

Ohio Crisis Intervention Team Program Peer Review

Richland County CIT Program



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National Alliance on Mental Illness

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Introduction

A Crisis Intervention Team (CIT) is an agency or organization that provides a specific service (law enforcement, service provider, etc.) that formally and through written policy has integrated concepts of the CIT Model and the Ohio CIT Core Elements into their organizational structure. A CIT program is comprised of agency CITs. These CITs are organized to sustain a continuous community partnership between agencies representing law enforcement (LE), mental health (MH), behavioral health providers, local MH and other service boards, the criminal justice system, advocacy (ADV) organizations, families, and those who use behavioral healthcare services. This partnership is designed to facilitate better outcomes when first responders are called to interact with a person in crisis. That person is often in crisis due to unmet mental health needs. However, the person may also be in crisis due to unmet behavioral health needs such as substance use disorders and other life stressors or a combination of issues and needs.

Communities that establish CIT programs do so based on the following goals:

- ✓ Improve the safety of everyone in situations when law enforcement officers interact with persons in crisis.
- ✓ Improve outcomes when law enforcement officers interact with persons in crisis.
- ✓ Increase understanding of, accessibility to, and improve responsiveness by the local crisis response system.
- ✓ Divert persons in crisis from the criminal justice system to treatment alternatives when possible.
- ✓ Transform the local crisis response system to use law enforcement officers as first responders only when there is an immediate or imminent threat to safety or a serious criminal concern.

CIT programs that volunteer to participate in the Ohio CIT Program Peer Review demonstrate a commitment to achieving these goals. The Peer Review focuses on a program's efforts to develop their CIT program based on the Ohio CIT Core Elements. This interdisciplinary and collaborative learning process is coordinated by the Criminal Justice Coordinating Center of Excellence (CJ CCoE) with the support of the NAMI Ohio. Through this review, we hope to strengthen community partnerships and deepen our understanding of CIT, which will ultimately positively impact the lives of people in our community experiencing mental health crises.

Executive Summary

The Richland County CIT Program volunteered to participate in an Ohio CIT Program Peer Review from November 2024 to February 2025. Participants included Richland County CIT Program members and experienced peer reviewers who are or were CIT program coordinators from other Ohio programs.

The review is designed to help the Richland County CIT Program determine their current level of development in each core element and provide guidance for the next steps in their growth. While the main objective is to help the Program achieve the goals of Ohio CIT programs, its ultimate purpose is to positively impact the lives of people experiencing mental health crises in their community.

The Peer Reviewers used a standards rubric based on criteria from each core element in the *Core Elements of Ohio Crisis Intervention Team Programs*. The standards rubric can be found in the *Ohio Crisis Intervention Team Program Peer Review Guide*. The standards are:

Not Practicing

A CIT program, their CITs, and *relevant agencies* within the program area are not achieving the core element based on the criteria and there is no supporting evidence, or it is unknown.

Emerging Practice

A CIT program or *one or more relevant agencies* within the program area are beginning to achieve the core element based on the criteria. "One or more" means one to fifty percent.

Practicing

A CIT program or *most of the relevant agencies* within the program area are achieving the core element based on the criteria. "Most" means more than fifty percent.

Exemplary Practice

A CIT program, its CITs, and *all the relevant agencies* within the program area are achieving the core element based on the criteria. "All" means one hundred percent.

The Core Elements of Ohio CIT Programs and this assessment are organized into four categories:

- Law Enforcement
- Mental Health
- Training
- Coordination

On the next page is a summary describing where the Peer Reviewers believe the CIT Program is in their development of the Ohio CIT Core Elements. Readers are encouraged to explore this document further to see explanations for the reviewers' assessments and suggestions for the next steps for each core element.

Standards Rubric Key

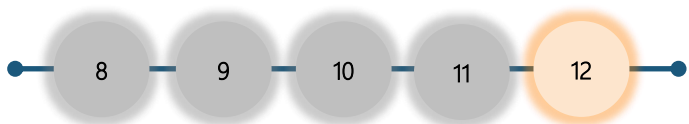


This visual representation shows the Richland County CIT Program's practices compared to each of the 31 core elements for Ohio CIT programs using the standards rubric found in the *Ohio Crisis Intervention Team Program Peer Review Guide*.

Law Enforcement



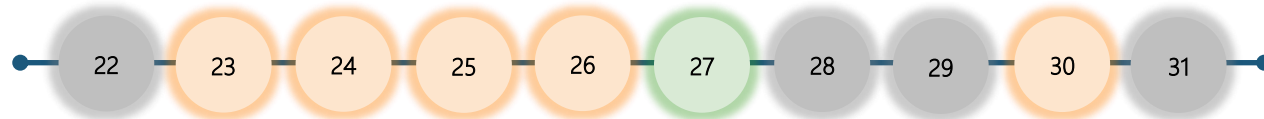
Mental Health



Training



Coordination



The Richland County CIT Program is commended for participating in this peer review to further their understanding of the CIT Model and the Ohio CIT Core Elements. We hope this process allows community partners to come together to discuss the future of their CIT Program and crisis response system, further build partnerships in their community, and foster greater community ownership.

Documents and materials referenced in this document can be found on the CJ CCoE website at: <https://www.neomed.edu/cjccoe/cit/>

Crisis Intervention Team (CIT) Programs: A Best Practice Guide For Transforming Community Responses to Mental Health Crisis can be found on the CIT International website at: <https://www.citiinternational.org/>

Peer Review Process

The review was undertaken to assess the program's level of development of the Ohio CIT Core Elements. It consisted of four phases and took around four months to complete.

Phase 1

Organized program members
 Attended a video conference
 Peer Review Questionnaire
 Provided supporting evidence

In November 2024, the CIT Program organized its members for their participation, learned about the process, completed the Peer Review Questionnaire, and provided documentation.

On December 12, 2024, a video conference was conducted to clarify information and provide reviewers with further background about the program.

Phase 2

Attended a video conference
 Provided clarifying information

Phase 3

Reviewers assessed Program
 Created draft report

From November to January 2025, reviewers assessed the CIT Program against the Ohio CIT Core Elements and created a draft report.

In January 2025, the draft report was completed, and the reviewers met for an on-site meeting with CIT Program members on February 26-2025.

Phase 4

On-site meeting took place
 Report was finalized

After the on-site meeting, the report was updated to reflect current information, provide further clarification, or resolve discrepancies. Once finalized, the report was released to the CIT Program and published on the CJ CCoE website in the Ohio CIT Program Peer Review section.

Ohio Core Elements

The Peer Review is derived from the CIT Model and the Ohio CIT Core Elements. In the *Core Elements of Ohio Crisis Intervention Teams Programs*, thirty-one elements are identified for CIT programs to implement and develop. They are organized into four categories: Law Enforcement, Mental Health Boards and Service Providers, Training, and Coordination. These core elements guide programs to achieve the goals of Ohio CIT programs.

Law Enforcement (LE)

1. Policies and Procedures
2. Patrol Coverage
3. Officer Selection
4. CIT Officer Identification
5. Law Enforcement Coordinator
6. Information Sharing and Data Collection
7. Receiving Centers: Emergency Services

Mental Health (MH)

8. Policies and Procedures
9. Service Linkage and Outreach
10. Mental Health Coordinator
11. Program Monitoring and Data Collection
12. Receiving Centers: Emergency Services

Training

13. CIT Training Courses
14. Advanced and Refresher Training
15. CIT Patrol Officer Training Course is for Experienced Law Enforcement Officers
16. Training Must be Delivered at Minimal Cost to Law Enforcement Agencies
17. Training Must be Locally Focused on the Participants' Criminal Justice and Crisis Response Systems
18. Training Must Focus on Practical Knowledge and Skills to Respond to a Person in Crisis
19. Training Must be Grounded in Adult Learning Principles
20. Training must be Provided by those Prepared to Instruct Law Enforcement and other Public Safety Personnel
21. Evaluations of CIT Training Courses

Coordination

22. Agency Coordinator
23. Program Coordinators
24. CIT Steering Committee
25. Prioritizing Law Enforcement Ownership
26. Maintaining Partnerships and Sustaining CIT Programs
27. Ensuring Advocacy Participation
28. Advancing Diversity, Equity, and Inclusion
29. CIT Program Awareness
30. Recognition and Honors
31. Community Expansion and Statewide Contribution

Richland County CIT Program Background

Richland County delivered their first CIT Patrol Officer Training Course in 2004. Since then, their 40-hour training course has graduated over 330 team members. They have trained LE officers in every agency in the county. They have delivered the following types of training:

- CIT Patrol Officer Training Course

Their current CIT steering committee is comprised of seventeen community partners representing:

- Advocacy
- People with lived experience
- Behavioral Health
- Law Enforcement

The CIT Program is currently coordinated through NAMI Richland County. The CIT program coordinator(s) are:

- Aubrie Hall, Executive Director; NAMI Richland County

The CIT Program is involved with CIT-related initiatives. They include:

- Training
- Regular CIT steering committee meetings
- Recognition and honors

Richland County is involved with other behavioral health initiatives. They include:

- CACY (Community Action for Capable Youth)
- Mansfield UMADAOP (Urban Minority Alcohol & Drug Addiction Outreach Program)
- Richland County Community Alternative Center (Drug and alcohol program)
- Richland County Youth and Family Council
- Starfish Project of Richland County (Treatment options for addictions and life-controlling problems)

Crisis Response System

Richland County offers crisis services in their community to alleviate immediate psychological distress and engage people in treatment. These services include, but are not limited to:

Someone to talk to

988 crisis phone line (24/7)

Catalyst Life Services Helpline 419-522-HELP (24/7)

Emergency communications centers (2):

- Richland County Sheriff's Office (RCSO)
- Mansfield Police Department

Someone to respond

LE agencies (8) - Agencies participating with CIT (6):

- Bellville Police Department
- Lexington Police Department
- Mansfield Police Department
- Ontario Police Department
- Richland County Sheriff's Office
- Shelby Police Department

Somewhere to go

Receiving centers (2):

- OhioHealth Mansfield Hospital (24/7)
- Catalyst Life Services Behavioral Health Urgent Care

Richland County also provides an array of ancillary services and programs to support people living with mental illness and their families. These services and programs include:

Behavioral Health

Crisis phone lines
 Crisis Management
 Employment support programs
 Food programs
 Housing programs
 Inpatient care programs
 Peer support programs
 Veteran programs
 Youth programs

Criminal Justice

Assisted outpatient treatment program
 Court specialty dockets
 Probations programs
 Diversion programs

CIT Program Review – Law Enforcement

1. Policies and Procedures

Not Practicing

- No law enforcement agencies have CIT-specific crisis intervention policies



No information was presented showing that any law enforcement agency has adopted CIT-specific crisis intervention policies. Most policies provided were focused on general crisis response, with no mention of CIT or participation in the Richland County CIT Program. However, reviewers acknowledge RCSO and Mansfield PD for mentioning the use of CIT officers in their response policies.

Next Steps:

RCSO and Mansfield PD should adopt CIT-specific policies. These policies will guide officers and public safety telecommunicators (PSTs), clarify agency expectations, support decision-making, and ensure long-term sustainability. Agencies with vendor-provided policies should tailor them to their specific needs, particularly those related to crisis response and CIT operations. CIT-specific policies should address topics such as:

- A statement that the agency is committed to sustaining a CIT and ongoing collaboration with community partners
- CIT role-based training for select patrol officers and all PSTs
- CIT officers will be dispatched to calls involving persons experiencing a crisis when available and appropriate
- The identification of a CIT coordinator to manage the operations of the CIT and act as the liaison with community partners, including those in the applicable CIT program
- The assignment of select and identifiable CIT officers within the agency so that they are available to be the primary responders to people experiencing a crisis at any time
- Use of a Crisis Intervention Contact Sheet or similar document/process to document interactions with persons in crisis
- Requirements that the agency continually evaluate the CIT and make changes in response to collected data to improve outcomes and mitigate safety risks to agency personnel and the public

The *Crisis Intervention Law Enforcement Policy Guide* can assist with policy development. It can be found on the CJ CCoE website.

2. Patrol Coverage

Not Practicing

- No law enforcement agencies have a published policy equitably distributing CIT officers



No information was presented that any LE agencies study their service call data to distribute their CIT officers. LE agencies have not designated specific officers as primary responders to people experiencing a crisis. None of the provided policies reference practices specific to this core element.

Next Steps:

RCSO and Mansfield PD should adopt policies that address how their agencies equitably distribute select CIT officers. If they have a “train all officers” philosophy, they should designate specific officers to serve as specialists, with their roles outlined in policy. Designating all patrol officers as primary responders to persons in crisis is counterproductive to using specialists and is not encouraged.

3. Officer Selection

Not Practicing

- No law enforcement agency has a review, selection, and recommendation process to identify potential CIT officers as specialists



No information was provided to show that any LE agency has a review, selection, and recommendation process to identify CIT officers as specialists. No provided policies reference any practices specific to this core element.

Next Steps:

LE agencies that actively participate in training should adopt policies that address how their agency selects when an officer is ready to attend training. If an agency has a “train all officers” philosophy, it should designate specific officers to serve as specialists, with their roles outlined in policy. Designating all patrol officers as primary responders to persons in crisis because they attended CIT training is problematic and counterproductive to using specialists.

4. CIT Officer Identification

Not Practicing

- No law enforcement agencies require CIT officers in a specialized team to wear an obvious CIT pin or emblem



Since no law enforcement agency policies address the identification of CIT officers, there is no evidence to suggest that members of specialized CIT teams are required to wear a visible CIT pin or emblem. Other types of proof were not provided. CIT pins are provided to officers after graduating from the CIT Patrol Officer Training Course.

Next Steps:

LE agencies that actively participate in training are encouraged to adopt policies that address CIT officers wearing a visible CIT pin or emblem. When combined with a marketing strategy informing the public of the pin or emblem's meaning, community members can easily recognize that a responding officer has specific skills and training for responding to people in crisis.

5. Law Enforcement Coordinator

Not Practicing

- No law enforcement agencies have a designated person within the agency to coordinate its CIT and liaise with other agencies and partners



No information was provided that any LE agency has a designated person within the agency to coordinate its CIT and liaise with other agencies and partners. No policies describe a position for an agency representative to coordinate its CIT.

Next Steps:

LE agencies should elevate their involvement in CIT by developing policies that formalize the roles and responsibilities of its members. Formally designating a CIT coordinator within a LE agency is essential in developing a CIT's organizational structure. Coordinators help align the agency's efforts to achieve the goals for Ohio CIT programs and ensure that each member understands how their contributions enhance the larger mission. CIT coordinators can assist with policy development and implementation, communication with community partners, and goal alignment.

6. Information Sharing and Data Collection

Not Practicing



- No law enforcement agencies share information with program partners about contact with a person in crisis to engage available behavioral health services, and
- No law enforcement agencies are extracting data from contacts to monitor and assess its CITs and interactions with persons in crisis

No information was provided to demonstrate that any law enforcement agency shares information with program partners about contacts with persons in crisis to engage available behavioral health services. Furthermore, no evidence was presented to indicate that any law enforcement agency is extracting data from these contacts to monitor and assess its CIT program or interactions with persons in crisis. The Program Coordinator – ADV is commended for their proactive efforts in regularly contacting police agencies to obtain public records, reviewing them for crisis-related calls, and reaching out to offer resources and support. This exemplary dedication to helping individuals in crisis and their families highlights the importance of linkage and addressing community needs.

Next Steps:

LE agencies are encouraged to begin sharing information with program partners about contacts with persons in crisis. Sharing will allow service providers to engage persons in crisis in available behavioral health services. Information should be provided in a format (e.g., Crisis Intervention Contact Sheets) where data can be easily extracted to monitor and assess a CIT's interactions with persons in crisis and evaluate the Program's overall crisis response.

7. Receiving Centers: Emergency Services

Not Practicing



- No documentation or data showing the use of receiving centers and community resources by law enforcement agencies

Since no law enforcement agencies are extracting data from contacts to monitor and assess their CIT programs and interactions with persons in crisis, there is no documentation or data demonstrating the use of receiving centers or community resources by these agencies. Additionally, the provided policies did not reference any practices specific to this core element.

Next Steps:

LE agencies are encouraged to track and analyze officers' use of the emergency hospitalization process (ORC §5122.10). In doing so, agencies and CIT programs can better evaluate whether transports to receiving centers are necessary or identify areas for improvement. This information should be shared with appropriate community partners in a clear and accessible format that highlights outcomes.

CIT Program Review – Mental Health

8. Policies and Procedures

Not Practicing

- No service providers have published CIT-specific policies and procedures



No information was provided to indicate that the Behavioral Health Board, service providers, or other behavioral health partners have policies or procedures related to their involvement in CIT or their interactions with LE agencies.

Next Steps:

The Richland County Mental Health & Recovery Services Board, service providers, and other behavioral health partners are encouraged to develop policies specific to a CIT and how they participate in the CIT Program. Their policies should focus on their involvement in CIT, interactions with LE, and monitoring related activity. The CIT Steering Committee is encouraged to develop a formal agreement between program partners to outline the terms and details of their Program. A Memorandum of Understanding or Agreement (MOU/MOA) should be designed for program partners to express a genuine commitment to their collaboration and set the groundwork for agency policies and procedures. Their receiving centers should develop policies and procedures specific to LE transfers of people in crisis to them for care. For those agencies providing service linkage and outreach from LE agencies, their processes should be formalized in writing and provided to the Program. The CIT Patrol Officer Training Course should cover all mental health policies and procedures.

9. Service Linkage and Outreach

Not Practicing

- No relevant service providers have policies and procedures to prioritize service linkage and follow-up to persons in crisis that have had contact with law enforcement



No information or proof was provided to show that service providers have policies specific to service linkage and outreach to persons in crisis who have had contact with LE.

Next Steps:

Service providers that provide linkage and outreach to persons in crisis are encouraged to develop policies and procedures that prioritize linkage and follow-up to persons who have had contact with LE, specifically where potential continued criminal behavior is involved.

10. Mental Health Coordinator

Not Practicing

- No service providers have a designated person within their agency to coordinate and liaise with other agencies and partners



No information was provided to show that service providers have a designated person or persons to coordinate their activities within their CITs or CIT program.

Next Steps:

Service providers should elevate their involvement in CIT by developing policies that formalize the roles and responsibilities of its members. Formally designating a CIT coordinator within a behavioral health agency is an important step in developing a CIT's organizational structure. Coordinators help align the agency's efforts to achieve the goals for Ohio CIT programs and ensure that each member understands how their contributions enhance the larger mission. The coordinator's responsibilities include policy and procedure development, data collection, program implementation and monitoring, and receiving center coordination with LE agencies. They should sustain contact with other CIT community partners to help coordinate LE's role within the crisis response system, contribute to accurate program evaluation, and assist with training.

11. Program Monitoring and Data Collection

Not Practicing

- No data is collected and analyzed relevant to service providers' interactions with a person in crisis, either transferred or referred to them by a law enforcement agency



No information was provided that data is collected and analyzed relevant to service providers' interactions with a person in crisis, either transferred or referred to them by a LE agency.

Next Steps:

The Steering Committee is encouraged to begin developing strategies that encourage service providers to begin collecting data relevant to interactions with a person in crisis, either transferred or referred by a LE agency. Collected and analyzed data can help identify trends and patterns, improve accountability and transparency, and provide a clearer understanding of LE's interactions with people in crisis.

12. Receiving Centers: Emergency Services

Emerging Practice

- 1 receiving center is operating all the time in the service area



OhioHealth Mansfield Hospital and Catalyst Life Services Behavioral Health Urgent Care are the two receiving centers serving Richland County's LE agencies. OhioHealth Mansfield Hospital is always open. The hospital does not have policies specific to transferring custody of a person in crisis from LE officers. Catalyst Life Services Behavioral Health Urgent Care also receives people from LE agencies but is only open during the day.

Next Steps:

Receiving centers are encouraged to develop procedures to receive people in crisis from LE officers and then safely, efficiently, and quickly transition those in crisis to care and assessment.

CIT Program Review – Training

13. CIT Training Courses

Emerging Practice

- Provides the CIT Patrol Officer Training Course



The CIT Program regularly provides the CIT Patrol Officer Training Course. Since their initial training in 2004, they have trained over 330 sworn officers.

Next Steps:

The CIT Program is encouraged to broaden the CIT Patrol Officer Training Course based on their training needs. The CIT Program is encouraged to develop a multi-year training plan to provide comprehensive CIT role-based training. This plan should be reviewed annually and include advanced and refresher training.

14. Advanced Training and Refresher Training

Not Practicing



- The CIT Program does not provide advanced and refresher training

No information was provided that the CIT Program has provided advanced or refresher training.

Next Steps:

The CIT Program is encouraged to design a multi-year training plan incorporating advanced and refresher training. The plan should increase the training complexity over a select number of years. Trainings should be based on a needs assessment from collected data and other relevant community factors.

15. The CIT Patrol Officer Training Course is for Experienced Law Enforcement Officers

Not Practicing



- The CIT Program does not have a selection process for officers to attend the CIT Patrol Officer Training Course

In Richland County, participating LE agencies prefer to send all their officers to the CIT Patrol Officer Training Course. The LE agencies and the Program do not use a selection process.

Next Steps:

The CIT Program and participating LE agencies should adopt policies that address when officers will attend the CIT Patrol Officer Training Course. Selected officers should be experienced volunteers primarily assigned to the patrol function. When policies identifying readiness are adopted, the learning experience is enhanced, active engagement increases, and the impact of the training on participants' skill development and application in real-world contexts is maximized.

16. Training Must be Delivered at Minimal Cost to Law Enforcement Agencies

Practicing

- No training fees are charged to attend CIT training courses



No training fees are charged to attend CIT training courses. Funding for these courses does not come from instructional fees.

Next Steps:

The CIT Program should explore whether funding concerns hinder LE agencies from participating in CIT role-based training courses and other program functions. If attendance costs are found to prevent participation, the Program should explore available funding sources to reimburse LE agencies for sending staff to training and related activities.

17. Training Must be Locally Focused on the Participants' Criminal Justice and Crisis Response System

Practicing

- Team members attend CIT training courses related to their criminal justice and crisis response Systems, and
- Locally sourced instructors instruct team members



The CIT Program instructs their members on their criminal justice and crisis response systems. Instructors are locally sourced and are experienced in the local conventions and methods within their crisis response system.

Next Steps:

Participating agencies should develop policies and procedures specific to CIT. Once policies and procedures are implemented, the CIT Program should incorporate them into their training courses. The Program is encouraged to strengthen their roster of instructors to prevent burnout, account for potential turnover, and provide more training. The Steering Committee should develop strategies to build and sustain instructor development and involvement.

18. Training Must Focus on Practical Knowledge and Skills to Respond to a Person in Crisis

Exemplary Practice



- All Training courses include role-specific instruction on interacting with persons in crisis, and
- All Training courses include role-specific crisis scenarios and practicum (“role plays”), and
- The CIT Patrol Officer Training Course includes instruction on determining fact-based probable cause for emergency hospitalization when assessing a person in crisis

The CIT Patrol Officer Training Course provides instruction on interacting with a person in crisis, and officers are allowed the opportunity to practice. Instruction on assessing a person's mental state, emergency hospitalization, relevant legal issues, and processes is also provided.

Next Steps:

The CIT Program should continue their exemplary practice and update and modify their training practices as needed. They should continue to explore new and innovative methods to train CIT members on current policies, practices, and laws/legal issues.

19. Training Must be Grounded in Adult Learning Principles

Emerging Practice



- Training courses have learning/performance objectives
- Training course topics lack sequencing in a carefully considered manner

A review of the training schedule indicates that the sequencing of topics within the CIT Patrol Officer Training Course has been thoughtfully considered. Most topics are delivered in a sequential manner that facilitates effective learning. However, overarching training goals and specific learning/performance objectives for individual topics appear to be absent.

Next Steps:

The Steering Committee should regularly evaluate the sequencing of topics to ensure they are organized for maximum impact. Additionally, the committee should establish clear goals for their training courses and collaborate with instructors to develop learning and performance objectives for each topic. The program is encouraged to utilize the *CIT Patrol Officer Training Course Goals and Performance Objectives* guide, available on the CJ CCoE's website, as a resource.

20. Training Must be Provided by those Prepared to Instruct Law Enforcement and Other Public Safety Personnel

Practicing

- Instructors' materials and content are reviewed, and
- Pre-class meetings take place with instructors to ensure they are effective at content instruction



The CIT Program Coordinator – ADV identified in the peer review questionnaire that instructors' materials and content are reviewed before training and that instructors are met with before training to ensure they are effective at content instruction. No other information was provided to review specific to this core element.

Next Steps:

The CIT Steering Committee is encouraged to develop a training subcommittee. This subcommittee can review instructors' materials and their ability to deliver them to a role-specific audience. The subcommittee can also work with instructors to enhance other areas of their training and abilities, including understanding the roles and culture of those attending the training course. The Program should put their practices in writing related to how they coordinate, prepare, and support their instructors. Formalizing these practices will help future program coordinators learn how the training program operates and assist with sustaining and advancing current training practices.

21. Evaluations of CIT Training Courses

Emerging Practice

- Training course evaluations are conducted (level 1), or
- Training course topic evaluations are conducted (level 1)



The CIT Program uses surveys to obtain Kirkpatrick Level One (Reaction) feedback from training participants. Evidence was provided for the CIT Patrol Officer Training Course delivered from October 7-11, 2024. Slides with embedded quick response (QR) codes were submitted for review. Those codes led to an online daily evaluation screen using Microsoft Forms for the first four training days, including four questions using a five-point Likert scale. Those questions asked about the quality of the content and organization, overall speaker (presenter) presentations, the quality of training materials, and the degree to which the training for the day met the participant's expectations. One additional open-field question asked for comments, suggestions, or concerns about the day's presentations and listed the day's topics and instructors. A document titled "Overall Training Evaluation" was also received. This document asked nine questions using a five-point Likert scale and four additional open-field questions. The questions seek reaction-level feedback about the entire course and responses about the

participants' beliefs regarding the knowledge or skills they attained during the training. No completed survey documents were provided, and no summary of survey responses was provided.

Next Steps:

The CIT Steering Committee should add items to their reaction-level surveys. Questions should be added to the daily evaluation to gather information about each presenter independently of the topic presented and each topic instead of one question about the presenters and topics for the entire day. Those questions about presenters and topics can be Likert-scaled to reduce the effort to answer them. Asking a single question about the aggregate day's activities and presenters requires participants to use open fields, which poses a challenge for those extracting open-field information. Evaluation questions for the fifth training day should be added to get feedback about the role-plays and the scenarios that were used. The overall course evaluation should add questions to get feedback about the physical training location(s).

In addition to recommendations about additional questions, responses to the surveys should be stored for easy access, and a summary of the responses should be created and shared with presenters/instructors, steering committee members, and other pertinent community partners so that the Steering Committee can determine if the material or presenter/instructor needs additional review.

The Steering Committee should consider conducting Kirkpatrick Level Two (Learning) evaluations for those scenarios as a learning check or practicum. Skills checklists can be used during scenarios to determine if attendees apply their training. The checklist should contain all the elements and desired behaviors for a successful interaction with a person in crisis and should be rated as either "pass" or "fail." These evaluations could also come from pre-tests/post-tests with the same questions to determine if knowledge increased. The Program has submitted a document titled "CIT Pre-Training Survey" that asks the participants about their roles and feelings about various issues. However, most of the answers to the provided questions cannot be quantified or compared with a "post-training" survey with the same questions to determine if knowledge and skills increased due to the training course. The current survey has value in determining participant beliefs and gaining information from them, but it appears to be something that should be sent in advance to course participants. Pre-tests and post-tests should have the same questions and then be compared afterward to see if Likert-scaled questions had higher averages and if open-field responses appeared to show more positivity.

CIT Program Review – Coordination

22. Agency Coordinator

Not Practicing

- No are no designated agency coordinators in the program



No information was provided that any participating LE or MH agency has a designated person to coordinate their CIT.

Next Steps:

Participating LE and MH agencies should establish policies specific to CIT and clearly define the coordinator role. Each agency should designate a coordinator responsible for managing CIT activities and facilitating collaboration with other LE and MH agencies and partners within the CIT Program. The CIT Steering Committee should educate agency leadership on the CIT Model and Ohio CIT Core Elements, ensuring their commitment to fulfilling their responsibilities within the CIT framework.

23. Program Coordinators

Emerging Practice

- The program has one designated coordinator



The only identified CIT Program Coordinator currently represents advocacy. The Program's Law Enforcement Coordinator recently retired, and new coordinators for law enforcement and mental health advocacy have yet to be identified or appointed.

Next Steps:

Sustained participation from program coordinators across all disciplines is essential for the success of a CIT program. To ensure active engagement from law enforcement, individuals living with mental illness, and their families, the CIT Program should develop strategies to identify, recruit, and cultivate leaders in both law enforcement and mental health. In particular, the coordinator for law enforcement assumes the crucial role of a CIT advocate within the law enforcement community, emphasizing the importance of the CIT Model and Ohio CIT Core Elements. This person serves as a champion for CIT, promoting the significance of law enforcement committing to their role within the CIT framework.

24. CIT Steering Committee

Emerging Practice



- A CIT steering committee is identified, and
- Most of the disciplines have representatives

The CIT Program has created a steering committee with representation from all three disciplines. By doing so, the Program benefits from diverse perspectives that greatly enhance the quality of its outcomes.

Next Steps:

The Steering Committee should regularly update its roster and is strongly encouraged to formalize its operational practices. Beyond focusing solely on training-related meetings, the committee should establish long-term objectives and develop strategies that actively engage community partners. Additionally, the committee should create written guidelines that outline:

- Their goal or purpose
- Persons and positions needed, along with the disciplines they represent
- Regularly scheduled meetings and special meetings, if needed
- A chairperson to coordinate and facilitate meetings, activities, etc.
- A process to determine who will oversee meetings, agendas, and discussion items
- A process to capture meeting minutes to record discussions and actions taken

While doing so, they are strongly encouraged to enhance their documentation of initiatives and activities, ensuring that meeting minutes are thorough and easily accessible. Creating well-defined agendas, establishing action plans and goals, and diligently tracking progress toward those objectives are important. Consideration should be given to forming subcommittees dedicated to training, crisis response system navigation, and program evaluation.

A well-structured CIT steering committee provides an environment of collaboration, inclusivity, leadership, and structured decision-making. This approach enhances the likelihood of developing and implementing successful CIT strategies that address the community's needs while empowering and supporting individuals and families affected by the issues being addressed.

25. Prioritizing Law Enforcement Ownership

Emerging Practice

- CIT Program actively engages one or more participating law enforcement agencies about their CIT strategies



Most LE agencies in the county participate in the CIT Program through training. No other information was provided to show that the program is currently engaging in CIT strategies beyond training.

Next Steps:

The program is encouraged to continue to find ways to get investment and participation from LE leadership or other influential community leaders. Getting this investment can also be enhanced by recruiting a prominent person in the community who influences leaders and decision-makers. Strategies can be found in Chapter 2 of *Crisis Intervention Team (CIT) Programs: A Best Practice Guide for Transforming Community Responses to Mental Health Crisis*. The CIT program is encouraged to document these activities in meeting minutes or other records.

26. Maintaining Partnerships and Sustaining CIT Programs

Emerging Practice

- Assessment and improvement strategies are used



The CIT Program is commended for initiating the implementation of assessment and improvement strategies, such as the "CIT Training Preparation Flowchart." This flowchart highlights a commitment to continuous improvement, supporting the sustainability of CIT programs. It outlines detailed processes, including registration, emailing participants, updating evaluations, food preparation, and post-training follow-up.

Next Steps:

The CIT Program is encouraged to allocate further time to developing assessment, improvement, and sustainability strategies. These strategies could include formalizing the operational practices of the steering committee, leadership succession planning, and enhanced record-keeping practices. So that the CIT Program does not regress, successful CIT strategies, lessons learned, and knowledge gained should be managed and passed on. Regression avoidance can come from mentoring, workload distribution, robust documentation methods, and knowledge management plans.

27. Ensuring Advocacy Participation

Practicing

- People living with mental illness and their family members participate in training, and
- Advocacy leaders participate in training and program coordination



The CIT Program is commended for its strong leadership rooted in advocacy and its efforts to include advocacy participation further. Advocacy leaders, alongside individuals living with mental illness and their family members, play an integral role not only in training CIT members but also in coordinating efforts and actively participating in the program. This collaborative approach strengthens the program's foundation, ensuring effective communication, meaningful partnerships, and a shared commitment to its success.

Next Steps:

The CIT Program is encouraged to allocate time to ensuring advocacy participation through succession planning. The Program is encouraged to identify critical positions and individuals and create a learning and development process that can be repeated and evaluated.

28. Advancing Diversity, Equity, and Inclusion

Not Practicing

- There are no strategies in place to recruit, include, and empower team members who bring different perspectives and backgrounds to the program



The CIT Program does not utilize formal strategies to advance diversity, equity, and inclusion (DEI) for team members who bring different perspectives and backgrounds to the program.

Next Steps:

CIT programs should ensure that they accurately reflect the populations they serve. The Program should consider dedicating CIT steering committee members or establishing a subcommittee to explore ways to measure their DEI success and strategies to sustain and advance efforts within their program. CIT programs rich in DEI practices can experience a better understanding of community needs, increase trust and engagement, and develop better ways to target and allocate resources more effectively.

29. CIT Program Awareness

Not Practicing

- There are no strategies in place about how to request and identify CIT officers



No information was provided that strategies are in place to request and identify CIT officers.

Next Steps:

The CIT Program is encouraged to develop and implement awareness strategies for community members to request and identify CIT officers and inform them about CIT, its benefits, and how they can interact with CIT members. CIT programs are more impactful when community members know how to identify and gain access to CIT officers and other services encompassing their crisis response system. Trust plays a vital role in cultivating effective relationships between the community and members of the crisis response system, and the Program is encouraged to enhance and fortify this bond.

Further program awareness strategies can be found in Chapter 6 of *Crisis Intervention Team (CIT) Programs: A Best Practice Guide for Transforming Community Responses to Mental Health Crisis*.

30. Recognition and Honors

Emerging Practice

- The program regularly recognizes and honors their CIT members



The CIT Program is commended for regularly recognizing outstanding contributions through the “Officer Brian Evans CIT Award,” which honors their CIT Officer of the Year. This recognition demonstrates a strong commitment to acknowledging excellence within their program. No information was provided to indicate that agency CITs similarly recognize and honor other CIT members for their efforts and dedication.

Next Steps:

LE agencies should establish both formal and informal practices to recognize officers and PSTs who positively engage with individuals in crisis and share these practices with the CIT Program. Regular recognition of their challenging and honorable work reinforces commitment and fosters a culture of care within the agency. Expanding recognition to include PSTs, coordinators, mental health professionals, individuals with lived experience, and administrators can further boost morale, encourage program growth, and raise awareness of the CIT Program.

The CIT Program is encouraged to collect and track examples of recognition and honors awarded by their CITs. Publicly sharing these examples can enhance morale, stimulate further program development, and increase awareness of the CIT Program's impact.

31. Community Expansion and Statewide Contribution

Not Practicing

- Non-participating agencies are not engaged, and
- Members of the program do not attend activities at the state level



No information was provided that the program is engaging non-participating agencies or that its members are attending state-level activities. This lack of involvement limits opportunities to foster collaboration, share experiences, and contribute to their understanding or the advancement of CIT.

Next Steps:

The CIT Program is encouraged to engage non-participating LE agencies, find ways to prioritize LE's involvement, and foster positive partnerships. The Program should document efforts and strategies in steering committee meeting minutes and other records. Members of the CIT Program are encouraged to participate in state-level activities. With further exposure to the CIT Model and the Ohio CIT Core Elements, members will increase their understanding of CIT and provide valuable guidance to newer members while enhancing their CITs and CIT Program.

Next Steps Worksheet

Law Enforcement

- RCSO and Mansfield PD to adopt CIT-specific policies (1,2,3,4)
- RCSO and Mansfield PD to designate CIT coordinators (5,22)
- RCSO and Mansfield PD to share information with program partners about contacts with persons in crisis (6,7)
- RCSO and Mansfield PD to use Crisis Intervention Contact Sheets (6,7)

Mental Health

- The Richland County Mental Health & Recovery Services Board and Catalyst Life Services Behavioral Health to develop policies related to their involvement in CIT (8,9)
- The Richland County Mental Health & Recovery Services Board and the CIT Steering Committee to develop a formal agreement between program partners to outline the terms and details of the CIT Program (8)
- The Richland County Mental Health & Recovery Services Board and Catalyst Life Services Behavioral Health to designate a staff member to act as a CIT coordinator (10,22)
- Catalyst Life Services Behavioral Health to collect data relevant to their interactions with a person in crisis, either transferred or referred to them by a LE agency (11)
- Catalyst Life Services Behavioral Health Urgent Care and OhioHealth Mansfield Hospital to develop procedures to receive people in crisis from LE (12)

Training

- Develop a multi-year training plan that includes advanced and refresher training (13,14)
- CIT Program and LE agencies to adopt policies that address which officers will attend the CIT Patrol Officer Training Course (15)
- Determine if monetary reasons contribute to a lack of participation by LE agencies in CIT initiatives (16)
- Develop a strategy to build and sustain instructor involvement (17)
- Evaluate the sequencing of topics within their CIT Patrol Officer Training Course (19)

- Develop goals for their training courses (19)
- Develop complete learning/performance objectives for each topic (19)
- Develop a training subcommittee (20)
- Record practices in writing related to coordinating, preparing, and supporting instructors (20)
- Update the evaluation form for the CIT Patrol Officer Training Course per the recommendations provided in *Evaluation of CIT training Courses* (21)

Coordination

- RCSO, Mansfield PD, The Richland County Mental Health & Recovery Services Board, Catalyst Life Services Behavioral Health, and OhioHealth Mansfield Hospital to develop CIT-specific policies and define the coordinator position (22)
- CIT Program to educate LE and agency leadership on the CIT Model and the Ohio CIT Core Elements (22)
- CIT Steering Committee to designate program coordinators for mental health and law enforcement (22)
- CIT Steering Committee to develop a statement to define their goal and purpose (24)
- CIT Steering Committee to designate a chairperson to coordinate and facilitate meetings, activities, etc. (24)
- CIT Steering Committee to develop a process to capture meeting minutes to record discussions and actions taken (24)
- CIT Steering Committee to enhance their documentation of CIT initiatives and activities (24)
- Develop strategies to get investment and participation from RCSO and Mansfield PD leadership (25)
- Develop sustainability strategies (26)
 - Enhancing record-keeping practices
 - Workload distribution
- Ensuring advocacy participation through succession planning by developing a learning and development process (27)

- Dedicate CIT Steering Committee members or establish a subcommittee to explore ways to measure their DEI success and strategies (28)
- Explore funding opportunities for continued awareness campaigns (29)
- Promote CIT and other crisis services that do not involve LE or the criminal justice system (29)
- Develop practices to honor and recognize CIT members regularly (30)
- Engage non-participating LE agencies and document their efforts and strategies in their steering committee meeting minutes and program records (31)
- CIT Program Coordinators to participate in activities at the state level (30)



This report was completed by the Ohio CIT Coordinator & Law Enforcement Liaison for the Ohio Criminal Justice Coordinating Center of Excellence in cooperation with the staff of the CJ CCoE, consultants, peer reviewers, and CIT program community partners. For more information or to make inquiries, please contact:

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