I. Introduction

A. Recognizing that handling mentally ill individuals in crisis can be difficult, the Division of Police has created a Crisis Intervention Team (CIT). These officers will be the first to respond, when available, to handle calls involving mentally ill individuals and to assist other officers when necessary.

B. The CIT is a collaboration between the Division of Police and mental health professionals and advocates in Franklin County. The training revolves around knowledge of the symptoms of mental illness, verbal interaction with those who are in crisis, and the transport of individuals in crisis to the proper location for stabilization and assistance.

II. Definitions

A. Crisis Intervention Team (CIT)

A team composed of Patrol personnel, along with selected non-Patrol uniformed personnel, trained to handle mental illness runs. Team members are identified by a uniform pin with the letters “CIT” worn in the location designated for unit insignia.

B. CIT Officer

A sworn employee holding the rank of officer or sergeant who has successfully completed the CIT Core Training Course and is a member in good standing with the CIT.

C. CIT Coordinator

A sworn employee holding the rank of lieutenant or higher who has been charged with administering the CIT program. The CIT Coordinator selects CIT members.

III. Guidelines

A. Characteristics of Potential Mental Illness

1. Unusual or bizarre behavior
2. Confused or nonsensical verbal communication
3. Hostility toward and distrust of others
4. Unreasonable/abnormal fears
5. Signs of depression
6. Withdrawn behavior and refusal to speak
7. Irrational lack of cooperation
8. Irrational tendency to argue
9. Talking to a hallucination or being influenced by a hallucination
10. Severe changes in behavioral patterns and attitudes

B. Interacting With Mentally Ill Individuals
1. Division personnel should:
   a. Be helpful and professional
   b. Remain calm and avoid overreacting
   c. Indicate a willingness to understand
   d. Speak simply and briefly, move slowly if possible
   e. Be friendly, patient, accepting, and encouraging, but remain firm
   f. Recognize that the person may be overwhelmed by sensations, thoughts, frightening beliefs, sounds (voices), or the environment
   g. Remove distractions, upsetting influences, and disruptive people from the scene
   h. Be aware that the uniform, gun, handcuffs, and baton may frighten the person with a mental illness, so reassure the person that no harm is intended
   i. Recognize and acknowledge that a person’s delusionary or hallucinatory experience is real to him/her

2. Division personnel should avoid:
   a. Moving suddenly, giving rapid orders, or shouting (unless absolutely necessary)
   b. Trying to force a discussion
   c. Direct, continuous eye contact
   d. Touching the individual (unless necessary for safety)
   e. Crowding the individual
   f. Expressing anger, impatience, or irritation
   g. Assuming that an individual who does not respond cannot hear
   h. Using inflammatory language around the individual
   i. Challenging or validating delusional or hallucinatory statements
   j. Misleading the individual to believe that personnel think or feel the same way

C. Interviewing or Interrogating Mentally Ill Individuals
1. Question the individual in a calm setting, free of distraction, and ensure that the person has access to:
   a. Water
   b. Food
   c. Toilet facilities, and
   d. Prescribed medications as needed
2. The U.S. Constitution requires that Miranda warnings be comprehended, not simply administered. An individual’s constitutional rights are not diminished because of his/her mental illness.
   a. Before interviewing a suspect who has, or is believed to have, a mental illness, make every effort to determine to what extent the person’s illness impairs the ability of the individual to comprehend and give informed consent.
   b. Contact a supervisor if doubt exists regarding a suspect’s capacity to understand the Miranda warnings.
   c. If appropriate, obtain the assistance of a mental health professional or attorney in explaining the warnings to the individual.

D. CIT Officer
1. If available, volunteer to take runs dealing with mentally ill individuals.
2. Complete the CIT Statistics Sheet and forward it to the CIT Coordinator as soon as practical.

E. CIT Coordinator
1. Accept applications from potential CIT officers.
2. Select team members after considering the following factors:
   a. Prior or pending disciplinary actions
   b. Assignment within Patrol zones
   c. Assignment by shift
   d. Seniority
   e. Prior training and/or experience in dealing with mental health issues
3. Provide the CIT Core Training Course to those selected to join the CIT.
4. Provide additional training as needed or requested.
5. Maintain team member roster and keep team strength within selected parameters.
6. Gather and compile statistics on responses by CIT officers and prepare a semiannual report for the Chief of Police, which includes the following statistics:
   a. Runs involving mentally ill individuals in crisis handled by CIT officers
   b. Comparison of runs resolved through use of verbal skills vs. action-response to resistance/aggression
   c. Disposition of runs