



Application for 2009 Outstanding County Program Awards

County (if multi-county entry, list all): Cumberland County

Submitted by: Sharon Yates Title: Public Relations Director, Cumberland County Mental Health Center

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The Association encourages electronic submissions. E-mail the application and project/program description to Todd McGee at todd.mcgee@ncacc.org. You can also fax your entry to (919) 733-1065 (attn. Todd McGee), or mail it to: NCACC, 215 N. Dawson St., Raleigh, NC 27603. Applications must be postmarked by **Friday, Feb. 26, 2010**.

Projects/programs must have been implemented between Jan. 1, 2008, and Dec. 31, 2009. For additional information and category criteria, visit www.ncacc.org/awards/ocpa/about.html.

Project title: Cumberland County Crisis Intervention Team

Category (you may check more than one):

General Government Human Services Public Information/Participation

Address each of the following questions in a typed program/project summary in a separate Word document attached to this application form. Limit your responses to two pages. Use single-spaced lines and 12-point, Times New Roman font. Supporting materials may be submitted, but due to time constraints, judges may not review the materials.

1. What are the purpose, history, timeline and budget of the program/project? Will the county realize any projected cost savings? (For public information/participation programs, please try to estimate participation levels).
2. What makes the program/project unique? How does it differ from similar projects in your county or in other counties?
3. How well did the program use available resources, given the limitations on such resources?
4. Can this project be duplicated in other counties? If another county wanted to do a similar project, what advice would you give them to minimize obstacles and problems?
5. How did the project involve collaboration with other agencies, jurisdictions, nonprofits, businesses, etc.? How well did this collaboration work and is it on-going?

Cumberland County CIT Program

Purpose, History, Timeline and Budget: The Cumberland County Crisis Intervention Team (CIT) is an innovative jail diversion program involving community partnerships and collaborations which has improved services, enhanced access to care and resulted in financial savings. It is a specialized law enforcement response to an individual experiencing crisis related to a mental illness, addiction disease or developmental disability. Designed as a pre-booking jail diversion program, it seeks to prevent arrest and incarceration for misdemeanor crimes and to connect consumers to treatment resources instead.

CIT began at a grassroots level in Cumberland County when citizens united to address an alarming community need. More and more individuals with mental illnesses were being arrested and thrown into a system not equipped to deal with their special needs. It was a problem for law enforcement as it drained valuable resources. It was a problem for the community as the inappropriate use of jails and emergency rooms created growing expenses and liability risks. It was a problem for individuals and families as incarceration caused conditions and consequences of their mental illnesses to escalate. Recognizing that action needed to be taken, The Cumberland Chapter of the National Alliance on Mental Illness (NAMI) began to advocate for CIT in our community. In early 2007, our local Mental Health Consumer Family Advisory Council (CFAC) hosted a public forum to form a partnership to bring CIT to Cumberland County. In the months following the forum, representatives from more than 15 organizations worked together to make CIT a reality (see attached list of partners).

The Fayetteville-Cumberland CIT/Jail Diversion Committee was convened in March 2008 and continues to meet monthly to provide oversight of the program, review and refine the 40-hour CIT curriculum, and promote ongoing communication among our many community partners. The first local CIT training was held in June 2009, followed by a second in October 2009. A third academy is scheduled for March of this year with at least one additional academy planned for 2010. Continuing education credits are awarded by Fayetteville Technical Community College. Law Enforcement Officers who complete the comprehensive 40-hour crisis de-escalation training and pass the end of course evaluation are certified as CIT officers. At present there are 50 certified CIT officers in Cumberland County, representing the Cumberland County Sheriff's Office, Fayetteville Police Department, and VA Medical Center Police Service. The program provides highly specialized mental health training to law enforcement officers, helping them better understand and more effectively intervene with individuals with mental illness.

Utilizing local resources and State grant funding, the CIT training was implemented in Cumberland County at no expense to taxpayers. Start-up costs for the program were provided by a State grant. All other costs of providing this program have been covered by utilizing in-kind donations of staff time and existing community resources. The minimal cost of implementation is greatly overshadowed by the savings the CIT Program has brought to Cumberland County. The average cost for housing a mentally ill inmate per day is \$149 (median average). This includes the cost of psychiatric services and medication. These expenses had become a growing concern as they have increased significantly in recent years and continue to rise. The average stay at the detention center for mentally ill inmates receiving psychiatric care is 120 days. The average number of mentally ill receiving services per year in Cumberland County is 1,020. (Note: this does not include multiple episodes of treatment due to multiple incarcerations of the same person). To date, CIT officers have responded to approximately 100 calls involving mentally ill

persons in crisis. At least 28 of these would have resulted in incarceration without a specialized CIT response and successful diversion to services. This represents an estimated cost savings of \$500,640.00 during the first eight months of the Fayetteville-Cumberland CIT program and an estimated savings for the County of more than \$1,000,000 in the next year.

Uniqueness of the Program: Grassroots level action by the community led to the creative and successful implementation of CIT. A Community needs assessment had shown a need for a way to provide mental health assessments but we had been unable to address the need due to fiscal crisis. CIT provided us with a unique solution. Partnership with our region's 2 mobile crisis teams allows us to provide an immediate response. These 2 mobile crisis teams work in tandem with law enforcement to provide on-site assessment and stabilization. The average response time is under 25 minutes. The program includes the first CIT curriculum in the state using a panel of certified CIT officers who share information and field questions from officers on their first day of training. Our Curriculum is also unique in providing comprehensive training in suicide, including both mental health and law enforcement perspectives. It includes a focus on veteran's issues and combat related disorders since Cumberland County has one of the highest military-related populations in the state.

Resource Utilization: CIT was implemented without the need to utilize any new local funds. The state allocated limited funding during the start-up phase. For the 2008 and 2009 fiscal years combined, only \$5,224 in State funding was used. All course instructors and facilitators were volunteers or "on loan" from their home agencies (see list). Fayetteville Technical Community College provided the officers' certificates as well the printing of the training manuals at no cost to the program. Training sessions are held at the Cumberland County Detention Center.

Project Duplication and Minimizing Obstacles: The Cumberland County CIT has been successful for a number of factors others could utilize to minimize obstacles in duplicating this service. First of all, we actively solicited input from the public and advocacy groups. We began planning well in advance of anticipated start-up date. We were able to identify potential leaders representing law enforcement, mental health professionals and community advocates who are willing to commit the time and effort necessary to develop and sustain a quality CIT program. Doing this allowed us to convene a strong steering committee with representation of all stakeholders. Throughout the process, best practice guidelines were adhered to while creatively accommodating local needs. For the Fayetteville-Cumberland this meant addressing military and veterans issues and the creative use of mobile crisis teams in the absence of a drop-off assessment site for law enforcement.

Collaboration and Partnerships: The level of support and collaboration with law enforcement leadership throughout the process of implementing CIT in Cumberland County has been amazing. Representatives from more than 15 organizations worked together to make CIT a reality (see attached list of partners). By coming together as a community and sharing resources and personnel, we have been able to implement and run the program with no new costs to taxpayers. Communication between agencies and organizations who had previously taken separate paths in addressing mental health needs have vastly improved. Where there were once multiple levels of frustrations, different approaches and many obstacles, we now have a unified approach to addressing mental health needs.

FAYETTEVILLE - CUMBERLAND CIT ACADEMY



DAY 1	DAY 2	DAY 3	DAY 4	DAY 5
<i>MONDAY</i>	<i>TUESDAY</i>	<i>WEDNESDAY</i>	<i>THURSDAY</i>	<i>FRIDAY</i>
What is CIT? 8:00 -9:00	Site Visit 8:00 – 10:30 Bradford Avenue Center Overview of Mental Health Services	Site Visit 8:00 – 10:30 Roxie Avenue Center Substance Abuse & Co-occurring Disorders	Suicide: Risk Factors & Intervention 8:00 – 9:45	Role Play Exercises & CIT Documentation 8:00-9:30
Mental Health 101: Clinical Disorders 9:00 – 12:00	Deaf & Hard of Hearing 10:30 – 12:00	NAMI Guest Panel 10:30-12:00	Homelessness & Mental Illness 9:45 – 12:00	Evaluations 9:30 – 12:00
Lunch 12:00 – 1:00	Lunch 12:00 – 1:00	Lunch 12:00 – 1:00	Lunch 12:00 – 1:00	Lunch 12:00 – 1:00 (Speaker)
Aging & Dementia 1:00 – 2:30	Hearing Voices 1:00 – 2:30	Trauma, PTSD & Other Trauma/Combat Related Disorders 1:00 – 2:30	Crisis Intervention & De-escalation 1:00 – 3:00	Mobile Crisis Teams 1:00 – 2:00
Veteran’s Issues 2:30 – 3:45	Personality Disorders 2:30 – 3:15	Intellectual Disabilities 2:30 – 3:30		Law Enforcement Perspectives on Suicide 2:15 – 3:30
CIT Law Enforcement Panel 3:45 – 5:00	Responding to Children & Adolescents 3:15 – 5:00	Legal Aspects 3:30 – 5:00	Role Play Exercises 3:00 – 5:00	Graduation 3:30 – 5:00

Our Partners

The Fayetteville-Cumberland Jail Diversion/Crisis Intervention Team (CIT) program is made possible by the support, collaboration, technical assistance and generous sharing of resources by our many partners.

Alzheimer's Association of Eastern North Carolina

Cape Fear Valley Medical Center

Consumer and Family Advisory Committee (CFAC) – Cumberland County

Cumberland County District Attorney's Office

Cumberland County Emergency Medical Services (EMS)

Cumberland County Mental Health Center

Cumberland County Public Health Department

Cumberland County Sheriff's Office

Cumberland Interfaith Hospitality Network

Evergreen – Mobile Crisis Management Team

Fayetteville Police Department

Fayetteville Technical Community College

Fayetteville Veterans Administration Medical Center

National Alliance on Mental Illness (NAMI) – Cumberland County

North Carolina Division of Community Corrections

North Carolina Division of Mental Health, Developmental Disabilities and Substance Abuse Services

Peterkin and Associates – Mobile Crisis Management Team

Fayetteville-Cumberland CIT Academy

Course Instructors and Facilitators

Sergeant Steven Bates, Certified CIT Officer
Fayetteville Police Department

Dawn Baxley, MA, NCC, LPC
Cumberland County Mental Health Center

Sergeant Hardin Brown
Cumberland County Sheriff's Office

Melanie Bunn, RN, MS, GNP
Alzheimer's Association of Eastern North Carolina

William Cross, MD
Cape Fear Valley Medical Center
Emergency Medical Services (EMS) – Cumberland County

Belinda Davis, MSW, LCSW
Cumberland County Mental Health Center

Lieutenant Robert Dicke, Certified CIT Officer
Cumberland County Sheriff's Office

Chris Dempster, MA, LPA, LCAS
Cumberland County Mental Health Center

Denise Giles, MPP
Cumberland Interfaith Hospitality Network

Honi Gluck, MD
Cumberland County Mental Health Center

Dorothy Jeffries
Fayetteville VA Medical Center

Bob Kurtz, Ph.D.
NC Division of Mental Health, Developmental Disabilities and Substance Abuse Services

Major John McRainey, Chief Jailer
Cumberland County Sheriff's Office

Lieutenant Randy Podobinski, Certified CIT Officer
Fayetteville Police Department

Captain William Richberg, Jr., Certified CIT Officer
Fayetteville VA Medical Center Police Service

Ralph Strickland, Attorney
Cumberland County Sheriff's Office

Fayetteville Observer

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Options explored for helping mentally ill

By Drew Brooks
Staff writer

During a training session Monday, a group of law enforcement officers was asked how much time they typically spend sitting in the emergency room with someone who is mentally ill.

The question brought a few groans and varied responses.

"Ten hours," said one officer.

"Three days," said another.

Officials said it's not unusual to have officers off the streets for days after picking up someone suspected of being mentally ill. But if the training this week is successful, those officers won't have to wait so long in the near future.

Monday was the first day of a weeklong course that aims to reduce the time officers are out of pocket while also improving the treatment of those with mental illness. Once in place, the Fayetteville-Cumberland Crisis Intervention Team will be prepared to identify mentally ill people as they come into contact with law enforcement. It also will give officers a better option for handling them, officials said.

Fayetteville police Lt. Randy Podobinski said officers have two options when they respond to a call involving a mentally ill person: arrest the person or take him to the hospital and wait in the emergency room until he is seen by a psychiatrist.

The first option clogs the county detention center and may exacerbate someone's condition. Trips to the emergency room can tie up an officer for hours.

The Crisis Intervention Team will give officers a third option. The officers will be able to take people suspected of having a mental illness to a pre-determined location for an immediate assessment by a mental health official. The Fayetteville location has not been determined.

Wayne Cannon, clinical director of the Cumberland County Mental Health Center, said the team would bridge the gap between the mental health and law enforcement systems. It also would divert the mentally ill into treatment rather than incarceration, he said.

Podobinski said Fayetteville officers spent more than 1,000 hours sitting in waiting rooms with mentally ill people last year. Officers may be tied up with someone for 10 to 12 hours. Once the program is in place, that time could be reduced to less than an hour, he said.

He said a large number of these trips are caused by victimless crimes, such as failure to appear for citations, and could be avoided if those people were receiving the help they need.

"Instead of arresting them. Let's try and get them that help," he said.

Maj. John McRainey, chief jailer at the detention center, addressed the officers for the first session Monday.

He said about 20 percent of the jail's inmates, or more than 100 people, are mentally ill. But jail space is a finite resource, he said, and he'd rather see it used to house more dangerous residents.

"You can either take a person to the hospital or you can take them to jail. Those are your options in Cumberland County, but neither are set up to handle them," McRailey said.

McRailey said the team will not only free up space and reduce costs at the detention center, it also will reduce officer injuries and the use of force by officers on those who are mentally ill.

Officers won't become mental health experts, he said, but they will be able to identify and interact with people who are suffering and be in a position to help them and the community.

The program is based on one started in Memphis, Tenn., in the late 1980s.

Cannon said similar teams are being organized across the state after successes in Wake County, where a team was organized a few years ago.

"This is something that has been talked about in Cumberland County for some time now," Cannon said.

More than 20 officers are attending the training. They will cover topics such as local mental health resources, suicide risk factors, homelessness, substance abuse and responding to children and adolescents. Officers will be trained to deal with post-traumatic stress disorder, dementia and aging, intellectual disabilities and personality disorders.

Staff writer Drew Brooks can be reached at brooksd@fayobserver.com or 486-3567.



Crisis Intervention Team: A Community Partnership



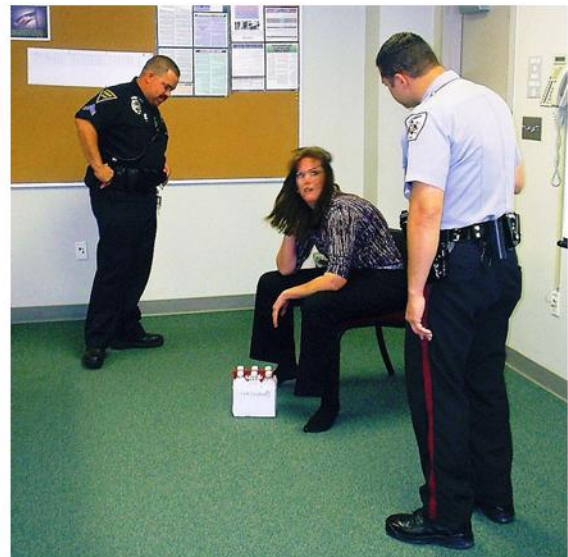
CIT Officer listens to a citizen's concern



Collaboration for a unified approach



Officers visit an Inpatient Facility



Role Playing to put training into practice



Classroom instruction on Mental Health Issues



CIT Officer talks with a consumer