



# CRISIS INTERVENTION TEAM (CIT)

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## I. DEFINITIONS

*Anne Arundel County Crisis Response System – Part of the Anne Arundel County Mental Health Agency, Crisis Response, is a comprehensive system of care to provide assistance to consumers with mental health issues, when they are in crisis and in pre-crisis. There are numerous components to the system including but not limited to: Warmline, Mobile Crisis Teams, Mobile Treatment, Hospital Diversion, Jail Diversion, In-Home Intervention Teams, Transportation, Emergency Departments, Residential Crisis Services, Crisis Intervention Teams, Urgent Care, Safe Stations and Care Coordination.*

**Crisis Intervention Team (CIT) Unit** - *The unit consists of teams of one Anne Arundel County police officer and one Anne Arundel County Crisis Response Clinician. The officer is trained in the 40-hour Memphis Model of CIT Training, as well as both Individual in Crisis and Group Crisis Intervention through ICISF (International Critical Incident Stress Foundation). The CIT Unit conducts follow-up for consumers with mental health issues referred to them and responds to traumatic events within the community. The CIT Unit is housed at Anne Arundel County Crisis Response and is part of the larger Crisis Response System.*

**CIT Law Enforcement Coordinator** - Anne Arundel County Police Officer holding the rank of Sergeant or above (or as designated by the Chief), who is responsible for all administrative, planning, training, coordinating, and selection of the officers for the Crisis Intervention Team.

**Behavioral Health Coordinator** - Anne Arundel County Mental Health Agency (AACMHA) employee who is responsible for overseeing the clinical coordination for the client and selection of the clinician who will be assigned to the Crisis Intervention Team.

**CIT Officer** - A member of the Anne Arundel County Police Department who has completed 40 hours of *the Memphis Model of CIT Training. The officer does not have to be assigned to the CIT Unit. It is expected that CIT Officers will routinely use their training, knowledge and skills to assist mental health consumers and developmentally delayed adults. CIT Officers are a link to Mobile Crisis Teams, the CIT Unit and community resources.*

**CIT Clinician** - An employee of the Anne Arundel County Mental Health Agency who is a licensed clinician.

**Consumer** - *A person with a mental health issue.*

**Crisis Intervention Training** - A specialized course of instruction which provides training to law enforcement officers on responding to *and assisting consumers with mental health issues, individuals with developmental disabilities, and those with substance use addiction. The training is based on the 40-hour Memphis Model CIT training.*

## **II. PURPOSE**

*CIT is a culture of helping, as part of the Department's community policing model, integrating mental health throughout the police department by utilizing the strengths of Anne Arundel County Crisis Response. CIT trained officers are expected to use their training whenever possible in the course of their duties.*

*CIT officers should respond to calls for service to utilize their training and passion to help when they recognize the issue is caused by substance abuse or a mental health concern. CIT officers will assist persons and families in crisis, in the community, and attempt to restore them to a pre-crisis level. CIT officers will refer the person or family to the MCT, the CIT Unit or a community resource for follow-up.*

The Crisis Intervention Team (CIT) *Unit* is an *integration* between police and mental health professionals to help redirect individuals with mental *health issues* from the judicial system to the health care system. The target population is *consumers* with *mental health issues* who would benefit from mental health *and/or substance abuse* intervention or linkage to additional community resources. *The community policing goal is prevention. When the consumer is linked to appropriate community resources, they are then supported and less likely to be involved in inappropriate or criminal behavior.*

Outcomes of CIT interventions include:

- A. *Providing safer interactions between officers and consumers.*
- B. Redirecting clients with mental *health issues* from the judicial system to the health care system.
- C. Improve outcomes of police interactions with people with mental *health issues*.
- D. Reducing the number of repeat calls for service for persons with mental *health issues*.
- E. *Improve community quality of life by reducing incidents in which someone with mental health issues commits criminal acts.*
- F. *Reduce incarceration of consumers.*
- G. *Reduce recidivism by adult and juvenile consumers with mental health issues.*

## **III. REQUESTS FOR THE CRISIS INTERVENTION TEAM**

### **A. Types of Calls**

*Generally, the CIT Unit provides follow-up to mental health consumers, those with developmental disabilities, and substance abuse addiction based on referrals.*

*Referrals can be for the following situations:*

- 1. Repeat callers to 911 who are identified *as mental health consumers*.
- 2. *Consumers* who are identified as high utilizers of the public mental health system.
- 3. Persons with known mental *health issues* disconnected from services and causing concern in the community.
- 4. Suicidal attempts and completions.
- 5. Runaways *and missing persons (working in conjunction with investigators) who are missing due to mental health issues.*
- 6. *Mental health consumers* at high risk of becoming involved in the judicial system.
- 7. Provide resources and support to families and victims of traumatic events.
- 8. Death notification for traumatic events such as murders, suicides, and major accidents.
- 9. *Suspects whose crimes are due to their mental health issues*
- 10. *Follow-up to emergency petitions where the consumer is also charged with a crime.*
- 11. *Mental Health Consumers who are at high risk of becoming involved in the judicial system.*
- 12. *Homelessness.*
- 13. *Consumers whose perceived victimization is due to their delusional thinking.*
- 14. *Victims who are victims due to their mental health issues.*

15. *Schools needing assistance with students and/or families with mental health issues and in crisis when a parent cannot be located to give parental permission for a Mobile Crisis Team.*
16. *To assist a mental health consumer, which due to the consumer's history of violence or substance abuse, it would not be safe for a Mobile Crisis Team to respond.*
17. *Follow-up on Juvenile Citations in which the behavior is due to a mental health issue. Referrals can be from patrol, specialized units, or the juvenile/witness program director.*
18. *Safe Station clients attempting to obtain substance abuse treatment with a criminal history, which is creating a roadblock into obtaining treatment.*
19. *Working in conjunction with HSI for assessment and follow-up from threat complaints.*
20. *As the CIT Unit is part of the Anne Arundel County Police Department, it is also a part of Anne Arundel County Crisis Response System. There are times that a client may receive assistance from other parts of Crisis Response and the CIT Unit is asked to provide assistance. Requests for assistance and referrals can come from any part of the Crisis Response System including but not limited to: Operations, Mobile Crisis Teams, Hospital Diversion, Jail Diversion, and Care Coordination.*
21. *Consumers and their family members can call into the 24/7 Crisis Response Warmline for assistance.*

**B. Request for Service**

*In most calls for service, patrol officers should first call for a Mobile Crisis Team for assistance. Exceptions are active barricades, active shooters, or any other extreme call, in which a CIT Unit officer can provide assistance that a Mobile Crisis Team cannot provide. If there is a question between a Mobile Crisis Team or a CIT Unit responding, the officer or supervisor should call the Warmline (410-768-5522) and speak with a CIT member.*

**IV. SCENE OPERATIONS**

A. Based on the advanced level of mental health training, the first arriving CIT Officer on scene of a mental health crisis will assume command of the scene, ***regardless of post assignment***. The CIT Officer will have control over a crisis scene involving a person in mental health crisis, unless relieved by a supervisor ***or a CIT Unit Officer***.

B. Responsibilities at the scene for the CIT Officer and clinician are to coordinate other personnel to effectively bring about a safe and appropriate disposition. The goal is to establish, develop and implement safe, proactive and preventive methods of containing emotionally explosive situations that could lead to violence.

***The CIT Officer is responsible for their safety, their clinician partner's safety, the consumer's safety, as well as the safety of a Mobile Crisis Team when they are on scene.***

C. The CIT Clinician will not place hands on or intervene physically with members of the community. In situations where physical intervention is required, the CIT Officer will respond appropriately and request additional police resources as needed. If an officer is in imminent danger and requests assistance verbally or nonverbally, the CIT Clinician may provide assistance.

D. CIT members are trained in scene safety and are required to follow CIT safety procedures while in the field.

E. CIT members will not leave the scene until the situation is stabilized and a disposition is determined.

F. Possible dispositions include:

1. Stabilization with a crisis plan
2. Referral to next day service
3. Referral to long term service
4. Transport to a program or shelter
5. Transport to the Emergency Room voluntarily
6. Contact with provider involved in client's treatment
7. Placement in a crisis bed
8. Placement in emergency shelter
9. Emergency Petition

**V. SPECIAL SITUATIONS**

A. Hostage negotiations may be supported under the direction of the Special Operations Division if a request for assistance is made. CIT may be used to assist the Conflict Negotiations Team during barricade/hostage negotiation incidents.

B. Death notification, *community* and bystander assistance at traumatic events will be *coordinated by the CIT Unit following the practices and procedures of CISM (Critical Incident Stress Management) from ICISF (International Critical Incident Stress Foundation)*.

C. Additional support to family or bystanders may be offered at the scene of a suicide or death.

D. Coordination of service will occur with Domestic Violence, *Social Services*, Adult and Child Protective Service, Department of Disability Services, Juvenile *Services*, Geriatric Services, *the Public Defender's Office, the States Attorney's Office, Anne Arundel County Schools*, and other community agencies.

**VI. PROPONENT UNIT:** Bureau of Patrol.

**VII. CANCELLATION:** *This directive cancels Index Code 1611.1, dated 08-28-14.*