# Wood County C.I.T. Peer Review April 18, 2013

Peer Review Team: Robert Kasprzak (Lucas County), Paul Lilley (Hancock County) and Michael Woody (Summit County)

#### **Background:**

The Criminal Justice Coordinating Center of Excellence (CCOE) desires to work with Crisis Intervention Team (C.I.T.) Coordinators across Ohio to strengthen our collective understanding of the core elements and emerging best practices with C.I.T. One vehicle of doing just that is through a "Peer Review Process" a voluntary, collegial process building on identifying and coalescing the best elements of C.I.T. program from across the state and country.

The Peer Review consists of four phases; a Self Assessment conducted by the county under review; a Desk Audit that provides details on the program and training curriculum, a Site Visit by a team of reviewers; and a written report summarizing the reviewer's observations. The three reviewers for Wood County are Mr. Kasprzak, Mr. Lilley, and Mr. Woody.

A telephone conference call was held on February 6, 2013 between Michael Woody, Paul Lilley, Robert Kasprzak, and Laura Selders, Wood County C.I.T. Coordinator. The site visit was conducted on March 4<sup>th</sup> by the review team and the following C.I.T. Planning Committee members: Laura Selders, Criminal Justice Coordinator for Wood County and C.I.T. Coordinator, Tom Clemons, Wood County ADAMHS Board Executive Director, Ronda Gibson, Wood County Sheriff's Office Jail Administrator, and Jessica Schmitt, Wood County NAMI Executive Director, and Brad Biller, Bowling Green Police Department.

This report is a synthesis of what the reviewers found after studying the program self-assessment, conducting the telephone conference call, and attending the site visit. This review is organized into strengths and suggestions related to the C.I.T. program and the training. The ultimate test of this Peer Review Process will be if the report and resources via the CCOE, helps Wood County strengthen its program.

Finally, The Wood County C.I.T. program should be commended for volunteering to participate in the Peer Review Process at such an early stage of their development.

## **Introduction:**

The Wood County C.I.T. training has existed periodically for the last several years with the only training taking place in 2007. The training was a condensed, two-day training. Then in 2012, several key changes took place in Wood County allowing the C.I.T. program to be reborn. Those changes included the appointment of Monica Moll, Director of Public Safety and Chief of Police at Bowling Green State University; a renewed commitment from the Wood County ADAMHS Board; and the selection of Family Services of Northwest Ohio to implement the Sequential Intercept Model and their hiring of the C.I.T. Coordinator (Core Value).

Revived in 2012, the Wood County C.I.T. program became a partnership between the Wood County ADAMHS Board, Family Services of Northwest Ohio, the Wood County Office of the National Alliance of Mental Illness, The Wood County Sheriff's Office, and the Bowling Green State University Police Department. The first C.I.T. training took place in November, 2012.

## Wood County Profile:

Wood County is located in northwest Ohio and according to the 2010 U.S. Census the total population is 125,488. Other characteristics of the county include:

- The largest city in Wood County is Bowling Green with 30,028. Bowling Green is also home to Bowling Green State University, the largest university in the county and it's largest employer (5,361 employees) (Source: 2010 Wood County Economic Development Commission)
- A racial profile of it's citizens is 92.8% white; 4.5% Hispanic Origin (may be of any race); 2.4% Black or African American; 1.5% Asian; and 1.3% other
- 9.8% of families and 14.1% of individuals live in poverty
- 62.2% of the population has some college or are college graduates compared to the state average of 52.9%
- The median household income in Wood County is \$47,485 and the income for families that make \$75,000 or more is 41.7%, compared to the state average of 26.8%
- Wood County's largest mental health agency is Behavioral Connections of Wood County
- Wood County has 21 law enforcement agencies

Since 2011, the following agencies have sent officers to C.I.T.:

Law Enforcement Agencies

- 1 officer from Bowling Green PD (2%)
- 1 officer from North Baltimore PD (17%)
- 1 officer from Northwood PD (6%)
- 2 officers from Perrysburg PD (6%)
- 3 officers from Perrysburg Twp. PD (12%) (2 trained in Lucas County)
- 1 officer from Rossford PD (8%)
- 1 deputy from Wood County Sheriff's Office (1%)

### Non-participating L.E. Agencies

- West Millgrove PD
- Wood County Park District
- Bloomdale PD
- Bradner PD
- Haskins PD
- Lake Twp. PD
- Luckey PD
- Pemberville PD

- Risingsun PD
- Walbridge PD
- Wayne PD

#### Colleges

- 3 officers from Bowling Green State University PD (12%)
- 7 officers from Owens Community College Dept. of Public Safety (100%)

## Other First Responders

• 1 Springfield Twp. Fire personnel (Lucas County)

## **C.I.T. Program Strengths**

- 1. One of the most important elements in any C.I.T. program is a high level commitment from mental health system (Core Value). Wood County C.I.T. has a strong commitment from the Wood County ADAMHS Board, Family Services of Northwest Ohio, and the Wood County Office of the National Alliance of Mental Illness.
- 2. Quality of sessions for the full trainings. The topics have been well researched and the content is thorough.
- 3. The schedule for 2013 is aggressive. The challenge for the future will be to continue with this schedule. Specifically, how many Law Enforcement officers are in Wood County and how long will it take to reach the desired goal of training all of them?
- 4. County law enforcement agencies have a buy-in. In the recent Wood County Law Enforcement: Interaction with Emotionally Disturbed Persons Survey Results," 82% of those departments surveyed responded to the inquiry. The responses were honest and insightful, which indicated a commitment to improving the relationship between law enforcement and the mental health system.

## **C.I.T. Program Suggestion**

- 1. Identify a C.I.T. officer from each agency to commit to the C.I.T. concept/program (Core Value). That Officer can communicate information back and forth between the agency and the C.I.T. Planning Committee.
- 2. Plan to grow the data collection. Collect the numbers of C.I.T. requests, responses, and outcomes. This will allow the C.I.T. Steering Committee to identify training gaps, and share successes, and reinforce buy-in with all departments. An example would be a "C.I.T. Stat Sheet." The Stat Sheet can be shared on a regular basis with the mental health system. Furthermore, a Stat Sheet can be an effective tool when problem situations arise.

- 3. Develop a (continuous) program evaluation process. This will allow the program to adapt to the changing needs of the community and if/when needed, introduce new research trends, and justify funding. Note: continuous program evaluation is not training evaluation. It is focused on the C.I.T. *program*.
- 4. Develop a formal way to receive feedback from officers on the street. The program could benefit from a formal way to receive officer feedback on encounters that could then feed future trainings and role play development, as well as problem solve issues that may arise between the Criminal Justice and the Mental Health systems.

### **C.I.T.** Training Strengths

- 1. A year's worth of C.I.T. trainings has been planned for 2013. Full trainings (Core Value) will take place in April and November. A separate advanced training (Core Value) will take place in November with officers who attended the first C.I.T. training. In addition, a Dispatcher training (Core Value) will take place in September. This schedule reflects the program's commitment to offering a full year of trainings and a core element of C.I.T. for small law enforcement agencies which "In smaller agencies, all officers may ultimately need to be trained as C.I.T. officers to ensure maximum coverage and availability."
- 2. Qualified presenters are available to deliver the topics in a professional manner.
- 3. The PTSD child section and de-escalation was well received.

#### **C.I.T.** Training Suggestions

- 1. Extend the training to 40 hours (Core Value). The current 32 hours is limiting. With an additional eight hours current topics could be expanded, additional topics could be included, site visits could include more than two locations, and additional role-plays could be incorporated.
- 2. Transform the presentations from an academic-level to a "street-level" relevance. Several of the presentations were very clinical, perhaps too much for officers to comprehend especially those responding to a crisis call. What is needed is a description of the definitions of psychosis, paranoia, and delusions and what these behaviors look like on the street and how officers should respond.
- 3. After reviewing the handouts, many presentations were too heavy on didactics and not peppered with video or small group exercises. A common mistake of C.I.T. trainings is the "death by PowerPoint" syndrome. The Planning Committee should review all presentations, recognize the potential of DBPP, and encourage the presenters to use a variety of teaching methods including panel presentations, demonstrations, video, testimonials, or group discussion. Review the Teaching Tips document for additional presentation methods.

- 4. Topics should reflect the unique aspects of Wood County. Did the Planning Committee choose the topics based upon a criterion? Are Police C.I.T. calls or gaps in mental health service system taken into consideration for topic selection? Were the mental health providers asked to identify trends or gaps?
- 5. Involve the largest county mental health provider on the Planning Committee. The insight of Behavioral Connections of Wood County would be most advantageous. The provider could also make available case managers for ride alongs and provide access to their residential programs as part of the site visits.
- 6. Increase the number of Bowling Green Police Department and Wood County Sheriff Officers that are "C.I.T. trained." The Criminal Justice and Mental Health partnership may need to reach out to the two largest law enforcement agencies in the county to get their participation at the training and ultimately, involvement with the C.I.T. program.
- 7. Reduce the potential of overlap or redundancy with the Autism and Development Disabilities (DD) topics. The amount of time reduced from these two topics would allow more time for role-plays covering these topics or an additional site visit to a DD agency.
- 8. The suicide session is rather long and goes too deeply into the diagnostics. This session could be reduced to one hour with video presentations added. Law enforcement officers needs to know how to de-escalate and what not to say or do. And is there an equal amount of time spent on youth and adults? A five or 10 year report from the Coroner's office might help to identify county suicide trends including a high risk demographic profile. In the 2012 Wood County Health Assessment, 13% of Wood County adults reported that they considered attempting suicide at some time in their life. And 12% of adults felt so sad or hopeless almost every day for two or more weeks that they stopped doing usual activities. In addition, 9% of Wood County youth had seriously considered attempting suicide in the past year and 4% admitted actually attempting suicide in the past year.
- 9. The written test at the end of the third day seems rather difficult. Is this test graded and the results shared with the class or Planning Committee? Is it used to modify the training and "course-correct" if necessary?
- 10. The substance use disorders session looks a lot like the trainings that Law enforcement officers regularly receive. Include more examples of people with a mental illness and substance use. Dual disorders are common diagnosis with people in the mental health system. According to the 2012 Wood County Assessment binge drinking is a area of concern especially among males, under 30 with an income of less than \$25,000. And heroin and other opiate data would be useful in the presentation.

- 11. In the PTSD session, there needs to be an emphasis on how to de-escalate this population. According to the 2012 Wood County health Assessment, 13% of Wood County veterans reported high anxiety levels; 7% were diagnosed with PTSD; and 7% reported problems accessing medical care. Does the session reflect these specific needs?
- 12. For the site visits prepare both the officers and the agencies. A 15-20 prep talk to the officers advising them of what to expect at the locations, the purpose of why those locations were chosen, and how it relates to C.I.T. is recommended. The agencies would also need an explanation of why they were chosen and how they can communicate information about their services would enhance the site visit. In addition, the speakers at the locations might need an outline of what the officers are learning in order for them to make the connection between their agency and the C.I.T. training. The C.I.T. site visits are an opportunity for officers to learn about the resources in the community, for them to have a chance to communicate with mental health consumers who are not in a crisis situation, and for them to increase their empathy towards people with a mental illness. And consider adding more locations. Finally, publicly recognize the agencies for their time and effort.
- 13. Diversity training block- The C.I.T. Planning Committee might consider adding a segment on cultural issues and competency as they relate to the police encounter. While it is acknowledged that this is a difficult topic for most C.I.T. programs, it is one of the core training elements. Some C.I.T. programs are exploring this topic through the issue of the culture of poverty and personal bias and how such bias can affect police work.