

JACKSON COUNTY CRISIS INTERVENTION TEAMS (CIT)



Quarterly Progress Report, March 2009

Prepared for:
Jackson County Community Mental
Health Fund
Mid-America CIT Council (MACITC)
Jackson County CIT Coordinators

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Kansas City's Leader for Evaluation, Research, and Consultation Services

Picture: One of Bartle Hall's art deco pylons, an unmistakable fixture in the Kansas City skyline.

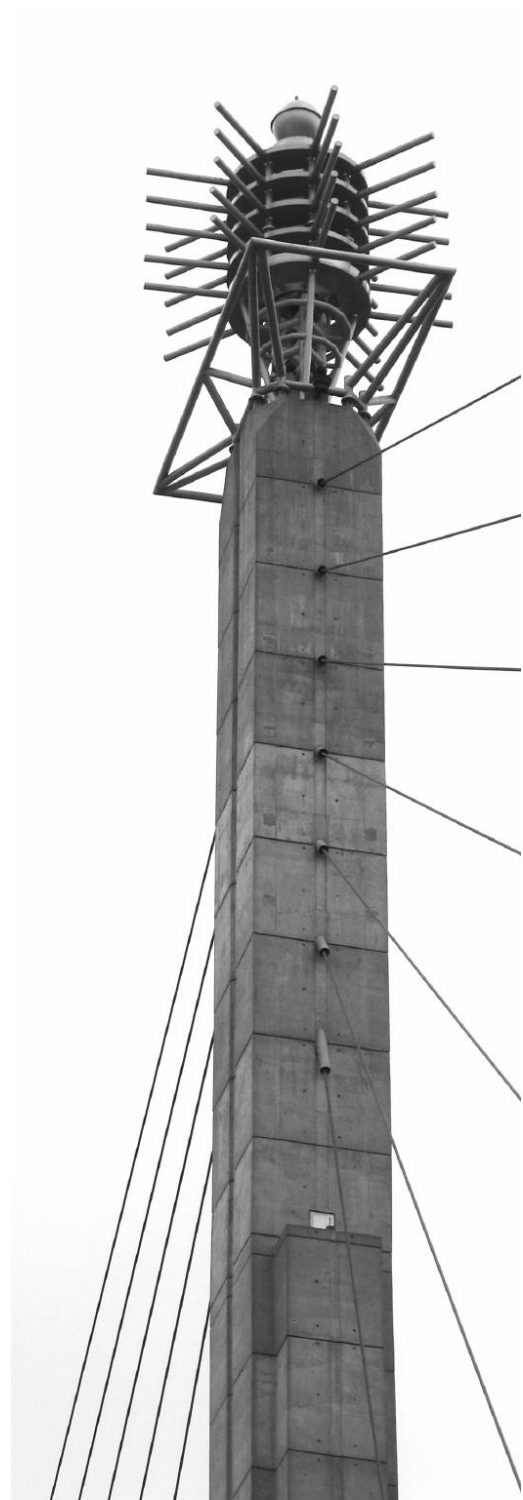


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EXECUTIVE SUMMARY

This report presents findings of the evaluation of Crisis Intervention Teams (CIT) in Jackson County Missouri. The evaluation is funded by the Jackson County Missouri Community Mental Health Fund, a local tax levy for indigent mental health services.

A process evaluation was conducted in the last quarter and indicated that during 2008, participation by departments in the MACITC was inconsistent. Few departments had regular representation at meetings and were involved in decision making. While the number of law enforcement participants attending the meetings was high, there was little diversity among the departments in attendance.

Three main points emerged from the process evaluation:

1. Inconsistent participation by law enforcement;
2. Lack of transitional planning regarding department CIT coordinators; and
3. Lack of documentation regarding tasks designated at council meetings.

Recommendations for this quarter include conducting a survey of all CIT council members to assess buy-in and identify barriers to participation. The survey will focus on police departments, but will include all organizations that are affected by the CIT program. Also recommended is an examination of how tasks assigned at meeting are reported out at following meetings.

Quantitative results showed relatively little change since previous quarters. CIT consumers are mentally ill and physically ill, and have substance abuse disorders. Officers divert CIT clients from the criminal justice system into mental health treatment. Arrest rates are low because officers utilize alternatives to arrest such as transport to psychiatric hospitals for mental health evaluations, direct contact with case managers and referrals to appropriate services.

Less than half of CIT calls involved clients who were suicidal. Threats to harm others were reported at less than a quarter of CIT calls, but when threats were present they often involved physical force. More than eight out of ten calls did not involve injuries. However, when injuries did occur they usually occurred prior to police contact. Under half of those utilizing CIT were currently engaged in treatment.

INTRODUCTION

This report presents findings of the evaluation of Crisis Intervention Teams (CIT) in Jackson County, Missouri. Both process and quantitative results are presented. The evaluation includes seven CIT teams:

- Lee's Summit Police Department (LSPD)
- Independence Police Department (INPD)
- Blue Springs Police Department (BSPD)
- Grandview Police Department (GVPD)
- Oak Grove Police Department (OGPD)
- Jackson County Sheriff's Office (JCSO)
- Kansas City Police Department (KCPD)
 - Metro Patrol Division
 - East Patrol Division
 - Central Patrol Division
 - North Patrol Division
 - Shoal Creek Patrol Division
 - South Patrol Division

METHODS

Two main methods were used to conduct the process evaluation, 1) Evaluators observed the Mid-America CIT Council meetings; and 2) Reviewed 2008 meeting minutes.

Quantitative data used in this report consist of CIT calls from April 1, 2001 through October 31, 2008. The Jackson County Sheriff's Office and Grandview Police Department are not included in this report. Evaluators analyzed and interpreted data collected by CIT officers during encounters with persons with mental illness. These data include:

- Demographics and clinical characteristics of persons who came into contact with CIT;
- Officer, consumer and bystander injury rates during contact with CIT;
- Incidence of suicide attempts and/or threats among persons who accessed CIT services;
- Methods of suicide or threat to others;
- Incidence of threats to police and/or bystanders;
- Mental health service utilization by persons with mental illness who generate calls;
- Amount of officer time spent on CIT calls; and
- Type of police response (diverted to treatment, resolved on the scene, referred, arrested).

RESULTS

This section of the report provides a summary of evaluation activities completed. Process evaluation results are presented first. Second, aggregate and department specific quantitative results from CIT calls are presented.

Process Evaluation

The purpose of the process evaluation was to look at the council as a whole. This evaluation examines decision making by the coalition and how different police departments are represented during the voting process.

By asking how something comes about, rather than looking at the individual who is doing it, we discover systemic problems and produce recommendations for longer-lasting change.¹ The analysis and results are presented to assist the MACITC in examining procedures and the coalition overall, not to point fingers or blame individuals or organizations. Only general council meetings are included in this analysis.

Results

Presented in Table 1 are attendance numbers the 2008 MACITC meetings. Attendees are grouped by organization type represented. NAMI is included under *stakeholders* and RDI is included under *other*. Also included under *other* are guests who did not fit into another category. As indicated in the table, police were the most represented faction.

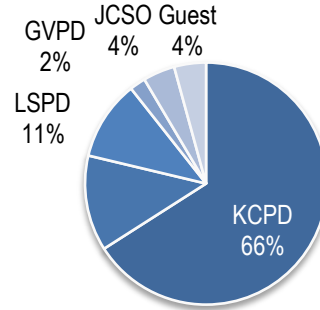
Table 1. 2008 Meeting Attendance

	1/10	3/6	4/24	5/15	8/14	10/23	11/21	12/11	Total
Police	6	8	6	4	2	11	5	5	47
Service Providers	5	1	5	5	4	6	3	4	33
Stakeholders	3	1	1	3	4	3	4	3	22
Other	2	2	2	2	5	2	3	2	20
Consumers	5	1	1	2	3	1	1	1	15
Total	21	13	15	16	18	23	16	15	137

¹ Praxis International, Inc., www.praxisinternational.org.

To further examine police representation, police attendees were looked at by department. As shown in Figure 1, KCPD had the most representatives present.

Figure 1. Police Representation



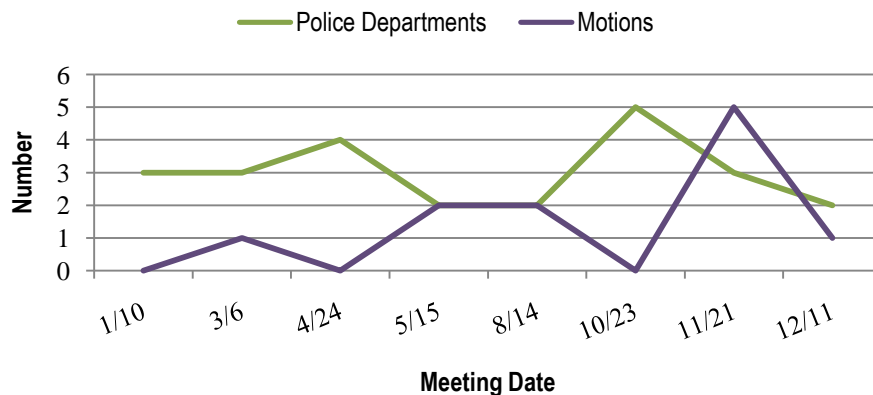
Presented in Table 2 are the number of meetings attended by Jackson County partner police departments who are involved in the CIT evaluation completed by RDI. As outlined in the table, KCPD, BSPD, and LSPD were the most consistently represented departments at the eight MACITC meetings in 2008.

Table 2. Meeting Representation

	Number of Meetings
KCPD	8
BSPD	6
LSPD	5
JCSO	2
GVPD	1
IPD	0
OGPD	0

As indicated in Figure 2, many MACITC decisions were made during 2008 in meetings few police departments represented. In reviewing the meeting minutes, two of the meetings with zero motions indicated that decisions were discussed, but no resolution was established. One reason the number of police departments and number of motions are polar, could possibly be due to the close relationship between represented police departments and stakeholders, discussions are being held prior to the MACITC meetings and therefore expedites decision making and voting during the meeting. However, when there are more departments in attendance, discussions and voting takes extended time and may result in less decisions being made.

Figure 2. Number of Departments and Motions



Discussion

Overall, based on the 2008 MACITC meeting minutes three main concerns were noted.

1. Inconsistent Participation
 - a. Currently, council meetings (main avenue of communication) have been limited to 2-3 departments in attendance as noted in Figure 2.
 - b. Motions were passed with limited input from other departments due to inconsistent attendance (Table 2).
 - c. With one of the main ideas of CIT being “*More Than Just Training*,” inconsistent participation by all member police departments is contrary to CIT principles.
2. Lack of Transitional Planning
 - a. As coordinators are leaving their role, an organizational process is not in place to transition from an exiting coordinator to a new coordinator.
 - b. The lack of an organizational process has led to delayed data transmittal and limited input from affected departments.
3. Lack of documentation regarding tasked designated at council meetings
 - a. There is currently no follow-up communication or documentation on designated tasked from previous meetings.
 - b. No updates are provided to all MACITC members after certain steps or tasks are completed.

Quantitative Results

Number of CIT Reports

The total number of reports analyzed since CIT implementation is presented in Table 1. The table also summarizes, by department, the date of program implementation, number of calls handled, and average calls per month. Through October 2008, Jackson County CIT officers had responded to 6,438 calls.

Table 3. Number of CIT Reports

Department/Division	Date of First Call	Months in Program	Total No. of Calls	Average Calls per Month
Lee's Summit	April 2001	90	1,824	20.27
Blue Springs	April 2004	54	854	15.82
Oak Grove	June 2004	52	185	3.56
Independence	April 2005	42	461	10.98
KC – Central	July 2002	75	1,188	15.84
KC – Metro	April 2003	66	625	9.47
KC – East	April 2003	66	603	9.14
KC – North	Sept. 2003	61	384	6.30
KC – South	Feb. 2004	56	87	1.55
KC – Shoal Creek	Aug. 2005	38	227	5.97

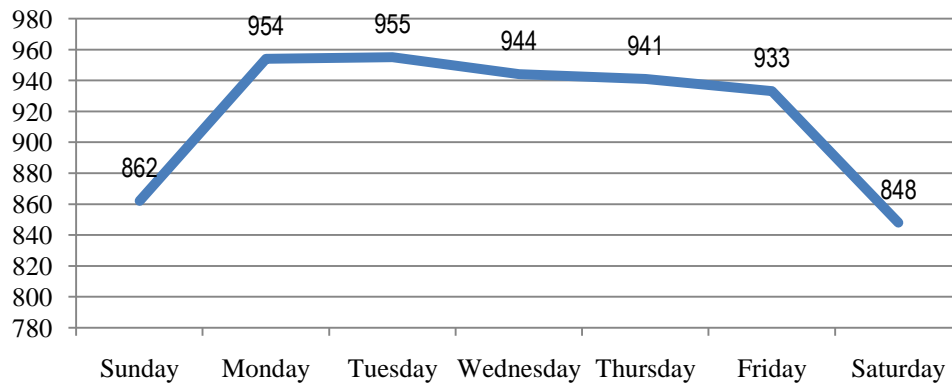
Demographics

Fifty-three point four percent of records reported incidents with males and 46.6% females. This result continues a trend of increasing numbers of females involved in CIT incidents. The average age of individuals accessing CIT was 35, with the youngest being three years old and the oldest being 97. A majority of clients (71.4%) were *white*; 25.8% were *black/African American*; 1.9% were *Hispanic/Latino*; and the remaining individuals (0.8%) were either *Native American, Asian/Pacific Islander* or identified as *other*.

Days of CIT Call Occurrence

Incidents were fairly evenly distributed throughout the weekdays, although there was a peak on Monday and Tuesday. The fewest number of calls occurred on the weekends (Figure 3).

Figure 3. Days of CIT Occurrence



CIT calls by department and divisions are presented in Figures 4 and 5.

Figure 4. Days of CIT Occurrence by Department

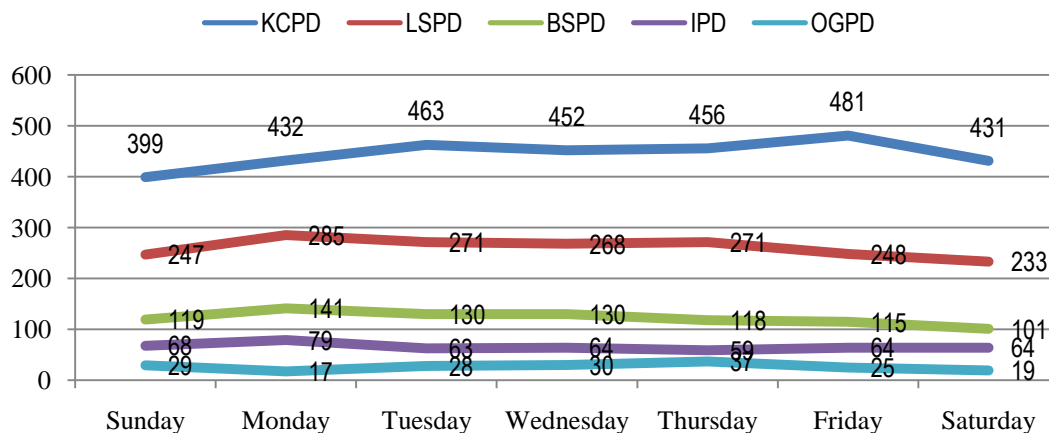
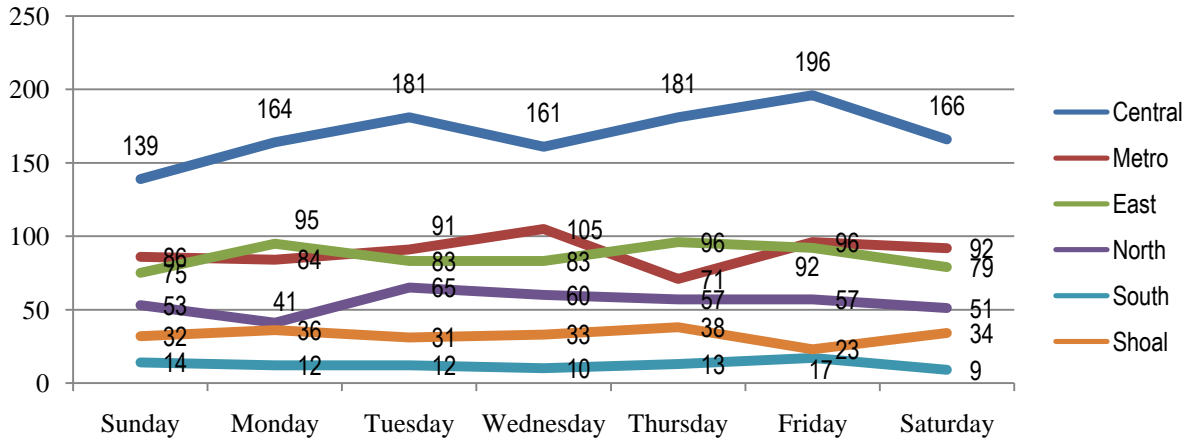


Figure 5. Days of CIT Occurrence by KCPD Division



Hour of Day Call Received

All departments reported a low number of calls in the morning hours, but differed regarding peak times. Presented in Figures 6 and 7 are calls by departments and divisions.

Figure 6. Calls by Hour of Day

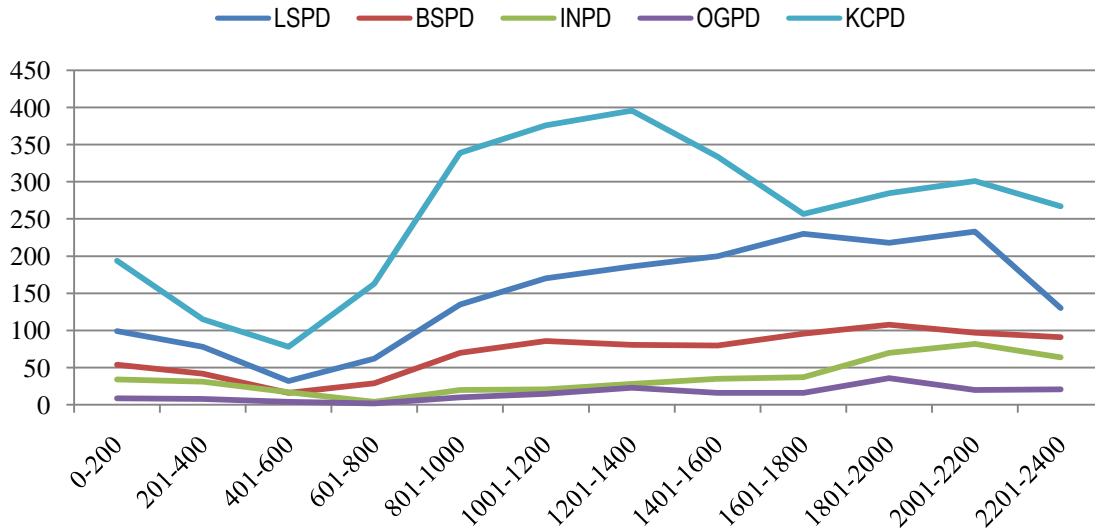
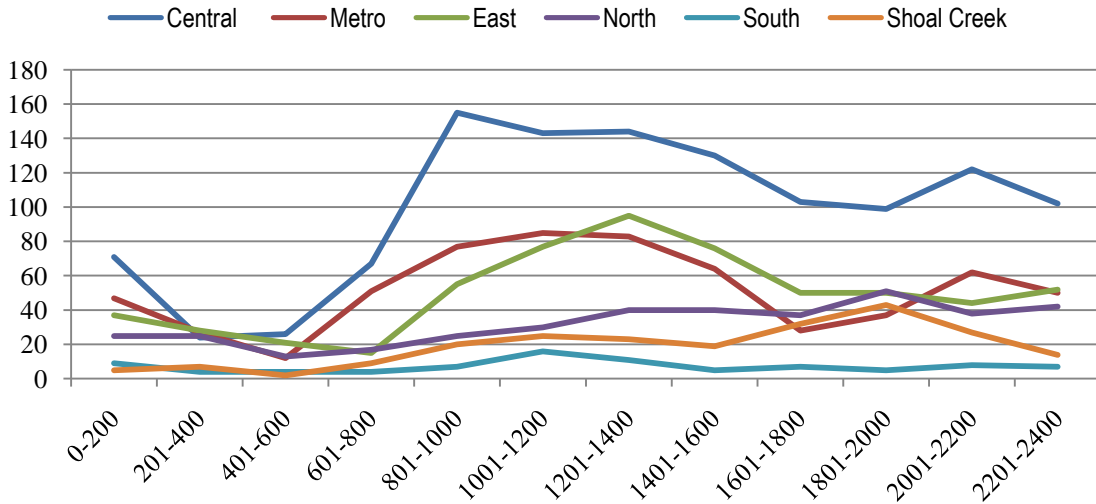


Figure 7. Calls by Hour of Day: KCPD All Divisions



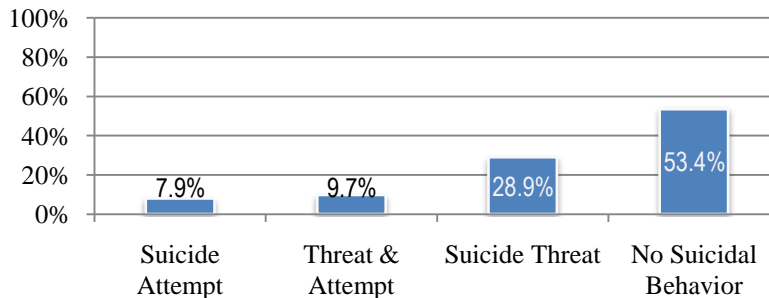
Time Spent Handling CIT Calls

The average time to handle incidents was 73 minutes, with a median of 61 minutes. The least amount of time was a few minutes and the most was almost 9 hours. The mode (the most frequently occurring time) was 60 minutes.

Threat Assessment

Threat assessment, the occurrence of threats or attempts to harm self or others, is summarized in Figures 8, 10 and 12. Individuals were much more likely to harm themselves than others or the responding officer. Figure 8 shows that 46.5% of the CIT calls involved suicidal behavior (first three bars combined). Suicide threats were more common than suicide attempts.

Figure 8. Occurrence of Suicidal Behavior



The most common methods of threatened or attempted suicide were *overdose, edged weapons* and *firearms* (Table 4).

In Figure 9 and Table 5, Suicidal behaviors are presented by department and division. Suicide attempts vary greatly between departments.

Table 4. Methods of Suicide

Method of Suicide	Percentage
Overdose	30.1%
Edge weapon	23.4%
Firearm	8.6%
Jumping	3.9%
Hanging	4.5%
Walking in traffic	1.3%
By Police	3.4%
Carbon Monoxide	1.5%
Other (arson, scissors, etc.)	32.6%

Figure 9. Suicidal Behaviors by Department

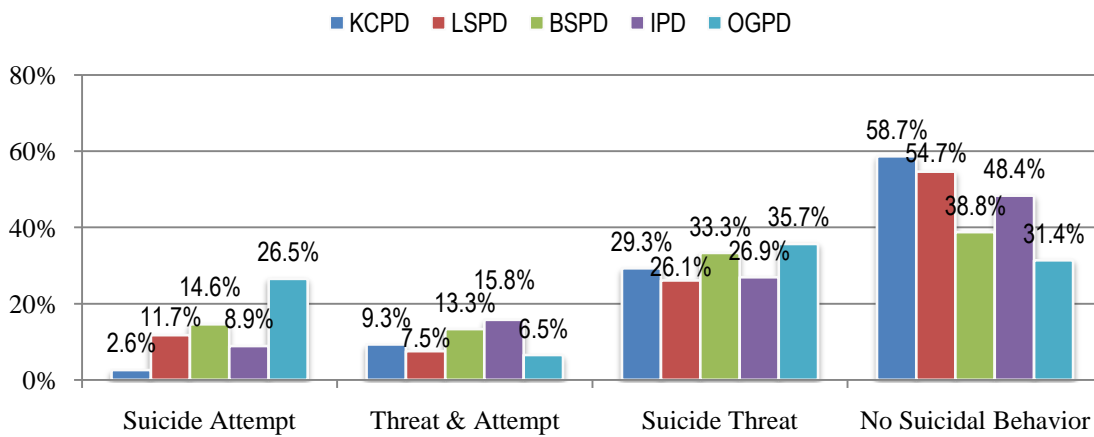


Table 5. Suicidal Behaviors by KCPD Division

KCPD Division	Suicide Attempt	Threat & Attempt	Suicide Threat	No Suicidal Behavior
Central	1.5%	7.0%	26.9%	64.6%
Metro	1.9%	9.8%	28.0%	60.3%
East	3.0%	10.0%	26.5%	60.5%
North	4.4%	13.8%	36.7%	45.1%
South	5.7%	11.5%	35.6%	47.1%
Shoal Creek	5.3%	10.6%	37.9%	46.3%

Although the majority of calls (75.3%) did not involve threats (or attempts) to harm police or others (Figure 10), threats to *others* were more common than threats to *police*.

Figure 10. Threat to Harm Police & Others

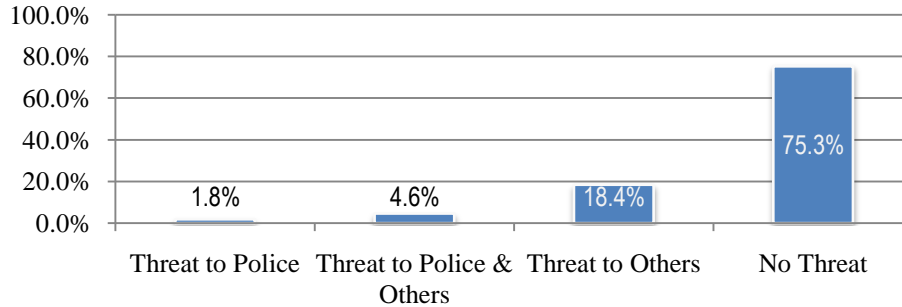


Table 6 shows that most common methods of threatening police or others were by the use of *physical force, edged weapons, firearms* and *other* (crowbar, bat, throwing items, arson, etc.).

Table 6. Methods of Threat to Police or Others

Method of Threat	Percentage
Physical Force	45.8%
Edge weapon	16.4%
Firearm	10.0%
Other	38.5%

In Figure 11 and Table 7, reports of threats or attempts to harm police or others are presented by department and division.

Figure 11. Threats by Department

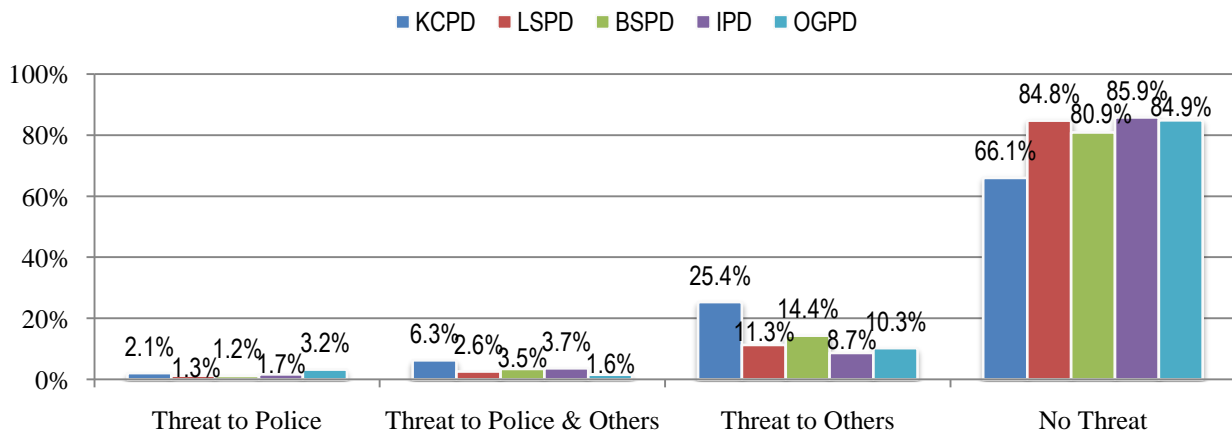
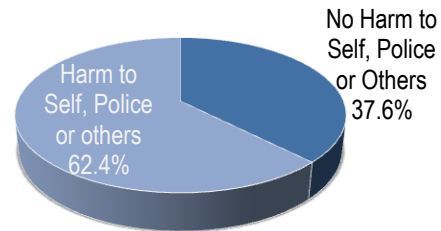


Table 7. Threats by KCPD Division

KCPD Division	Threat to Police	Threat to Police & Others	Threat to Others	No Threat
Central	1.8%	5.0%	24.0%	69.3%
Metro	2.1%	8.2%	28.3%	61.4%
East	2.2%	9.2%	28.5%	60.2%
North	3.1%	4.4%	22.9%	69.5%
South	4.6%	6.9%	23.0%	65.5%
Shoal Creek	1.3%	4.0%	22.0%	72.7%

The presence or absence of threats or attempts to harm self, police and others is summarized in Figure 12. A threat or attempt to harm was present in over half (62.4%) of the records.

Figure 12. Threats or Attempts to Harm Self, Police or Others



In Figure 13 and Table 8, incidence of CIT calls involving threats or attempts to harm self, police, or others is presented by department and divisions. Results indicated differences between participating departments, however, all departments reported that over half of calls involved threats or attempts to harm self or others.

Figure 13. % of CIT Calls w/Threats or Attempts to Harm Self or Others

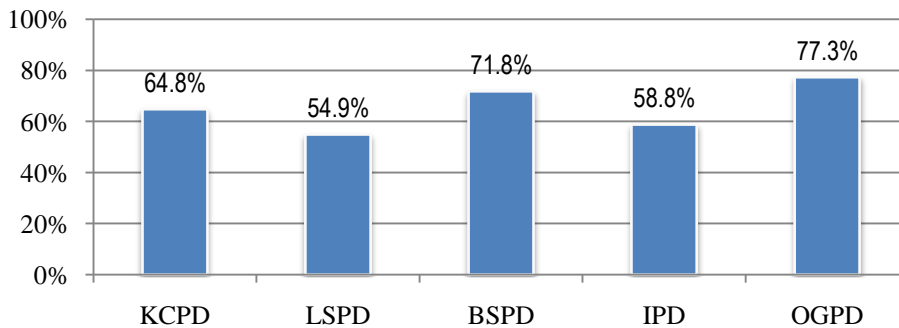


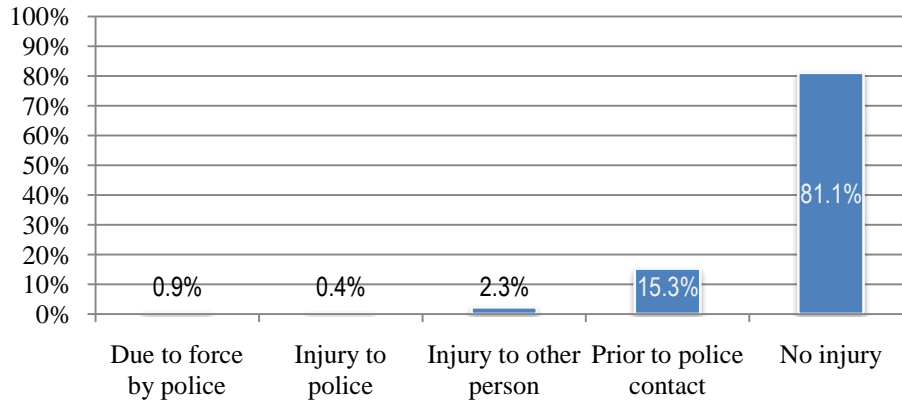
Table 8. Threats or Attempts to Harm Self or Others by KCPD Division

KCPD Division	Percentage
Central	58.5%
Metro	68.2%
East	66.8%
North	71.1%
South	73.6%
Shoal Creek	68.7%

Injuries

As in previous quarters, the vast majority of CIT calls (81.1%) did not involve injuries to others, the officer, or the consumer (Figure 14). When injuries were reported, they usually occurred *prior to police contact* (15.3%).

Figure 14. Injuries



Injuries reported by department and divisions are presented in Tables 9 and 10.

Table 9. Injuries by Department

	KCPD	LSPD	BSPD	IPD	OGPD
Due to force by Police	0.8%	0.7%	1.1%	1.7%	2.7%
Injury to police	0.4%	0.3%	0.5%	0.4%	1.1%
Injury to other person	2.3%	2.5%	2.2%	1.3%	4.3%
Prior to police contact	13.2%	15.4%	21.3%	12.6%	28.0%
No injury	83.2%	80.6%	74.8%	85.5%	66.5%

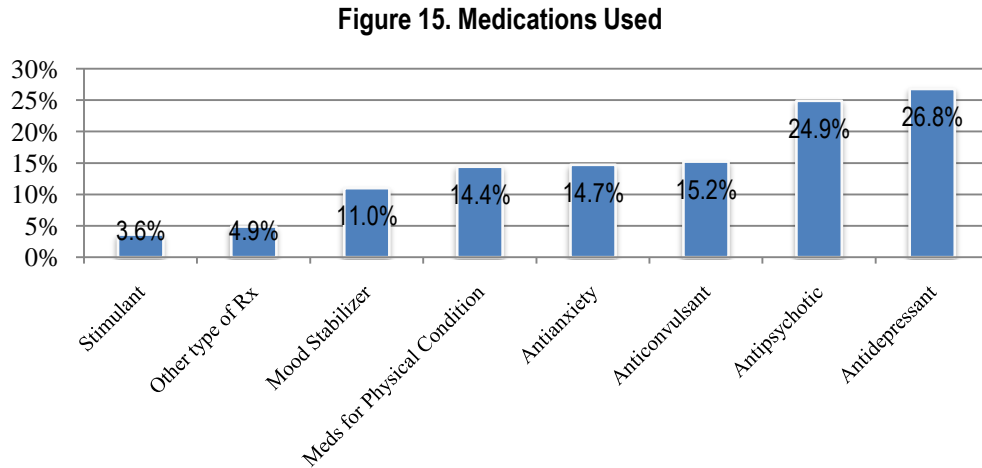
Table 10. Injuries by KCPD Division

KCPD Division	Due to force by Police	Injury to police	Injury to other person	Prior to police contact	No injury
Central	0.8%	0.3%	1.7%	9.8%	86.8%
Metro	0.5%	0.8%	2.4%	11.2%	84.8%
East	0.5%	0.3%	7.8%	15.2%	82.1%
North	1.6%	0.0%	4.2%	22.0%	73.7%
South	1.2%	2.3%	1.2%	18.8%	75.9%
Shoal Creek	0.4%	0.0%	3.5%	14.2%	81.9%

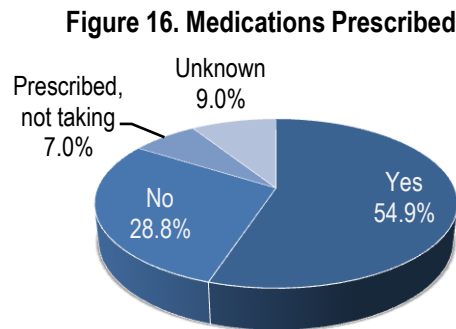
Medication

Medications Used. The types of medications used by individuals accessing CIT were derived from a variety of sources including police observation and verbal reports from the individual, family member and/or case worker.

As in previous quarters, *Antidepressants* and *Antipsychotics* were the most frequently reported medications. *Stimulants* were least reported. Responses are presented in Figure 15.



Medications Prescribed. The percentages of those who used CIT who had and had not been prescribed any medications is presented in Figure 16. Also shown is the percentage of those who had been prescribed medications but were not taking them.



Medications prescribed is presented by department and division in Figures 17-21 and Table 11.

Figure 17. Medications Prescribed - KCPD

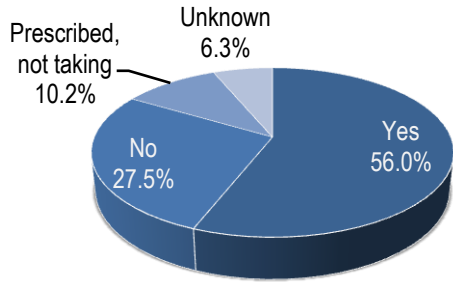


Figure 18. Medications Prescribed - LSPD

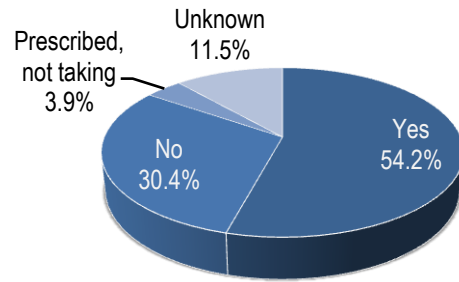


Figure 19. Medications Prescribed - BSPD

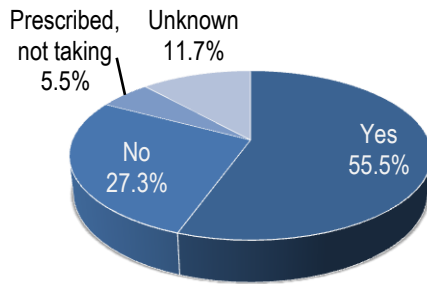


Figure 20. Medications Prescribed - IPD

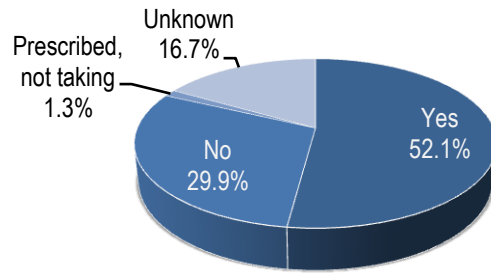


Figure 21. Medications Prescribed - OGPD

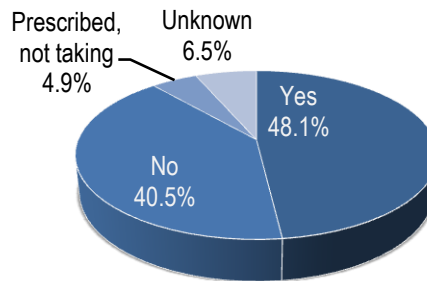


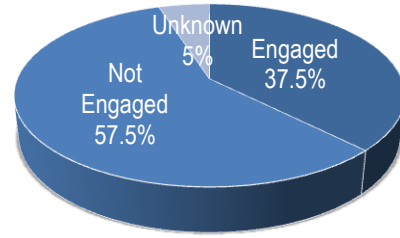
Table 11. Medication Prescribed – KCPD Divisions

KCPD Division	Yes	No	Prescribed, Not Taking	Unknown
Central	60.0	21.9	9.9	8.2
Metro	49.3	33.0	11.8	5.9
East	50.1	31.0	12.3	6.6
North	62.8	26.3	8.6	2.3
South	48.3	36.8	10.3	4.6
Shoal Creek	61.2	30.4	4.8	3.5

Mental Health Service Utilization

Mental health service utilization (Figure 22) refers to whether the consumer accessing CIT services was engaged in treatment with a local provider and had a caseworker, psychiatrist, or other mental health professional. This information is important because it describes the population’s level of engagement in mental health services.

Figure 22. Service Utilization



The percentage engaged in treatment at the time of the CIT encounter differs across jurisdictions. A summary of site-specific results is presented in Table 12.

Table 12. Service Utilization by Jurisdiction

Department	Percentage Engaged in Treatment
KCPD Overall	37.2%
KCPD Central	47.1%
KCPD Metro	27.4%
KCPD East	31.8%
KCPD North	39.6%
KCPD South	25.3%
KCPD Shoal Creek	27.8%
Lee's Summit	51.4%
Blue Springs	19.7%
Independence	21.0%
Oak Grove PD	30.3%

Service utilization is an important component of a successful CIT program. Treatment engagement is likely to reduce the volume of repeat calls by consumers, resulting in more effective use of officer time.

Substance Use at the Scene

Substance use at the scene was indicated in 2,279 cases (40.9%) (Table 13). *Alcohol* (68.5%) was cited most often for incidences involving substance use at the scene, followed by *marijuana* (17%), *cocaine/crack* (11.3%), *methamphetamine* (7.2%), and *heroin* (2.4%). A response of *other* was given in 22.1% of the records.

Table 13. Substance Use at CIT Scene

Response	Percentage
Yes	40.9%
No	59.1%

Presented in Table 14, are the percentage of CIT calls that indicated substance use at the scene by department and division.

Table 14. Substance Use on Scene by Department

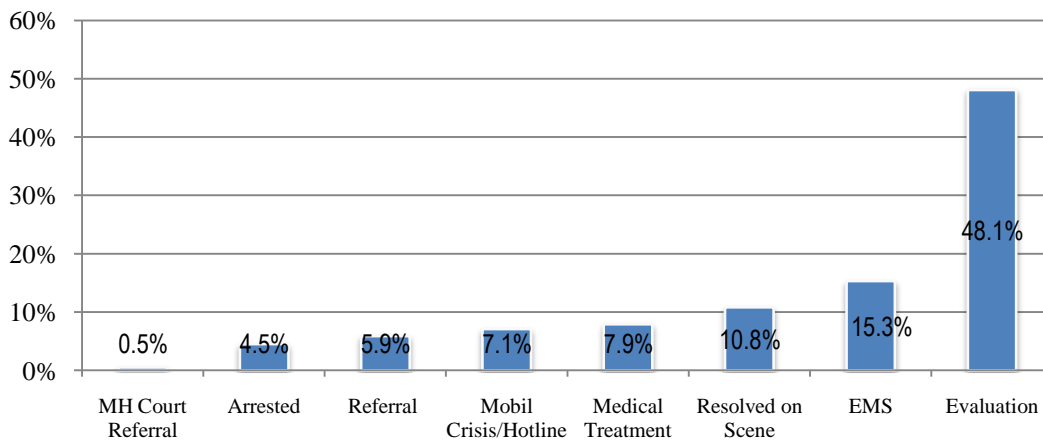
Department	Percentage of Substance Use at the Scene
KCPD Overall	40.2%
KCPD Central	39.6%
KCPD Metro	36.8%
KCPD East	39.7%
KCPD North	45.7%
KCPD South	44.6%
KCPD Shoal Creek	41.2%
Lee's Summit	36.1%
Blue Springs	50.6%
Independence	43.8%
Oak Grove PD	44.0%

Disposition of CIT Calls

Actions taken by officers after arrival are referred to as *Disposition*. CIT incidents often involve multiple dispositions. Therefore, there are more dispositions (9,815) than there are CIT incidents (6,438). Because we are interested in tracking the number of actions taken as a result of CIT, the unit analyzed for this and previous reports is *number of dispositions*, rather than *number of incidents*. This reporting style is useful because it provides a more detailed account of all services provided.

As it has been in previous quarters, the most common disposition was *Evaluation*, which refers to a mental health evaluation performed by a qualified mental health professional. Overall, 48.1% of dispositions were evaluation. Disposition results are presented in Figure 23.

Figure 23. Dispositions of CIT Calls



Emergency Medical Services (EMS) accounted for 15.3% of the dispositions. Resolving the situation on the scene (officer *Calmed* consumer and *Left*) accounted for 10.8% of calls, followed by *Medical Treatment* (7.9%), which refers to incidents in which the consumer is taken to a general hospital or detoxification center.

The *arrest* rate remains low at 4.5%. *Referrals to Mental Health Court*² are seldom (.5%) because arrest is so infrequent.

² Mental Health Court is only available in Lee's Summit and Kansas City.

Call dispositions by department are presented by site in Table 15. Evaluation was the most common disposition across sites. For each disposition type, the department with the highest rate is highlighted. This assists in understanding the different outcomes CIT produces in the various jurisdictions. It should be noted however, that use or lack of use of a certain disposition may be due to location and physical environment rather than choice by the officers.

Table 15. Call Disposition

	Evaluation	EMS	Mobile Crisis/ Hotline	Arrested	Referred to MHC	Referral	Medical Tx	Resolved
Kansas City PD	64.9%	14.9%	3.2%	3.5%	0.7%	2.0%	5.6%	5.2%
Lee's Summit PD	31.0%	11.6%	13.6%	4.7%	0.6%	8.4%	10.0%	20.1%
Blue Springs	40.4%	19.6%	6.8%	5.5%	N/A	8.9%	8.8%	10.0%
Independence	42.9%	22.5%	3.9%	6.0%	N/A	12.4%	4.0%	8.3%
Oak Grove PD	38.7%	15.4%	6.2%	6.7%	N/A	3.4%	23.3%	6.4%

Division-specific findings for KCPD are presented in Table 16. Results are similar across divisions, although Central and South have higher rates of incidents resulting in psychiatric evaluation. One in five dispositions involved EMS for North and Shoal Creek Patrol Divisions. *Mobile crisis* response is not utilized often by KCPD officers, regardless of division.

Table 16. Call Disposition: KCPD All Divisions

	Evaluation	EMS	Mobile Crisis/ Hotline	Arrested	Referred to MHC	Referral	Medical Tx	Resolved
Central	71.8%	10.0%	2.7%	4.1%	1.6%	2.0%	3.7%	4.3%
Metro	63.9%	15.2%	4.3%	2.2%	0.2%	1.9%	6.3%	5.9%
East	64.0%	14.5%	3.3%	4.3%	0.5%	2.2%	5.4%	5.9%
North	71.9%	29.0%	3.4%	5.4%	0.5%	2.5%	9.7%	6.7%
South	67.2%	18.9%	2.5%	3.3%	0.0%	0.0%	6.6%	1.6%
Shoal Creek	54.7%	21.5%	3.5%	1.7%	0.0%	2.3%	9.0%	7.3%

CONCLUSIONS

Jackson County CIT officers continue to divert persons with mental illness and co-occurring substance abuse disorders to treatment. Officers transport clients to mental health facilities and make referrals to appropriate services.

The process evaluation indicated that during 2008, participation by departments in the MACITC was inconsistent. Few departments had regular representation at meetings and were involved in decision making. While the number of law enforcement participants attending the meetings was high, there was little diversity among the departments in attendance.

Also noted in the process evaluation, there was not a process for transitioning when department coordinators leave. This occurred during 2008, and resulted in gaps in data collection and MACITC representation. Documentation of MACITC meeting minutes was also examined and it was found that little or no follow-up was being documented regarding tasks assigned at meetings.

Quantitative results indicated that, on average, KCPD and LSPD handle the most CIT calls per month. The vast majorities of CIT clients are males and white; and CIT clients have an average age of 35. CIT calls peaked on Mondays and Tuesdays, while the fewest calls were on Saturday and Sunday. On average, call took approximately 73 minutes.

Less than half of CIT calls involved clients who were suicidal. Threats to harm others were reported at less than a quarter of CIT calls, but when threats were present they often involved physical force. More than eight out of ten calls did not involve injuries. However, when injuries did occur they usually occurred prior to police contact. Under half of those utilizing CIT were currently engaged in treatment.

Arrest rates of CIT clients remain low. Alternatives to arrest, such as transport to psychiatric hospitals, directly contacting current case managers, and referrals to mental health and other services are utilized much more often than arrest. Evaluation continues to be the most common disposition across all sites.

RECOMMENDATIONS

Based on the results summarized above, RDI recommends the following:

- A survey of all CIT council members should be conducted to assess buy-in and identify barriers to participation. The survey will focus on police departments, but will include all organizations that are affected by the CIT program.
- MACITC should examine how tasks assigned at meeting are reported out at following meetings. This may include revamping how the meetings are recorded or the procedures concerning how minutes are reviewed and accepted.