



## **Hybrid CIT Proposal**

### **Middle Peninsula Northern Neck CSB**

**October 2019**

The Middle Peninsula Northern Neck Community Services Board serves a 10 county catchment area encompassing 2200 square miles and a population of 142,250 residents. Since receiving monies for a CIT site, MPNN staff has engaged the community partners in participating and completing the 40 hour CIT training to increase the understanding, awareness and intervention with individuals experiencing a psychiatric emergency. Over these years over 400 law enforcement, first responders, correctional officers, dispatchers, sheriffs, deputies and mental health professionals have completed the 40 hour CIT training. This training has been an integral part of educating first responders and improving the experiences of individuals in crisis in this ten county community.

Due to decreased funding, effective September 30, 2019, and the Kilmarnock CIT site will be closed, leaving one (1) CIT assessment site (Gloucester) in the ten counties. The site is located in the southeastern part of the ten counties adjacent to the campus of Riverside Walter Reed in Gloucester. Due to the location, accessibility is significantly limited for the counties in the northwestern part of the ten counties, to include, Essex, Richmond, Northumberland, Westmoreland, upper Lancaster, upper King and Queen and upper King William. The Middle Peninsula Northern Neck (MPNN) CSB requests the use of a portion of the “retained earnings” from the CIT assessment centers to develop and implement a “Hybrid CIT” to more effectively serve these counties.

The Hybrid CIT concept is outlined as follows:

- Upon the issuance of an Emergency Custody Order the COPE hotline will be notified.
- COPE will dispatch the on-call LEO who will respond to one of the two identified hospitals located in the Northern and Northwestern areas of the ten counties. The Certified Peer Specialist will be dispatched to the site as well.
- Upon arriving at the hospital ER, transfer of custody will occur. This will allow the community law enforcement officer to return to his community.
- If a Temporary Detention Order is requested and issued, the CIT LEO and the Certified Peer will transport the individual to the identified hospital.
- If there is no need for a TDO to be issued and the individual has no way to travel home, the Peer will transport the individual.



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The term Hybrid CIT is used as there would be no building site as with the Kilmarnock CIT and response would be on an as needed basis. Presently, the operating hours of the Gloucester CIT are seven (7) days a week, 12 hour shifts from 10 a.m. to 10 p.m. MPNN CSB responds to 3 (three) hospitals within our catchment, two of which are served by the Northern Neck law enforcement jurisdictions. These are Rappahannock General Hospital, Kilmarnock (Lancaster County) and Riverside Tappahannock Hospital (Essex County). As stated previously, the third hospital is Riverside Walter Reed located adjacent to the Gloucester CIT site. The two identified hospitals are utilized by Lancaster, Northumberland, Essex, Westmoreland, Richmond, upper King William and upper King and Queen. With the closing of the Kilmarnock CIT site, Colonial Beach, the town the farthest from Gloucester is 77.8 miles (travel time of 1 hour and 33 minutes) from the Gloucester CIT site. Towards an effort to reduce the time that community law enforcement officers are out of their community, we are proposing this hybrid CIT program.

Currently our COPE Crisis Hotline, which is staffed by CSB employees, is the primary response system to dispatch ES Counselors. Presently, when an individual is in need of an evaluation and is not in the immediate area served by Gloucester CIT or Gloucester CIT is closed, the COPE staff dispatches emergency services clinicians to the identified emergency room where the individual is located. The hybrid program would utilize the COPE staff who, upon receiving a call and learning that an ECO had been issued, would dispatch an on call CIT LEO to respond to the identified hospital site. A monthly schedule would be developed identifying the on-call CIT trained Law Enforcement Officer. These scheduled individuals will be paid hourly to be on call. The schedule would be 16 hour shifts beginning at 8 a.m. to 12 a.m., 7 days a week.

Upon receiving a dispatch from COPE, the CIT LEO would complete a cursory telephone evaluation to assess for exclusionary criteria. If there are no exclusionary concern, the on call CIT LEO would respond to the ER at Riverside Tappahannock or Rappahannock General Hospital. In addition, a certified peer support specialist would be dispatched. Upon arriving at the hospital, the LEO would accept transfer of custody of the individual. This would then allow the community law enforcement officers to return to their jurisdiction and job duties.

The CIT LEO would maintain custody while the peer would interface with the individual in crisis during the assessment and until there is a disposition on the ECO. If, from the assessment, it is



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determined that a temporary detention order needs to be requested and is subsequently issued, the officer and peer would provide the transportation to the accepting facility. If the individual is not assessed to be in need of the issuance of a Temporary Detention Order, the peer, if needed, would transport the individual back to their home.

A hybrid CIT concept is a creative response to the closing of the Kilmarnock CIT site. In meeting with community partners and law enforcement agencies in the Northern Neck, there was disappointment and frustration in regards to the Kilmarnock CIT site closing. When presented with the idea of a hybrid CIT in their area, community stakeholders were hopeful that a hybrid CIT would be a solution. Given that this CSB has developed robust relationships with our criminal justice partners, has increased awareness in our community about the role of CIT and the role of assessment sites towards defusing a crisis and has trained over 400 LEO's, funding this proposal would offer a dynamic alternative utilizing funds that have already been issued and will creatively meet the unique needs of our community.



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#### Budget

MPNN CSB requests to use \$189,557 of the remaining restricted funding (\$511,000) to support a hybrid CIT. The costs are as follows:

#### CIT Law Enforcement Officers

This expenditure would purchase the cost of law enforcements on an hourly rate. Based on current data, during the 16 (sixteen) hours of proposed LEO availability, there are a monthly average of 20 ECO's in the Northern Neck during the above stated hours. On average, the LEO is with the individual 8 hours. This plan proposes the rate of pay as follows:

On Call Availability	\$20.00 per hour
Response time until individual no longer in custody	\$30.00 per hour

The hourly wage would be \$20 per hour to be available and on call, when dispatched to the ER, the hourly rate would be \$30. If the LEO is with the consumer 8 hours per evaluation, this would be 160 hours monthly. The cost would be \$4,800 monthly. The remaining hours would be 320 hours at \$20 is \$6,400 monthly. The total monthly hours are 480. The annual cost for this is \$134,400.

#### Peer Support Specialist

The cost of an additional peer support specialist to work with law enforcement. The annual salary of \$36,000 plus fringe is \$49,317

#### Cope Staff Coverage

An increase of \$1 an hour for the COPE specialist as their pay is presently at minimum wage. This would compensate staff for additional duties. The COPE staff work 16 hours shifts. The total hours annually are 5,840.

<b>CIT Law Enforcement Officers</b>	<b>\$134,000</b>
<b>Peer Support Specialist</b>	<b>\$ 49,317</b>
<b><u>COPE Staff Coverage</u></b>	<b><u>\$ 5,840</u></b>
<b>Total Cost of Proposed Hybrid CIT Program -</b>	<b>\$189,557</b>



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### Geographic Area to be Served by a Hybrid CIT Response System

