



## Chicago Council on Mental Health Equity (CCMHE) – Deflection and Diversion Subcommittee

### MEETING MINUTES

Date: September 29th, 2021

1:00 – 3:00 p.m.

Zoom link: <https://zoom.us/j/3032424110?pwd=dWtiWER4WERWZ2hsekpuQWpicWlEZz09>

Meeting ID: 303 242 4110

Passcode: CCMHE2021

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#### I. Welcome and Attendance – members in attendance are shaded gray

Co-Chair	Name	Agency
Co-Chair	Dr. Rashad Saafir	Bobby Wright Comprehensive Behavioral Health Center
Co-Chair	Stephen Brown	U of I Health and Hospitals
	Dr. Wilnise Jasmin	CDPH
	Fred Friedman	self
	DC Antoinette Ursitti	CPD
	Richard Rowe	Next Steps and CSH
	Rebecca Levin	Cook County Sheriff's Office
	Emily Cole	Cook County State's Attorney
	Eric Lenzo	Sinai Health Systems
	Joel Johnson	HRDI
	Lori Roper	Cook County Public Defender
	Jason Learner	Uchicago Urban/Crime Lab
	Amy Spellman/Jason Lerner	Uchicago Urban/Crime Lab
	Esther Sciammarella	Chicago Hispanic Health Coalition
	Nick Roti	HIDTA
	Dr. Sharon Coleman	IDHS - DMH
	Jac Charlier	TASC
	Rasauna Riley-Brown	DFSS

	Veronica Trimble	IDHS
	Felix Rodriguez	IDMH

II. Public Comment – no request for comments

III. CPD CIT Policy Review:

S05-14 Crisis Intervention Team (CIT) Program

- Purpose: outlines CIT program, responsibilities, response protocol
- Policy: Seeks to prioritize the sanctity of human life and provide best outcomes for individuals in crisis (someone with a behavioral health condition, intellectual or development disability, or co-occurring conditions)
- General Information: defines mental illness, guiding principles to crisis response, CIT program objectives, builds out organization and operational aspect – operates citywide on all watches with certified CIT members available on every watch in every district

Questions

Steve: How long is accreditation body been in place for CIT?

DC: I will have to go back to find the year when CALEA recognized CPD. Training was different, it was either 2019 or 2020. I can get it to MO to be shared with group

Steve: How often do they update accreditation standards? It seems like a moving target. With decriminalization of mental illness as national trend, I imagine there will be a lot of iterative learning in this space

DC: CALEA is broad agency, DC will have to get back to group about CALEA credentialing

Dr. S: How often is the department reviewed by CALEA

DC: I will have to get that from our Department of professional standards and get back to group

- Responsibilities:
  - CIT program coordinator- professional development that coordinator is expected to have (sworn member with rank of Lieutenant or above)
  - CIT crisis intervention unit- training, community engagement, field support
  - CIT district operation and community support branch-
    - Aims to reduce severity and frequency of calls to 911 requiring a police response: redirect people to appropriate services, recognize trends, try to reduce contact with the criminal justice system to divert to community-based services
    - 2 branches:
      - CIT DOCS Administration- monitors and evaluates trends, regularly reviews calls for service, looks at reports, gives feedback to Department members on their response. Includes CIT DOCS Area-level support: every district has an officer regularly reviewing trends

- in that district, identifying community resources in that district, provides advice and guidance
  - Training- basic certification is 40 hours, offer regular refresher trainings every 3 years, facilitate community input for training curricula, requirements for who must receive trainings
- Certified CIT Officer designation- officers are prioritized to respond to service calls identified as having a behavioral health component, but maintain whatever their assignment is
  - Members must have two years seniority before going through CIT training

#### Questions / Comments:

Esther S: what is capacity of language, how to plan to deal with different languages?

DC: our department has a language access line, follow procedure to have someone available to translate. This is a distinct policy that is department wide (not just CIT)

Harold Pollack: if there is a language barrier, there is opportunity to alert First Responders – the Smart 911 program. Particularly with a loved one with a mental or behavioral health issue. How to sign up with Smart 911 is on the form officers leave with people interactions

Esther S: it is very difficult to deal with mental health issues and translation issues, we need to figure out to the problem with social worker, to prevent one team overlap with other team. It is good to be contacted immediately with service that provides the language needed in Chicago over 97 different languages, important to see how we can work as a team (law enforcement and mental health team).

DC: good feedback, one of the de-escalation strategies is Time as a Tactic. Allows for responding with resources as needed. We look at principles of communication (verbal, tone, body language), use other mechanisms to maintain professionalism. Recognize when a good time to call in needed resources.

Esther S: need to be more communication internally between different teams that respond to different situations

DC: hired a language access coordinator in CPD who works with liaison with persons with disabilities.

Steve: CIT DOCs is an Area resource, how would you envision them working with the Alt Response team? Do the Alt Response report up the chain of command the same way the district CIT officers do?

DC: the CARE teams would fall under the Area 2 and Area. The CIT officers are both CIT DOCs team members and part of the CARE team.

Elliot: Can you clarify that there will be another set of policy docs that will include when the Alt response might be consulted? Social worker / mental health professional?

DC: There is going to be a distinct pilot policy, not specific to an Area, it will be a department wide policy. This is not part of the review policy today, so it will be a separate conversation.

Dr. S: How are CIT officers identified? Special insignia

DC: few different identifiers; attribute assigned on the roster sent to OEMC (it will be at the end of this directive), the letter "Z". This is an administrative process but identifies a certified CIT officer. This helps with data collection. A visual is the pin to wear on uniform that identifies a CIT officer. These officers are prioritized for response.

Dr. S: perspective of public, how can they tell? Helpful to identify a CIT officer on scene for the general public.

DC: great feedback – we will look at this in a broader perspective. In the interim, to look for the pin under a members nameplate.

Dr. S: thinking a bit more visual?

DC: share one thing about this policy, the last section is the contact info for the different sections. What the address, phone number, and email

Cesareo: These officers are addressing other cases while they are working, so they are armed officers who could theoretically be dealing with violent situations like a robbery and then be called right afterwards to a CIT incident?

DC: Yes, a certified CIT officer may be responding to any call for service

Cesareo: I have two concerns about that approach. As a community member when I see a CIT officer physically handling individual for a different situation I would feel hesitant to call police to respond to CIT incident if it is the same individual that would respond. Has that been thought about? What is logical justification?

DC: CIT model is recognized as best practice – I encourage anyone who is interested to learn more. This model uses patrol resources. Not the only best practice. The CPD adheres to the national best practice CIT model and the Illinois Law Enforcement Training and Standards Board (ILETSB) certification.

Cesareo: Do you think police officers can transition from one extreme interaction to another and de-escalate? I see it hard.

DC: Officer Wellness is a priority with Dept, to help with repeated exposure to stressful situations.

Cesareo: I was less focused on their well-being than on the ability to navigate a situation afterwards.

Harold: The positive flip side to when CIT officers respond, is that other officers can see one can be effective in all public safety aspects while also providing humane response to person in behavioral health crises. Officer Wellness is a key priority.

### CIU S.O. 20-02 CIT Training Scheduling, Attendance, Eligibility, and Recruitment

Policy: committed to identifying and recruiting qualified officer with apparent or demonstrated skills or abilities in crisis de-escalation and interacting with individuals in crisis. Includes performance and disciplinary history.

Scheduling and attendance – procedures for the scheduling of training in a tiered approach:

- Members who complete application (voluntary)
- Field Training Officers, Sgts, Lts. – recently promoted
- Patrol members

Application helps to identify voluntary officers or a unique role in a unit or district. Also identifies those that did not volunteer for training. Regular review when members are not in compliance (training every three years)

Eligibility: establishment of documents to determine if member is eligible

- Application
- Disciplinary history
- Recognition / awards
- Seniority

The SOP describes the process for maintain compliance of CIT training, to begin 2023 / 2024

#### Questions / Comments

Anna: is there monetary incentive for CIT officer? Extra money for doing it?

DC: no additional pay grade for this role

Recruitment: identifying the right officers, lists the methods of recruitment (roll call training, recruitment letters, administrative message center, award and recognition, and professional development)

Evaluation: ensuring data collection

Glossary terms: defines Basic CIT Training and Refresher CIT Training

### CIU S.O. 20-03 Crisis Intervention

Policy: plan annually evaluates the City's identification of and response to incidents involving individuals in crisis.

#### Questions / Comments:

Cesareo: I don't see any community oversight or input, or outreach on the evaluation of the year

DC: when you get into the plan itself, drop down to procedures section, includes qualitative data such as community members viewpoint on the quality of the program, focus groups, world café, including recommendations from CCMHE. This directive is speaking directly to CPD

Elliot: You mention focus groups and world cafés employed to seek out cmtly engagement, are the CPD budget have budget to support that? Or budget elsewhere to support that? Person with lived experience may require additional support to understand these policies. Where are additional resources for that?

DC: CPD has Community Policing with a Director of Community Engagement across the different responsibilities in law enforcement. In annual policy review CIT unit coordinates with OCP Deputy Director. CIT has a Community Outreach Coordinator. Recently, community groups worked with CPD to review CIT training.

Elliot: At ONE Northside we have a group of people that do community work, we would like to engage them with your team. How would we engage that? What is the Community Engagement position?

DC: can you drop your contact info in the chat so we can coordinate with Mayor's Office? [Emmanuel.Ares@chicagopolice.org](mailto:Emmanuel.Ares@chicagopolice.org) is the Community Outreach Coordinator, please feel free to contact me.

General Info – describes information for the Crisis Intervention Plan. No personal data will be included. The plan includes information provided by CPD to the City.

Procedures – reviews the data from the CIT Unit

#### CIU S.O. 20-04 District Level Strategy for CIT Program

Purpose – the process for a needs assessment for each district's CIT resources, unique to each district

Questions / Comments:

Elliot: do the Areas coordinate with districts?

DC: yes, each Area makes up of multiple districts, each district has a Commander, each Area has a Deputy Chief.

Elliot: are the areas within districts or the districts within areas?

DC: the districts are within Areas

Elliot: did you mention Area 2 and Area 3 because that is where the other CIT programs are rolling out?

DC: 6<sup>th</sup> district is Area 2 and the 19<sup>th</sup> district is Area 3.

General Info: DC: objectives and functions of districts to carryout functions and objectives of the district level CIT program

Questions / Comments:

Elliot: number 5, would that fall under the Community Outreach Coordinator?

DC: the responsibility of CIT Coordinator, what will be accomplished through district level strategy

Elliot: the district level strategy, is that specified in a separate document?

DC: this is the document that provides guidance

Elliot: does this lead to district level documents the plan for those districts?

DC: the form describes the district level plan

Elliot: this may be outside the scope

DC: each district has that form,

Elliot: how would community member be aware of the process for the district level plan?

DC: welcome the questions, can identify ways to clarify

CIT District Level Strategies

The strategy is identified by District Commander and CIT Coordinator

Will be prepared to document the needs assessment; the CIT DOCS Sgt will be response for coordination of district level strategy meeting and community members identified by the District Commander.

Meetings held quarterly

Implementation – after meeting

Questions / Comments:

Anna: is the CIT strategic District plan from the current strategic district plan? Is it folded into the current one?

DC: district process from the Strategic Plan. We will make sure that you are plugged in with all of the processes with the Community Policing office.

Anna: has this happened yet?

DC: this is not something that is published, something done to ensure the CIT needs are codified and carried out. Just initiated late last quarter.

Anna: thanks for additional details. Can someone drop an Area map link?

MO: we will find area map to send out to everyone.

DC: thanks to everyone

Next full committee is Oct 25<sup>th</sup>, if anything changes members will be notified.