Community Crisis Intervention Team

Working with Persons with Brain Disorders & Crisis De-escalation

"Best Practice" in working with persons in crisis



MAY 16, 2019

GREEN BAY POLICE DEPARTMENT, GREEN BAY, WI

BARB GERARDEN & ERIN BLOCH

Objectives ..

- What is Memphis Model CIT & CIP
- What are Police doing to improve Crisis Response
 - **CIT** Training
 - **OCreating Partnerships**
 - **OJail Diversion**
 - **oFull-Time Behavioral Health Officers**





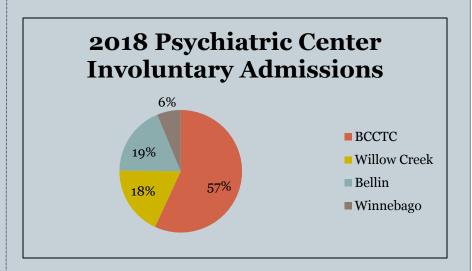
The History of CIT

- Started in Memphis in 1988
 - **A** result of tragedy
- ■Update Wisconsin Started 2004
 - More than 1000 CIT officers at more than 65 agencies across the state
 - Started in Green Bay in 2006
 - Over 59 Officers Trained
 - **2** Full-Time Behavioral Health Officers
 - Getting a Full-Time Clinician

2018 Emergency Detention Summary

- 4
- 25 -Trips to Winnebago (Increased in 2018 by 4)
- 63% under 3 hours police custody time (Improved by 13%)
- 69% Required MC (Increased from 63%)
- 100 juveniles EM1's (Increased 25%)
- 9 Veterans Identified (Decreased)
- 34 Involving weapons (Decreased)
- 63 Intoxicated (Increased)
- 49 Homeless Identified (Decreased)
- 45 People had more than 1 ED 10%
- 14 People identified as chronic with more than 3 ED's in 2018
- 2 People had over 4 ED's in 2018
- Greatest opportunity to reduce ED's & police hours in 2019 will be in the ER's promoting voluntary and crisis evaluation before completing EM1 paperwork. About 30 EM1's were voided after admissions to medical facilities in 2018.

	Emergency Detentions	Ave Officer's Time	Winnebago Trips
2016	595	7.4	31
2017	495	4.9	21
2018	394	3.2	25



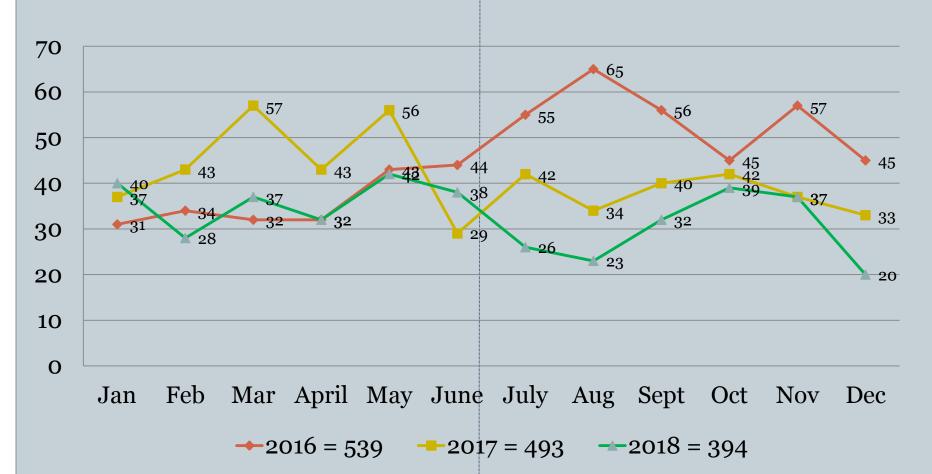
Emergency Detentions 2018



ED's History (2016 – 2018)



GBPEmergency Detentions



Created by: GBPD Behavioral Health Officer

Homeless Outreach

- GBPD initiative to prevent unsheltered deaths
- Community donated money for vouchers
 - o Used 59 vouchers in 2018 at Village Inn Motel
 - Most used for families unable to access local shelters
 - Used 15 in 2019 YTD
 - o Patrol & HOT Team Tool

Unsheltered Deaths	
2016	1
2017	4
2018	0*

^{*}Possibly 1 unsheltered death. Pending open investigation outcome.



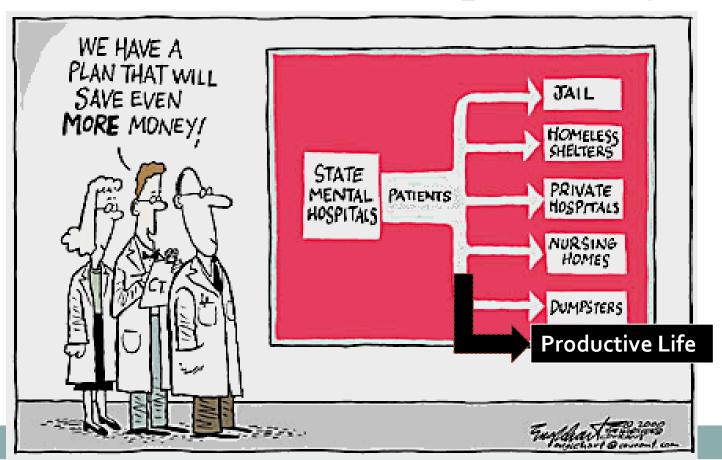
Community Outreach (All of Brown County)

- Monthly meetings with Community Partners serving our homeless population working on a better continuum of care within all county systems
- Total number of homeless in the county on the prioritization list eligible for housing as of December 10th 2018:
 - × 216 single adults
 - × 200 families
- Total number of homeless that were served in programs which includes shelters, transitional living, motel vouchers and housing programs as of **October** 31st 2018
 - × 496 people
- The current number of homeless veterans listed as of **Oct 31**st, **2018**:
 - × 18 People





Decentralization of MH services since the 60's left us with a shifted responsibility





Why CIT?

- •Growing percentage of calls involving mental health issues
 - National estimate crisis calls = 10%
 - National estimate of 40% of all calls
- Access to MH services Shortage of Psychiatrist
- Insurance limitations
- •Are any of these likely to change soon?

Core Outcomes of CIT



- Reduce incidents of injury to officers and others
- Reduce repeat patrol calls for service to mental health consumers
- © Enhance the working relationship of patrol officers with MH providers
- Increase involvement of family and friends of MH
 consumers as a crisis response alternative



We have learned that CIT completes "The Circle of Care"

Health Care Systems

Crisis Services

Veteran Services

Dispatchers

CBRF / Providers



EMS / First responders

Support Agencies – Schools, churches, interpreters

Family & Friends

NAMI

Criminal Justice

Police, Corrections & DA's office

Behavioral Health Officers

- Dispatched/Respond to Crisis Calls
- ⇒ Officer Referrals Review Crisis Calls & follow up
- **AODA & Homelessness**
- Family & Citizen referrals
- Liaison Community partners
- Community Outreach
- Community Partnerships



BHO Dispatched/Call Response

- Check & Update FI
- **Engage Case Workers**
- **Explore Voluntary Options & Safety Plan**
- Mobile Crisis Response
- Develop Relationships
- Communication Police & Partners
- Potential for Emergency Detention (Ch.51 or 55)
- Arrest is always a last resort and avoided if possible
- Example jumping a patrol call successful intervention



BHO Follow ups

Field Intelligence

- Emergency contact info
- Known diagnosis treatment providers
- Case managers name & contact info
- De-escalation tips
- ⇒ Vehicle information − Important when in Crisis or have Dementia

Premise notes

- Medical concern
- Caution indicators
- **Emergency contacts**
- Triggers or Tips



BHO Follow ups

- Corona Alerts monitoring concerns
 - Over 600 people
- Referrals Outside Agencies
 - Micah Center, APS, CPS, Veteran Services, ADRC, Case Workers (Homeless & County Services), NAMI, Gathering Place, Bellin Psych, Willow Creek, BCCTC, Crisis, Specialty Courts, Defense Attorneys, Juv. Intake, CABHU, SROs, Youth Coordinator, POST, Curative, Guardians, Dementia Care Specialist, Autism Society, AODA services, CBRFs, Family, & Friends



BHO Initiatives

- Emergency Detention Reducing custody tim
 - Keeping stats with goals
 - Collaborating engaging partners
 - **■**Training the team Explore voluntary options
- Mobile Crisis Response
- Reducing time in custody & in handcuffs
- More safety plan options
- ≅ER's Crisis allowed and more assessments -
- ≈911 checklist goal everyone stays safe!



BHO Initiatives



- Adult Protective Services APS Partnership
- (Case Ex. Crystal)
- Collaboration Calls increasing annually
 - **MOU**
 - Co-Response Emergency Protective Placements
 - Improved Communication
 - Vulnerable Adult Interdisciplinary Team
 - Presenting on collaboration
 - Certified Dementia Awareness & Skills Trainers Community presentations & trainings

BHO – Jail Diversion



- Using citations to promote treatment
- Contacting MH Professionals at jail
- Contacting Defense Attorneys MH Court referrals
- ≈75-80% jail population with MI
- Mental Health Court
- Advocate in CJS for treatment vs incarceration



BHO – Community Engagement

- NAMI National Association on Mental Illness
 - ■Board of Directors Education, Support, & Advocacy
 - NAMI Walk CCIT Team
 - Action on the Square Lobbying
 - **Education Conferences**
 - Referrals Individuals and families struggling with MH Crisis Situations



Understanding the Value of an Arrest

When Other Options Are Not Working

- Court ordered evaluation
- Medications
- Supervision
- Employment



- ○BH Officers part of the Team (Case Ex. Chris & Barb)
- **OSpecialty Courts**
 - ×Mental Health, Veteran, Heroin, Drug, OWI



BHO – MH Court

- Identify Potential Participants & Referral
 - Excessive Police Calls for Service due to Illness
 - Arrested due to untreated illness
 - Lacking support & refusing treatment
- Contact Defense Attorneys
- Provided bikes & license to participants with transportation needs
- Medication safes Crime prevention





BHO – Suicide Prevention Coalition

- Part of Team study suicides and trends
- Identify opportunities
- Ribbons for squad cars
- Fighting stigma
- Sub-Committee Veteran & LE Suicide Prevention
 - **■**Education CIT & CIP Training
 - ⇒PSA Targeting police population
 - Media Outreach
 - Zero Suicide Panel

Brown County Completed Suicides
34
37
43
40
25



Lowest in a decade





be the light walk

Most Common Police Crisis Calls..

- ♣AODA & MI Co-occurring Disorders
 - △ Homeless population low level nuisance type of calls
 - Open Intoxicants
 - **⇔** Disorderly Conduct
 - Trespassing/Loitering
 - Citations/warnings/Arrests
 - ▲ Alcohol Hold /Voluntary Detox
 - Referrals/Housing Assistance/Treatment Options
- Suicidal, Homicidal, Self Harm, & Inability to Care
 - **△**De-escalate Situation
 - **ED** considerations
 - Voluntary Options
 - Safety Plan

Most Common Police Crisis Calls Cont..

- ♣ Disturbances DVO's
- Person out of control Often family member or roommate calling police
- Arrest Domestic's are mandatory arrest state law
- Person screaming or yelling
- ₩elfare Checks (Case Ex. Sam)
- Dementia
 - Loved ones or passer by concerned about someone's welfare

Intervention Options:

- Voluntary treatment
- Emergency Detention
- Safety Plan
- Warning
- Arrest
- Dual Detention
- Do Nothing

Understanding the Value of Early Intervention

•A CIT officer will recognize the signs & symptoms of MI and will know that early intervention is far better than increased calls for service and risk of injury to the public and fellow officers.