

CRISIS INTERVENTION TEAM TRAINING  
BEXAR COUNTY SHERIFF'S OFFICE

## **CIT Response and Guidelines**

### **INSTRUCTORS:**

Goal:

The goal of this course is to help the officer recognize crisis behavior and respond according to the level of escalation.

Objectives:

The Students will be in a classroom setting for the lecture and in a classroom or outdoors for the practical skills exercise.

- Officers will be able to explain Crisis Behavior and its relevance to CIT Training
  
- Officers will be able to define the cycle of crisis behavior along with the escalation Cycle
  
- Officer will be able to list the four levels of escalation and the officer's response to each level
  
- Officers will be able to identify police interactions with persons who have a mental illness

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- Officers will be able to explain how to utilize observation as a tool for evaluative purposes
- Officers will be able to discuss additional ways to obtain useful information for evaluative purposes
- Officers will learn how Crisis Intervention Techniques can be utilized in domestic disturbance situations
- Officers will discuss emerging trends in Crisis Intervention techniques

### **Introduction CIT Response**

#### **Crisis Behavior and its relevance to CIT Training**

“As a law enforcement officer, you are often called into action when something is wrong: when someone has been assaulted, robbed, or injured or when there is a confrontation or the threat of a confrontation. You interact with people who are angry, emotional, injured, frightened, or traumatized. Some of these people welcome your presence, while others resent it. You face situations that are, or could easily become, violent and threaten you, your fellow officers, and members of the public with injury or death. Many of these incidents involve complex interpersonal and legal

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situations in which you must protect yourself and others while maintaining your authority and respecting the rights of the public.”

**CIT Officer Qualities**

This is important when applying tactics due to the fact we must know the foundation of what is necessary when responding to persons in mental crisis.

**OUR SAFETY IS AND WILL**

**ALWAYS BE OUR #1 PRIORITY.**

Do not be part of the problem, be part of the solution.

Always ensure that all proper equipment and needs are accounted for prior to response.

**Traits and characteristics of a CIT Officer:**

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**Adaptability-** The officer's ability to adapt to both the environmental stimuli of the situation as well as the person in crisis.

**Creativity-** Ability to use life experience, and learned experiences to create positive outcome of the situation.

**Empathy-** Ability to show compassion to person in crisis when there is no personal experience with specific cause of the crisis.

**Sympathy-** Ability to speak to the person in crisis with personal experiences and understanding.

**Insight and reasoning-** Firsthand knowledge of specific illness' person may be suffering with. Knowledge of resources, medications, outreach and support that provide a life of quality as opposed to existence.

**Good listening skills-** Active listening skills (taught during class). Remembering person's name, using repetitively. Listening for **escalators and de-escalators**.

**Cycles of crisis behavior**

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### Definition of Crisis

**Crisis-** person suffering from a temporary breakdown in coping skills.

Perception

Decision making

Problem solving abilities

Anyone can suffer from a crisis and its effects can vary with time, place, and person. (Examples: Being locked out of the home, losing a job, being a victim of a crime, getting a divorce, being involved in a traffic stop or accident). Individuals with a mental illness are not more likely to display violent behavior than the general population at large.

### Cycle of a crisis

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Onset- Incident / Occurrence causing a person to become excited, active, upset, or physically uncomfortable.

Escalation and anger- Obvious signs of distress and observable changes (physically and behaviorally) begin to occur.

Red face

Tense muscles (tight face, clenched fists)

Talking more and/or louder or quiet and withdrawn

Increased activity (pacing, rocking, etc.)

Out of control behavior

Aggression

Screaming and yelling

Throw or hit things

Assaultive actions

**Response to a Crisis Call**

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### Basic Approach

Use your position of authority in a calm and professional way. This approach works well when dealing with the mentally ill. Distance may be increased when dealing with the mentally ill. Peace officers should not be overly authoritative and commanding to best control a situation.

Have a cover officer and do not cancel him/her even if you know the subject or are familiar with him. Each time is different and is potentially dangerous to the officer. There are just some cases where talking will not work. We need to be able to readily identify when physical action must be applied for the safety of others, the subject, and ourselves most importantly. Keep in mind that the mere presence of a person in uniform may cause an individual with mental illness to become upset.

### Cover officers' responsibilities

Safety for the primary officer

Note taking

Dangers within the room/area

Use of "Cop Cards"

Calls- Placement /EMS /Info/ Poison Control

Assist with rapport

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Gathers medications / Family Info / Doctor Info

**Factors to initiate law enforcement involvement**

Person has made a threat to harm self

Person has made a threat to harm others

**Factors that do not initiate law enforcement involvement**

Subject has a history of bizarre behavior

Subject is dressed inappropriately

Subject is known by the community as being  
diagnosed with a mental illness

**Officer's Goals**

Suspend emotions temporarily to listen for cues in  
an effort to be effective.

Guide the crisis individual into a stage more  
conducive to communication and interchange.

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Utilization of prior training and experience acquired for stressful situation scenarios.

### Escalation of Violence

#### **Level 1: Anxiety**

**Consumer-** Helplessness/Dread – Associative feeling/emotions during this level of escalation by the consumer

**Officer Goals** – Provide support to restore the individual's sense of control. Face the person squarely; Model an open and relaxed posture. One of the first steps to take in approaching a person exhibiting symptoms of a mental illness is to respect the person's personal space.

#### **Level 2: Anger**

**Consumer-** Feeling anger may reduce the dread of anxiety and bring the person a sense of power and control. Thought process becomes more concrete, less flexible and more non-verbal.

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**Officer Goals-** Keep person talking to you and utilize this time to de-escalate.

Acknowledge the anger but do not agree with the behavior

Offer opinions, choices, and consequences for decisions

**Active communication/listening skills**

**Level 3: Hostility**

**Consumer-** Hostility is anger focused on a target. Irritability, argumentative, demanding, antagonistic, and oppositional behaviors accompanied by loud and threatening verbal and non-verbal communication.

**Officer Goals-** Obtain immediate control of the situation by using techniques to include:

Clearly state acceptable boundaries

Be professional and clear in your non-verbal communication

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Be consistent in tone, volume and message

Utilize short sentences and repeat as needed

Firmly give directives

Do not engage in accusations or arguments, do not threaten or promise statements that can't be followed through with.

**Level 4: Violence**

**Consumer-** Violence is aggression with a target on destruction with a goal of injury.

Goal of Officer- Safety, protect yourself and others.

Don't make sudden moves

Do not take insults personally or be baited into doing so

Maintain eye contact and remain at a safe distance until cover arrives.

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**Interacting with the Mentally Ill**

**Identifying/Indicators**

Nature of the Illness- hearing voices, cutter, manic, or withdrawn

Severity of the Illness- Injured, flight of ideas, ideations/ homicidal/suicidal

Personality of the person- borderline

Other influences (intoxicated and/or medicated)

**Communicating with a person in crisis**

The best way to give instructions to a person with a mental illness is to talk **clearly and briefly**

Be patient, avoid crowding, and give them time to calm down

Double-check information by restating what you hear

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Use the person's name when speaking to them

Give directives one at a time and give them time to comply

Call for cover

Don't play along into delusions or hallucinations to lessen the chance of a violent confrontation, simply validate them and move on

Inquire about past treatments; this may help with possible solutions

**Obtaining information from a person in crisis**

What is your name?

How do you feel today?

Are you under a doctor's care, do you take medications?

When did you last eat/sleep?

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What is today's date?

Who is the President of the United States?

Are you feeling homicidal or suicidal?

Are you hearing voices/ seeing things?

Do you have a mental illness?

**Three Minute Assessment**

Observations and assessments made by the officer on first contact. Measures the dangerousness of situation for consumer and officer helps in determining if additional resources or personnel will be necessary at the scene.

Mindset of the individual- incongruent statements made by the consumer unrelated to the question asked.

Focus- What is the person looking at? (Door, gun, third party)

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Body language- Defensive, depressive, blank stare, aggressive

Emotions- Do the emotions match the situation

**CIT response to domestic disturbances**

CIT training is of a type that is applicable to not only dealing with the mentally ill, but to those involved in traumatic events.

If you assess a situation in which a person is exhibiting disruptive, bizarre behavior, but that behavior does not pose an immediate danger to the subject, officer, or others, the officer should diffuse the crisis and give the person a referral to an appropriate social service agency.

Active listening skills help to communicate better understanding of the situation

It can help in calming a situation down, **clearly and briefly.**

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When responding to a community disturbance and the dispatcher is able to only tell you that a person is acting bizarre and verbally threatening the first action you should do is determine the presence of weapons and ensure the safety of yourself and others in the area.

*Officers will discuss emerging trends in Crisis Intervention techniques*

**The value and importance of CIT**

Liability- Training to help calm and de-escalate a crisis situation

More people receiving care and services reduces the need for patrol response

Reduces complaints

Provides insight into the challenges that the mentally ill and families face day to day

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