PROFESSIONAL RESPONSIBILITY

This directive:

A. outlines the Crisis Intervention Team (CIT) Program.
B. delineates the responsibilities of the CIT Program Coordinator.
C. establishes response protocol for CIT District, Operations, and Community Support (CIT DOCS).

II. MISSION STATEMENT

The Crisis Intervention Unit will provide training, field support, and community engagement to equip Department members with the knowledge, ability, and resources necessary to provide a safe, dignified, and appropriate response to individuals living with or affected by mental or behavioral health conditions.

III. POLICY

The Chicago Police Department:
A. seeks to prioritize the sanctity of life and enhance its response in all community encounters, including mental and behavioral health-related incidents. The Department's Crisis Intervention Team (CIT) Program facilitates and acts in coordination with partnerships between law enforcement, prosecutors, courts, designated mental health intake facilities, mental and behavioral health service providers and advocates, and the community in order to reinforce the safe and dignified treatment of persons experiencing a mental health crisis.
B. will ensure that the CIT Program has sufficient, dedicated district-level resources, consistent with the needs of each district identified by the District Commander and the CIT Coordinator, and approved by the Chief, Bureau of Patrol, as needed to carry out the overall objectives and functions of the CIT Program at the district level.
C. will maintain policies regarding the criteria for ongoing participation as a Certified CIT Officer consistent with Item VI.B of this directive.

IV. GENERAL INFORMATION

A. Mental health condition is a diagnosable condition that can substantially impair a person's thought, perception of reality, emotional process, judgment, behavior, or ability to cope with the daily stresses of life. Mental health conditions can be treated through various approaches, allowing individuals to maintain recovery from many of its symptoms.
B. Department members may encounter situations where they must interact with individuals in crisis. These individuals may exhibit symptoms of known, suspected, or perceived behavioral or mental health conditions, including, but not limited to, intellectual or developmental disabilities, or co-occurring conditions such as substance use disorders. Department members will utilize their training to assist in recognizing and responding to individuals in crisis and in need of intervention. Members will use appropriate and respectful terminology when interacting with individuals in crisis.
C. The Chicago Police Department seeks to reduce the incidence and severity of mental and behavioral health-related service calls and advocates early intervention for individuals in crisis by encouraging Department members to redirect individuals in crisis to the healthcare system, available community resources, and available alternate response options, where feasible and appropriate.

D. Department members will treat mental and behavioral health-related service calls in the same professional manner as all other requests for police service and will provide immediate, effective assistance and protection.

E. The CIT Program serves to improve the Chicago Police Department's competency and capacity to effectively respond to individuals in crisis; de-escalate crises to reduce the need to use force against individuals in crisis; and improve the safety of officers, individuals in crisis, family members, and community members. The CIT Program encompasses training, community engagement, and field support functions in furtherance of promoting community-oriented solutions to assist individuals in crisis and reducing the need for individuals to have further involvement with the criminal justice system.

F. The CIT Program is administered by and under the command of the Crisis Intervention Unit. The CIT Program is supported by the CIT Training Section and CIT District, Operations, and Community Support which are centralized at the Training Division. The CIT District, Operations, and Community Support includes decentralized Area teams that assist in carrying out the objectives and functions of the CIT Program at the district level.

G. The CIT Program will operate citywide and on all watches based on the availability of on-duty certified CIT-trained Department members.

V. RESPONSIBILITIES

A. The CIT Program is commanded by a coordinator at the command staff rank of Commander (minimum career service rank of Lieutenant) who works to increase the effectiveness of CPD's CIT Program, improve CPD's responses to incidents involving individuals in crisis, and facilitate community engagement between CPD and crisis intervention related stakeholders. The CIT Coordinator must receive initial and refresher professional development training for the role and is responsible for the overall management of the program as follows:

1. ensure submitted Crisis Intervention (CIT) Reports (CPD-15.520) are compiled, retained, and analyzed, and the appropriate data is collected, maintained and used to support and strengthen the effectiveness of the program;

2. collaborate in the development of CIT training curricula on mental and behavioral health issues and district-level response to mental and behavioral health-related incidents;

3. develop and manage a uniform CIT Program strategy and response protocol for the CIT District, Operations, and Community Support (CIT DOCS);

4. research and identify best practices to incorporate into the Department's response to individuals in crisis;

5. select and if appropriate, remove certified CIT-trained Department members from the CIT Program;

6. oversee crisis intervention-related data collection, analysis, and reporting;

7. identify and assign a sufficient number of data analysts to collect and analyze data related to the CIT Program and Department response to incidents involving individuals in crisis. The CIT Coordinator will ensure, on a quarterly basis, the collection and analysis of the number of calls for service identified as involving individuals in crisis for every watch in each district to:

   a. evaluate the number of Certified CIT Officers needed to timely respond to incidents, and

   b. assess the Department’s progress towards achieving the response ratio targets.
8. develop and implement the Department's portion of any Crisis Intervention Plan and CIT Officer Implementation Plan to inform understanding of and enhance CPD's response to incidents identified as involving individuals in crisis;

9. develop and implement the Department's portion of any Crisis Intervention Plan;

10. supervise CIT Program staff;

11. participate in the Chicago Council on Mental Health Equity (CCMHE);

   **NOTE:** The council is composed of experienced subject matter experts that will assist in identifying problems and developing solutions and interventions designed to improve outcomes for individuals in crisis who require City services.

12. encourage public recognition of the efforts and successes of the CIT Program and certified CIT-trained Department members; and

13. communicate and interact with the Department's command staff to recommend improvements to Department crisis-intervention-related strategies, staffing, deployment, policies, procedures, and training.

B. The CIT Program, through the CIT staff and its chain of command, is charged with improving the Department's response to mental and behavioral health-related service calls and facilitating and coordinating law-enforcement services provided to the mental and behavioral health community by:

   1. developing, evaluating and improving Department crisis intervention related policies, trainings and operations to better identify and respond to individuals in crisis.

   2. developing a comprehensive, uniform CIT strategy and maintaining coordination with other City, criminal justice, and community-based agencies, advocacy groups, educational and research institutions, and members of the community coping with mental and behavioral health issues.

   3. developing and delivering Basic CIT Training and other CIT training, including Advanced CIT (youth, veterans) and refresher trainings.

   4. collaborating in the development of mental and behavioral health training curricula materials within the Department and with City agencies or service providers, participating as instructors when feasible.

   5. providing streaming videos, periodic roll call training and mental health awareness initiatives for district personnel on Department policy and other matters relating to mental health issues.

   6. disseminating information about available mental and behavioral health-related resources and services to officers and the community to facilitate problem solving for mental and behavioral health issues and to assist in making appropriate referrals for members of the community.

   7. informing and, when necessary, consulting with certified CIT-trained Department members on recurring CIT issues at the district level.

   8. supporting Bureau of Detectives area follow-up investigations involving individuals in need of mental and behavioral health treatment.

   9. attending periodic training to remain informed of changes in criminal statutes, Department policy, and other mental and behavioral health-related issues.

   10. coordinating forensic mental health crisis response and emergency intervention service between service providers and district certified CIT-trained Department members.

   11. engaging the community and community stakeholders to raise awareness of CIT Program and issues involving individuals in crisis.
12. coordinating among City agencies that respond to individuals in crisis.

13. recruiting Department members to apply for CIT training.

14. collecting and maintaining the appropriate data related to incidents involving individuals in crisis to support and evaluate the effectiveness of the CIT Program and the Department's response to incidents identified as involving individuals in crisis, including identifying any district-level and Department-wide trends.

15. coordinating data and information sharing with OEMC.

16. communicating and soliciting feedback from crisis-intervention-related community stakeholders including people with lived experiences, certified CIT-trained Department members, and OEMC call-takers and dispatchers regarding the effectiveness of the Department's CIT Program.

C. CIT District, Operations, and Community Support (CIT DOCS)

1. The CIT District, Operations, and Community Support is a branch of the Crisis Intervention Unit that serves to:
   a. mitigate the frequency and severity of service calls identified as involving individuals in crisis.
   b. prevent unnecessary incarceration and/or hospitalization of individuals living with serious mental health conditions, substance use disorders, or co-occurring disorders; and
   c. support access to appropriate services for individuals with mental and behavioral health needs who encounter law enforcement.

2. The CIT DOCS - Administration serves as a resource to:
   a. monitor and evaluate:
      (1) the number of service calls identified as involving individuals in crisis,
      (2) the timely response by certified CIT-trained Department members to such calls on every watch in each district, and
      (3) the strategy, methods, and actions implemented to maintain an appropriate response.
   b. ensure incidents involving an individual in crisis are documented in a manner consistent with Department policy and procedure.
   c. provide certified CIT-trained Department members with feedback regarding their responses to incidents identified as involving individuals in crisis.
   d. facilitate the review of policies and practices, no less than annually, to ensure:
      (1) the Department's compliance with the objectives and functions of the CIT Program;
      (2) respectful language used in policies, procedures, forms, databases, and trainings to communicate about incidents involving individuals in crisis is appropriate, respectful, and consistent with professional terminology.
      (3) the collection, maintenance, and use of information related to an individual's mental health facilitates necessary and appropriate communication while adequately protecting an individual's confidentiality.

3. The CIT DOCS at the Area-level serves as a resource to:
a. support *Department members* in the district with incidents involving individuals in crisis, including providing advice, guidance, and feedback on incidents involving persons in crisis and following up on mental and behavioral health-related events beyond the preliminary investigation;

b. deliver CIT Program-approved roll call trainings and mental health awareness initiatives;

c. establish relationships between the district and local service providers and healthcare agencies;

d. refer, and when appropriate, connect individuals in crisis with local service providers;

e. engage with the community to raise awareness of the CIT Program and issues involving individuals in crisis; and

f. provide administrative support to the CIT Program Coordinator including coordinating with the Cook County Assistant State’s Attorney Office on court orders of detention and examination and referrals for deferred prosecution and alternative sentencing programs.

4. The CIT District, Operations, and Community Support Areal-level field functions includes, but is not limited to:

a. providing advice and guidance during the course of preliminary investigations involving persons in need of mental and behavioral health treatment;

   **NOTE:** In the event a Department exempt commanding officer or Incident Commander determines a mental health emergency may warrant the immediate response of a CIT DOC, the member will notify OEMC of same. OEMC will notify the CIT Program Coordinator or designee via the Crime Prevention and Information Center (CPIC) that the immediate response of a CIT DOC has been requested. The CIT Program Coordinator or designee will determine whether the immediate response of a CIT DOC is warranted; the degree of any response; and subsequent resources provided by the CIT DOCS to assist with the incident or any follow up.

b. following up on CIT-related events that involve frequent, escalating, or unusual encounters with individuals due to their mental or behavioral health needs;

c. following up on mental and behavioral health-related events at the request of district personnel, community-based service providers, or other governmental agencies; and

   **NOTE:** Members may request CIT DOCS Area-level assistance by completing a Crisis Intervention (CIT) Report (CPD-15.520) and marking the appropriate box in the shaded portion at bottom; emailing the Crisis Intervention Unit at cit@chicagopolice.org; or contacting the Area teams, consistent with Phone Book Entries.

d. conducting co-visits with service providers to offer services to individuals with a history of mental or behavioral health conditions related to numerous responses by law enforcement and the substantial use of police resources, as determined by the CIT Program Coordinator or designee.

D. Crisis Intervention Team Training Section (CITTS)
1. The Crisis Intervention Team Training Section (CITTS) is a branch of the Crisis Intervention Unit that instructs Department members in specialized crisis-intervention-related topics in order for Department members to achieve Crisis Intervention Team training certification from the Illinois Law Enforcement Training and Standards Board and maintain Certified CIT Officer designation consistent with Item VI of this directive.

2. The Crisis Intervention Team Training Section is responsible for:
   a. the administration and delivery of:
      (1) Basic Crisis Intervention Team (CIT) Training;
      (2) Crisis Intervention Team (CIT) Refresher Training; and
      (3) Advanced Crisis Intervention Team (CIT) Trainings;
   b. ensuring that all newly assigned Field Training Officers (FTOs) and promoted Sergeants and Lieutenants will receive Basic CIT training and will be prioritized for scheduling and attendance;
   c. providing expertise and support to the Training Division with recruit, in-service, and pre-service training and training publications related to recognizing and responding to individuals in crisis;
   d. identifying and recruiting qualified Department members with apparent or demonstrated skills and abilities in crisis de-escalation and interacting with individuals in crisis to apply to receive CIT training; and
   e. encouraging and seeking the participation of professionals and advocates who work with individuals in crisis, and persons with lived experience of behavioral or mental health crises, including those with involvement in the criminal justice system, to develop and deliver CIT training, where it would add to the quality or effectiveness of the training when feasible and appropriate; and
   f. developing, reviewing, and revising Crisis Intervention Team curricula.

VI. CERTIFIED CIT OFFICER DESIGNATION
   A. Certified CIT Officers are officers who receive specialized training in responding to individuals in crisis. Certified CIT Officers retain their standard assignment and duties but may also take on specialized crisis intervention duties and are prioritized to respond to service calls identified as involving individuals in crisis, as assigned.

   1. Certified CIT Officers, at a minimum, must complete the specialized 40-hour Basic CIT Training and receive CIT certification by the Illinois Law Enforcement Training and Standards Board.

   2. To be designated as a Certified CIT Officer, sworn Department members at a minimum must successfully complete Basic CIT Training and no longer be on probationary status with at least two (2) years of experience as a Chicago Police Officer.

   NOTE: Department members interested in attending Basic CIT Training will complete and submit Crisis Intervention Team (CIT) Application (CPD-15.518) to the CIT Program Coordinator.

   3. To maintain the certified CIT Officer designation, Department members must receive a minimum of eight (8) hours of CIT Refresher Training every three (3) years and maintain the eligibility requirements established by the CIT Program.
4. All Certified CIT Officers who completed Basic CIT Training before the implementation of the CIT Refresher Training on 01 April 2021 must complete their first CIT Refresher Training within four years from the date that the CIT Refresher Training was implemented. All Certified CIT Officers who complete Basic CIT Training on or after the implementation of the CIT Refresher Training on 01 April 2021 must complete their first CIT Refresher Training within three years of the date they completed Basic CIT Training.

5. Certified CIT Officers who fail to complete the CIT Refresher Training within three years of taking their most recently required Refresher CIT Training will be deemed out of compliance with the CIT Refresher training requirement and will no longer be prioritized to respond to calls for service involving a mental health component.

B. The CIT Program Coordinator is responsible for selecting and removing certified CIT-trained Department members from the CIT program. To enable a determination as to the fitness of an individual to serve as a Certified CIT Officer at the time of a member’s attendance to Basic or Refresher CIT courses, the CIT Program Coordinator or designee will review and assess the following:

1. the Crisis Intervention Team (CIT) Application (CPD-15.518).
2. the member’s disciplinary history. Members will be deemed ineligible for designation as a Certified CIT Officer if disciplinary records show:
   a. Sustained Complaint Register (CR) investigations for misconduct resulting in suspension of more than three (3) days during the preceding 12-month period.
   b. A record of three (3) or more sustained CR numbers resulting in suspensions of any length of time within the past five (5) years.
3. the member’s performance history.
4. seniority record to verify member has at least two years of service.

C. The CIT Program Coordinator will:

1. confirm on a quarterly basis that certified CIT-trained Department members remain in compliance with the CIT Refresher Training requirement.
2. notify the Chief of the Bureau of Patrol, the Commander of the Strategic Initiatives Division, the Deputy Chief of the Training and Support Group, and the District/Unit Commanding Officers of certified CIT-trained Department members who are out of compliance with the CIT Refresher training requirement.

D. The Training Division is responsible for updating training records that document completion of Basic, Advanced, and Refresher CIT trainings.

E. The Commander, Strategic Initiatives Division, is responsible for reporting to the Office of Emergency Management and Communications (OEMC) when Department members complete Basic CIT and CIT Refresher requirements that permit OEMC to identify and prioritize the response of certified CIT-trained Department members to calls for service involving individuals in crisis. An updated list of current and active certified CIT-trained Department members, and their assignment, will be provided no less than quarterly.

F. Each quarter, the Commander, Strategic Initiatives Division, will inform OEMC of officers who are out of compliance with CIT Program eligibility requirements and who may not continue to be prioritized to respond to calls for service involving individuals in crisis.

G. District station supervisors will ensure that the daily assignment roster sent to OEMC and entered into the PCAD reflects certified CIT-trained Department members by placing a “Z” next to their names.

NOTE: A current roster of Certified CIT-trained Department members is available via the eLearning application.
VII. TRAINING SCHEDULING AND ATTENDANCE

A. Scheduling and attendance in Basic and Refresher CIT Training will be prioritized in tiers based on a member’s voluntary enrollment in training, a member’s mandatory enrollment based on a pre-service curriculum requirement, or a member’s mandatory enrollment based on a current assignment in District Patrol.

1. Volunteers for Basic and Refresher CIT training will continue to be identified through the Crisis Intervention Team (CIT) Application (CPD-15.518) and prioritized for scheduling and attendance as first tier.

2. All newly assigned Field Training Officers (FTOs) and promoted Sergeants and Lieutenants will receive Basic CIT Training and prioritized for scheduling and attendance as second tier. Newly assigned or promoted members who have received Basic CIT Training within the past three years will receive Refresher CIT Training and be prioritized for scheduling and attendance as second tier. To be considered Certified CIT Officers, FTOs, Sergeants, and Lieutenants must meet the eligibility criteria and training requirements established by the CIT Program.

3. Sworn members assigned to District Patrol will be required to attend Basic CIT Training and prioritized for scheduling and attendance as third tier.

4. Sworn members who received Basic CIT training will be required to attend Refresher CIT Training, and prioritized for scheduling and attendance as third tier.

5. Any command staff and senior executive service members of the Department who have not been trained in Basic CIT will attend and successfully complete the training within 1 year of promotion or within 3 years of the implementation of this Department directive.

B. The CIT Training Section, in coordination with the Training and Support Group, will utilize the Learning Management System to ensure tracking, notification, attendance, and appearance in CIT Training, consistent with Department policy and this directive.

C. The completion of the CIT Refresher Training may be used to satisfy a Certified CIT Officer’s required in-service training requirements.

VIII. CRISIS INTERVENTION PLAN

A. The Crisis Intervention Plan is based on the regular review of aggregate data and sample of incidents conducted by the Department and OEMC.

B. The CIT Program Coordinator will consider the following in the development of the Department’s portion of the Crisis Intervention Plan:

1. Quantitative crisis intervention data;

2. Qualitative data on Department members’ and community members’ perception of the effectiveness of the CIT Program (e.g., surveys, focus groups, world cafes, etc.);

3. Department member feedback regarding crisis intervention related training;

4. Actual incident information;

5. Staffing and deployment analysis of available Certified CIT Officers;

6. Research reflecting the latest in best practices for police responses to individuals in crisis; and

7. Feedback and recommendations from the Chicago Council on Mental Health Equity (CCMHE).

C. The Crisis Intervention Plan will:

1. report annually:
a. the number, type, and outcome of incidents involving individuals in crisis;

b. the number of Certified CIT Officers available and on duty in each district and on each watch;

c. the percentage of calls for service involving individuals in crisis for which Certified CIT Officers were the first officers to respond to the scene for each watch in every district; and

d. the response times for calls for service involving individuals in crisis for each watch in every district.

2. evaluate the CIT Program’s compliance with the objectives and functions identified in this directive;

3. identify strategies to ensure that CPD has a sufficient number of Certified CIT Officers to meet its response ratio targets for calls for service involving individuals in crisis;

4. describe any additional resources, including program staff or equipment, the CIT Program needs to perform its functions;

5. identify safety issues and trends regarding interactions between individuals in crisis and officers;

6. identify deficiencies and opportunities for improvement in identifying and dispatching calls for service involving individuals in crisis;

7. recognize and highlight CIT Program and Certified CIT Officer successes, including successful individual officer performance;

8. develop response strategies for repeat calls for service involving individuals who are frequently in crisis;

9. recommend any changes to crisis intervention-related strategies, policies, and procedures;

10. recommend any changes to Department and OEMC trainings related to individuals in crisis, including any case studies and teaching scenarios; and

11. include a timeline and plan for implementing recommended changes.

D. The CIT Program Coordinator will have the Department’s portion of the Crisis Intervention Plan reviewed and approved by the Executive Director, Office of Constitutional Policing and Reform, within 60 days of the plan’s completion.

IX. POLICY REVIEW

A. The Department will annually review crisis intervention related policies to evaluate whether it provides effective guidance and direction to Department members and is consistent with the current law and the Department’s vision, mission, objectives, and practices. When reviewing and revising policies, the Department will seek input from members of the community and community-based organizations with relevant knowledge including Chicago Council on Mental Health Equity (CCMHE) on recommendations in identifying appropriate and respectful terminology.

X. CRISIS INTERVENTION UNIT RESOURCES

A. CIT Training Section

B. CIT DOCS - Administration

C. CIT DOCS - Area 1

D. CIT DOCS - Area 2

E. CIT DOCS - Area 3
F. CIT DOCS - Area 4
G. CIT DOCS - Area 5

(Items indicated by *italics/double underline* were revised or added.)

Authenticated by KC

21-059 VM

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