unit, Domestic Violence Unit, etc.).
- 5. Precinct/Bureau supervisors shall be responsible for reviewing/approving Crisis Intervention Team Reports entered in **the CIT Reporting System** for all incidents occurring within their area of responsibility.
- 6. Precinct/Bureau supervisors shall be responsible for notifying the **CIU Supervisor** of both positive and negative incidents involving behavioral health providers.
- 7. In cases where a CIT officer was not available during a CIT call, beat officers shall complete the original incident report (if necessary) and provide any immediate assistance available to the individual involved. The beat officer shall notify **their** watch commander of the call.
 - a. The watch commander shall ensure that a CIT officer is notified concerning the call; and
 - b. The CIT officer shall handle further responsibilities including supplemental reports, the CIT Report, further notifications involving care for the individual, and warrant application.

E. Warrant Application Procedures- County Counselor's Office

Whether a crime committed by an individual in a mental health crisis is considered a felony, misdemeanor, or ordinance violation, warrant application is required. Arrest Notification **Summons** are not authorized.

- 1. **Officers shall** submit **the** case to their supervisor via Case Management for ordinance violations to be reviewed by the St. Louis County Counselor's Office.
- 2. Supervisors shall complete the following steps in Case Management to submit cases to the County Counselor's Office:
 - 1.) Click "Update"
 - 2.) Work element "County Counselor"

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- 3.) Assignment Status "Active"
- 4.) Assignment Type "CIT Warrant Application County Counselor"
- 5.) Additional Information (the word "CIT" will auto populate)
- 6.) Click "Save"
- 3. Once the case is sent to the County Counselor's Office for review, the officer shall complete a CARE warrant screen in the police report indicating that the case was submitted to the County Counselor's Office.
- 4. Upon determining the disposition, the County Counselor's Office will send the case back through Case Management with the assignment type CIT Warrant Disposition County Counselor.
- 5. The officer shall then complete a CARE warrant application disposition screen on the next duty day after receiving notification of the disposition.

F. Warrant Application Procedures - Prosecuting Attorney's Office

Whether a crime committed by an individual in a mental health crisis is considered a felony, misdemeanor, or ordinance violation, warrant application is required. Arrest Notifications are not authorized.

- 1. Officers shall submit the case to their supervisor via Case Management for review by the Prosecuting Attorney's Office.
- 2. Supervisors shall complete the following steps in Case Management to submit cases to the Prosecuting Attorney's Office:
 - 1.) Click "Update"
 - 2.) Work element "St. Louis County Prosecuting Attorney"
 - 3.) Assignment Status "Active"
 - 4.)Assignment Type "CIT Warrant Application St. Louis County Prosecuting Attorney"
 - 5.) Additional Information (the word "CIT" will auto populate)
 - 6.) Click "Save"
- 3. Once the case is sent to the Prosecuting Attorney's Office for review, the officer shall complete a CARE warrant screen in the police report indicating that the case was submitted to the Prosecuting Attorney's Office.
- 4. Upon determining the disposition, the Prosecuting Attorney's Office will send the case back through Case Management with the assignment type CIT Warrant Disposition St. Louis County Prosecuting Attorney.
- 5. The officer shall then complete a CARE warrant application disposition screen on the next duty day after receiving notification of the disposition.

VII. PROGRAM AWARENESS

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The following programs exist in order to assist those who suffer from mental illness with resource assistance when alleged to have committed ordinance violations:

- A. The Mental Health Docket of the St. Louis County Municipal Court System and the State of Missouri Court System are specialized dockets. If the County Counselor's Office or the Office of the Prosecuting Attorney receives information indicating a defendant possibly suffers from mental illness, his or her charges may be placed on the Mental Health Docket. This docket strives to give intensive court supervision.
- B. The Jail Diversion Project is a program available to certain defendants who go through the intake process of the St. Louis County Justice Center. If the jail's intake staff becomes aware that a prisoner possibly suffers from a mental illness, the defendant may be placed in the Jail Diversion Program. The Jail Diversion Program aims to decrease jail time, have less punitive dispositions, and reduce recidivism.

Attachments: Family Resource Guide	
Adopted by Command Staff.	By order of:
MB:km	COLONEL MARY T. BARTON Chief of Police
Approved at the regular Board of Police Commissioners meeting on October 14, 2020.	
Commissioner Chairman	Commissioner Secretary
<u>Distribution</u> All Department Personnel	

CALEA Reference 1.1.3; 41.2.7