

March 14, 2019

BRIEFING
DRAFT

Item # 14-B

CRISIS INTERVENTION TRAINING
(CIT)
FOR
SOCIAL WORKERS, SCHOOL NURSES,
AND TEACHERS

FY 2018-2019 BOARD-DIRECTED INITIATIVE
FEBRUARY 2019

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Cost-Benefits of CIT for Nurses, Social Workers & Teachers
Board-Directed Initiative Report
February 2019

EXECUTIVE SUMMARY

Section 13 of the FY 2019 Forsyth County adopted budget requested County staff to “review the cost and benefits of offering nurses, social workers, and teachers Crisis Intervention Team training.”

Throughout North Carolina, law enforcement agencies, mental health professionals and advocates join in partnerships to establish Crisis Intervention Training (CIT) programs. CIT programs were originally created as law-enforcement based pre-booking jail diversion programs to provide law enforcement and other first responders the knowledge and skills they need to de-escalate persons in crisis. CIT programs emphasize access to treatment services rather than jail for persons displaying signs of mental illness. CIT requires a commitment of 40 hours or five (5) 8-hour sessions typically completed in one week.

The first CIT partnership was established in Memphis, Tennessee in the late 1980s. Since then the program, often referred to as the “Memphis Model,” has been widely adopted throughout the United States and other countries. North Carolina graduated its first class of CIT certified officers in Wake County in 2005. Forsyth County held its first CIT class in 2007, however, most of the participants were not from Forsyth County government or related agencies.

Another training available is Mental Health First Aid (MHFA). MHFA started in Australia in the early 2000’s. Mental Health First Aid is “the aid provided to a person developing a mental health problem, experiencing a worsening of an existing mental health problem or in a mental health crisis. The first aid is given until appropriate professional help is received or the crisis is resolved.”¹ MHFA is offered in Forsyth County primarily through Cardinal Innovations and the Mental Health Association in Forsyth County. Novant Health offers MHFA but it is usually offered in its Charlotte-area locations.

Staff’s conclusion from the research indicates the following:

- a) **Crisis Intervention Team (CIT) Training is designed for first responders, typically law enforcement.** In Forsyth County, CIT is offered to law enforcement officers, probation & parole officers, paramedics, detention officers (specifically special response team members) and communication dispatchers. Given the time commitment for CIT, it does not appear to be the most appropriate training to offer teachers, social workers, and public health nurses.

¹ Definition cited from Mental Health First Aid of Australia at <https://mhfa.com.au/about>

- b) **Mental Health First Aid Training appears to be a more appropriate option for non-law enforcement/first responder professionals.** From the research and in speaking with various subject matter experts from the MH Association to Cardinal Innovations to the NCDHHS Program Manager in the Division of MH/DD/SAS, Justice Systems, MHFA appears to be a more appropriate training to offer for Nurses, Teachers, and Social Workers. The WSFC School System addressed this in 2017 by sending several employees to receive certification in Mental Health First Aid, and, now these certified employees train other WSFCS staff in MHFA protocols.
- c) **Cost/benefit of providing CIT Training.** From the research, there appears to be no North Carolina communities offering CIT to non-law enforcement professionals. While the benefits of CIT have been proven in a number of communities as effective reducing confrontations between law enforcement and those with mental health issues, staff was unable to data showing CIT doing the same for non-law enforcement professionals.

In gathering information from various sources, the cost of offering Mental Health First Aid training depends on the scope of the program and how it is designed.

1. *Model 1 - Train-the-trainer model* - Send several staff to become certified trainers to then teach staff in Mental Health First Aid. The WSFC School System selected this method to provide MHFA training to its staff. The cost to certify a trainer is approximately \$2,300 for the training plus travel costs for a 40-hour week, off-site certification course. The potential cost for training one or two people as "Train-the-trainer" could be \$4,000-\$5,000 per person depending on the location of the instructor training. According to the MHFA USA organization website, the closest training is in Nashville, Tennessee or Atlanta, Georgia.
2. *Model 2 - Allocate funds for staff to have trainers brought on site or send to trainings* - the Mental Health Association as well as Cardinal Innovations offer MHFA training. Both are willing to bring the training onsite to staff.

While the directive focused on Social Workers, Teachers, and Public Health Nurses, other front-line staff within the human services agencies, such as In-Home Aides, Transportation staff, Income Maintenance staff, Environmental Health staff and other departments (i.e. Parks) with public contact may benefit from this type of training as well.

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Prevalence of Mental Illness in the United States

According to the National Institute of Mental Illness, in any given year, nearly one in five U.S. adults experience some form of mental illness (44.7 million in 2016). Mental illnesses include numerous conditions that span the spectrum in degree of severity, ranging from mild to moderate to severe. While there appears to have been an increase in the number of people diagnosed with mental illness, the increase may be due more to increased media and social media exposure related to incidents of workplace violence, school violence, domestic violence and the opioid crisis. This increased exposure may have heightened people's awareness of mental health and substance abuse issues, and while the stigma of people acknowledging having mental illness has lessened some, society struggles to recognize or ignore the signs of a person having a mental health crisis.

There are two broad categories often used to describe these conditions: Any Mental Illness (AMI) and Serious Mental Illness (SMI). *Any Mental Illness* (AMI) is defined as a mental, behavioral, or emotional disorder that can vary in impact ranging from no impairment to mild, moderate and sometimes severe impairment. *Serious Mental Illness* (SMI) is defined as a mental, behavioral, or emotional disorder resulting in serious functional impairment which significantly interferes with or limits one or more major life activities.

Crisis Intervention Training (CIT)

Crisis Intervention Team Training (CIT), also known as the "Memphis Model" for its beginnings in Memphis, Tennessee, was pushed by Ann Dino and Helen Adamo. No strangers to calling law enforcement when their sons, both living with serious mental illness, were in crisis, Dino and Adamo started pushing for police training in dealing with mental crisis calls in 1986. Adamo recalled her first experience with the police dealing with her son as "the police coming in with their hands on their guns and their billy clubs and they didn't know what to do."²

Adamo wrote a proposal for the Memphis mayor and city council, asking them to support training for police officers responding to people with mental illness. Her proposal was based on a team created by the Los Angeles police department and focused on the need to reduce injuries of police officers responding to mental health crisis calls. While officials were sympathetic, the issue was pushed out about a year and a half. Then, in 1987, Joseph Robinson, an African-American, was shot and killed by Memphis police. Robinson's mother called the police because he was hurting himself during a mental health crisis. Outrage over the shooting shook the community. While community members were calling for the police chief's resignation, Dino and Adamo looked for a different solution. Again, they approached the mayor

² <https://www.nami.org/Blogs/NAMI-Blog/October-2013/Saving-Lives,-Changing-Communities>

with their plan for police mental health training. After the shooting, things moved quickly and a community taskforce was created to come up with a response. The taskforce called the new program a crisis intervention team (CIT) and it was built around partnerships developed through the taskforce. While police training was vital to the program's success, what made it unique was the personal interactions between individuals with mental illness, their families, mental health professionals and police.

The first CIT training was held in 1988. Thirty years later, the Memphis CIT program has been implemented in communities across the nation in an effort to minimize police officer injuries, develop a crisis assessment system for people with mental illness, reduce arrests, and improve community relations. Its success has inspired over 2,800 communities in 45 states across the country to start CIT programs.

CIT is a 40-hour (5-day) course focused on 5 key themes: Understanding Behavioral Health, Developing Empathy, Navigating Community Resources, De-escalation Skills, and Practical Application. While the centerpiece of the model is 40-hours of specialized training for officers, CIT is an organizational and community intervention that involves changes in police department procedures as well as collaboration with mental health providers and other community stakeholders. CIT curriculums may also include content on developmental disabilities, older adult issues, trauma and excited delirium. Information is presented in didactic, experiential and practical skills/scenario based training formats. The training week may include panels of providers, family members and persons with mental illnesses as well as site visits to agencies in the community.³

What is available in Forsyth County?

Forsyth County is fortunate to have an active CIT program. The first CIT class in Forsyth County was held in February 2007. However, during the early years of Forsyth County's CIT program (2007-2010), most of the participants were from outside of the county, particularly neighboring counties because not all 100 counties have CIT. The Mental Health Association in Forsyth County currently leads the CIT effort in Forsyth County. During the year, four (4) CIT classes are held. The next CIT class will be held in March 2019. Forsyth County government allocates \$20,000 annually to the Mental Health Association in Forsyth County to conduct the CIT sessions.

As of August 2018, 903 participants have been trained in CIT, and since around 2010-2011, with the exception of one or two in each class, the overwhelming majority are Forsyth County participants, i.e. Sheriff's Office, WSPD, Kernersville PD, FC Probation, area colleges/universities' police (WSSU, WFU, UNCA, Salem College, FTCC), and the VA police. In FY 2017-2018, a total of 109 participants were trained in CIT.

³ Compton MT, Broussard B, Munetz M, Oliva JR, Watson AC. The Crisis Intervention Team (CIT) Model of collaboration between law enforcement and mental health. Hauppauge, NY: Nova Science Publishers, Inc; 2011.

Department	# of Participants	% of Participants
Forsyth County Sheriff's Office (FCSO)	39	35.8%
Forsyth County Probation/Parole	30	27.5%
Winston-Salem Police Department (WSPD)	16	14.7%
Kernersville Police Department (KPD)	7	6.4%
Veterans Affairs (VA/Federal) Police	6	5.5%
Winston-Salem State Univ Police (WSSU)	4	3.7%
King Police Department	3	2.8%
Wake Forest Univ. Police (WFU)	2	1.8%
UNC School of the Arts Police (UNCOSA)	1	0.9%
Stokes County Probation/Parole	1	0.9%
Total	109	100.0%

In Forsyth County, CIT is a collaborative program whose partners include: Mental Health Association in Forsyth County, NAMI-NW Piedmont, Cardinal Innovations Healthcare, Springwell Network/Group Homes of Forsyth County, Daymark Recovery Services, Old Vineyard Behavioral Health, CareNet Counseling, Wake Forest Baptist Health, The Enrichment Center, Department of Social Services – Adult Protective Services, Insight Human Services, Catholic Charities, iCan House, Wake Forest University Counseling Center, Winston-Salem State University Counseling Center, Monarch Behavioral Health, Samaritan Ministries, Forsyth Behavioral Health Outpatient & Assessment Center, NC Chapter - American Foundation for Suicide Prevention, VA Outpatient Healthcare Center in Kernersville, mental health clinicians in private practice, peer support specialists - among many other community partners.

CIT consists of classroom lectures, field visits, and role plays where officers practice de-escalation skills. The individual blocks of training are prepared by mental health professionals who have a particular area of expertise. Site visits to community resources that support the mentally ill and conversations with consumers and family members at the field visits and during the consumer and family panels expand learning opportunities for participants. The training concludes with several hours of role plays in which mental health professionals play the role of consumers in crisis and the CIT officers-in-training practice de-escalation skills.

Mental Health First Aid (MHFA)

While CIT focuses on law enforcement and first responders, Mental Health First Aid (MHFA) is an eight (8) hour course that teaches participants how to identify, understand and respond to signs of mental illness. MHFA courses teach evidence-based strategies and is intended for all people and organizations that make up a community.

Mental Health First Aid (MHFA) was created in Australia in 2001 by Betty Kitchener, a nurse specializing in health education, and Anthony Jorm, a respected mental health literacy professor. Kitchener and Jorm run Mental Health First Aid Australia, a national non-profit health promotion charity focused on training and research.

MHFA can provide individuals with skills in how to recognize the signs and symptoms of mental health problems; knowledge of the possible risk factors for these mental health problems; awareness of the evidence-based medical, psychological, and alternative treatments available; skills in how to give the appropriate initial help and support to someone experiencing a mental health problem; and skills in how to take appropriate action if a crisis situation arises involving suicidal behavior, panic attack, stress reaction to trauma, overdose or threatening psychotic behavior.

A Mental Health First Aid course can be tailored to focus on youth as well as adults. Youth Mental Health First Aid is for those working with youth ages 12-18. Instructors facilitating this Youth course discuss the unique risk factors and warning signs for this age group. Instructors emphasize the importance of early intervention and cover how adults can help youth experiencing a mental issue or crisis. Adult Mental Health First Aid is for anyone who wants to learn how to help someone experiencing a mental health crisis or showing early signs and symptoms of mental illness.

MHFA courses are recommended for teachers (pre-K through college), social services and public health workers, occupational and speech therapists, security officers, and anyone in a team leader or management role.

Cost/Benefit Conclusion

The differences in CIT versus Mental Health First Aid relate to purpose and time. CIT was created specifically for law enforcement. Mental Health First Aid (MHFA) was created to help anyone, law enforcement or non-law enforcement, understand and respond to signs of mental illness and substance abuse. Whereas CIT is specifically designed to prepare and transform the outcomes of a law enforcement community's day-to-day crisis response by fostering collaboration and planning efforts with community partners, MHFA is designed to help people assist those who may be exhibiting signs of mental health crises until help arrives.

CIT requires 40-hours of training while MHFA is an 8-hour course. MHFA for Public Safety has been developed and modified to address law enforcement needs and to address available time for training.

Using the cost estimates from the Mental Health Association in Forsyth County, providing CIT costs roughly \$5,000 per session which includes staff and material costs. Each CIT session has at least 25-30 people per course. Having more than 35 people in a class becomes unproductive for the participants.

There are potential benefits in providing mental health trainings for non-emergency responders. The Mental Health Association in Forsyth County and Cardinal Innovations Healthcare provide Mental Health First Aid training in the community.

After staff talked separately to various Mental Health providers including Cardinal, the Mental Health Association in Forsyth County, and NCDHHS Program Manager for the Division of MH/DD/SAS, about the appropriateness of CIT versus Mental Health First Aid for non-law enforcement employees, all indicated that the more appropriate training for non-law enforcement would be Mental Health First Aid. None indicated an awareness of CIT being provided to non-law enforcement/first responder staff. In fact, there is movement to create a CIT course designed specifically for Detention Officers due to their different involvement with those incarcerated.

According to information gathered, in 2017 the WSFC School system sent several staff to a "Train-the-Trainer" session to become certified MHFA instructors who now train school system staff in Mental Health First Aid.

Social Workers may well benefit from MHFA training. Social Workers have a number of free trainings through the State that cover trauma-informed care, so the more intensive CIT may not be the most advantageous training to provide. Public Health staff may also benefit from MHFA training due to their engagement with the community in health education, care management, environmental health, and clinic programs provided.

If the County chooses to offer Mental Health First Aid to Social Workers and Public Health staff, there are two models that could be employed:

Model 1 - Train-the-Trainer - this model would send select staff to become certified Mental Health First Aid trainers who would then facilitate the MHFA curriculum for County employees. There are two certifications that a person can get: MHFA-Adult and MHFA-Youth. To teach both Adult and Youth course types, a person must certify as an instructor, teach at least one course in the core curriculum (either youth or adult) and then apply to become certified in the second curriculum. If you are a non-MHFA USA member, the cost is \$2,000 for a 5-day training course plus the cost of travel (hotel, airfare or mileage, meals). The closest training site found for 2019 is in Nashville, Tennessee in March 2019. After March the trainings in April are in Seattle Washington, Dallas Texas, or Boston Massachusetts. Making an assumption on hotel, airfare, etc., the potential per person cost for Train-the-Trainer could be \$4,000-\$5,000 per person.

Model 2 - On-site Training - this model would contract with *Allocate funds for staff to have trainers brought on site or send to trainings* - the Mental Health Association as well as Cardinal Innovations offer MHFA training. Both are willing to bring the training onsite to staff.

The cost of providing on-site training would require knowing how many sessions would be provided, the maximum class size per session, and the contractor's per person fee. Funding such a program could be managed using the County Maintenance of Effort allocation for MH/DD/SA services.

While the Board-directive focused on Social Workers, Teachers, and Public Health Nurses, other front-line staff within human services such as In-Home Aides, Income Maintenance staff, Environmental Health staff, and even receptionists who interact with the public daily could benefit from this type of training. Additionally, any employee could potentially benefit for this training given that a large number of Forsyth County employees interact daily with the public. Making any mental health training available to staff could benefit staff both professionally and personally by providing them with the skills to be more aware of those they encounter within the scope of their work and in the community. Awareness is one of the guiding principles of WeCare - Forsyth County Employee's Strategic Plan and this could provide staff with an additional tool to providing quality customer service to the citizens of this community.