

CIT2020: A VIRTUAL EXPERIENCE

Keeping the Connection

August 24-28, 2020 + 30 Days Available to View Post Conference

Workshop Titles/Descriptions	Presenters
All workshops are 60 minutes	
Monday, August 24, 2020	
12:30 PM - 1:30 PM EST	
I.M.P.A.C.T. (Immediate Mobilization Police Assisted Crisis Team)	Christopher Winters; Amanda Leese
Pine Hill Police, in a unique partnership with Volunteers of America Delaware Valley embedded within the department, offer immediate/direct services community wide, driven by the mission of meeting people where they are, regardless of involvement within the criminal justice system. Partnering with a progressive law enforcement agency who equally recognized the need for collaborative services delivery created a culture that established a true partnership for services implementation and early intervention for at risk individuals. Tracking services delivery and criminal justice system involvement through a shared data system creates real time communication and breaks down barriers that hinder collaborative efforts.	
Medicine-Induced Psychosis: An Officer's Story	Bradley Colas
What if we could understand a CIT situation from the perspective of a police officer who experienced it firsthand? In 2012, Virginia Beach Police Officer Bradley Colas took a commonly prescribed antibiotic to treat an upper respiratory infection; little did he know, this antibiotic would nearly ruin his career and almost cost him his life. Brad shares his stranger-than-fiction story to help first responders become better prepared to handle the various CIT situations they might face on the street. Additionally, his talk conveys the importance of being educated on the dangerous and very real side effects of prescription medications.	
Responding to Veterans in Behavioral Health Crisis	Matt Miller
Military Veterans often encounter different behavioral health challenges or experience behavioral health challenges in higher numbers than the general population. In addition, military culture and Veterans benefits can impact the way law enforcement officers respond to Veterans in crisis - either for better or worse. In this presentation, attendees will learn about the unique behavioral challenges affecting Veterans, as well as the opportunities that can help ensure positive outcomes. This workshop will dispel some myths and teach a strengths-based approach to Veterans' crisis response.	
Regionalizing a Multi-County CIT	Jim Fouts

<p>Counties are different. They each have different needs, system resources, and types of Law Enforcement Agencies. A one size fits all CIT Program doesn't fit. This workshop will describe how to organize a multi-regional CIT Program that incorporates the University of Memphis core components of a CIT Program while dealing with the difficulties of working with diverse County needs. Developing a Regional Task Force of members elected by Local Problem Solving Task Forces, Universal Curriculum and Localized Curriculum, Fund Raising and sharing of funds, and Reporting Mechanisms are all discussed.</p>	
<p>2:00 PM - 3:00 PM EST</p>	
<p>Dispatcher Training of Trainers – How to Train the Forgotten First Responders</p>	<p>Jeff Futo; Ruth Simera</p>
<p>Emergency dispatchers are a critical link in CIT programs. The success of CIT depends on their familiarity with the CIT program, knowledge of how to recognize a CIT call, ability to solicit information that will help the community member and the responding CIT Officer, and appropriate dispatch of CIT Officers. Since 2017, the Ohio Criminal Justice Coordinating Center of Excellence has provided a Training of CIT Dispatch Trainers. This workshop will provide the concrete tools and strategies used throughout the training of trainers to prepare communities for broad dissemination of a CIT companion course for dispatchers and call-takers.</p>	
<p>NAMI New Hampshire and the CIT- Challenges and Successes</p>	<p>Susan Allen-Samuel</p>
<p>How a rural state has partnered with NAMI New Hampshire, New Hampshire State Police and Mental Health Centers to develop and provide a rapidly growing CIT trained population. How to turn the challenges of engaging responders into creating a successful and sought after training that has State and Local Law Enforcement, Fire/EMS and DOC clamoring to bring it home! How to engage multiple partners and smaller pieces into creating a successful and bountiful training and how to gather the data that backs up that success and growth!</p>	
<p>When Does ‘Yes’ Mean ‘Yes’?: Assessing Capacity to Consent for Voluntary Treatment</p>	<p>Amber Vernon</p>
<p>An overview of decision-making capacity with a focus on application within mental health crises warranting the need for emergency treatment. Decision-making capacity/competency is assumed to be present unless proven otherwise and is typically seen as task and point-in-time specific. Although law enforcement and mental health professionals are required to make determinations of an individuals’ ability to voluntarily consent to treatment, it appears that specific training about how to make this determination has been limited. The format will combine lecture, applied discussion, and application-based exercises. Practice case examples will be utilized and relevant legal code examples will be highlighted.</p>	
<p>Disrupting the Revolving Door</p>	<p>Nicholas Dunlap; Crystal Dunivant</p>

<p>This workshop will provide information on first/early episode psychosis. It will highlight the importance of early identification of psychosis and treatment options which has been shown to significantly reduce the duration of untreated psychosis in young people. Coordinated specialty care for first episode psychosis programs is an evidence-based program and recovery-focused treatment that is utilized across the country and throughout the international community. This workshop will also provide details about importance of partnerships with law enforcement including CIT programs, and how these partnerships can increase timely referrals for those individuals experiencing early psychosis.</p>	
<p>3:30 PM - 4:30 PM EST</p>	
<p>Seniors in Crisis – Useful crisis intervention approaches with the elderly</p>	<p>Aurora Garza</p>
<p>People are living longer, the likelihood of responding to a crisis involving an older adult has increased. The goals of this workshop are to identify the comprehension and structure of the aging population, in order to better understand and assist our seniors. Additionally, participants will identify approaches to building alliances with our elderly population and establish useful crisis intervention approaches to assist our elderly community members.</p>	
<p>CIT and the Forgotten First Responders: The Importance of Training 9-1-1 Personnel</p>	<p>Lisa Fitzgerald</p>
<p>The true "First, First Responders", 9-1-1 personnel are on the front lines of mental health crises everyday. The information that they receive from callers is critical to the safety of the responders, the public and consumers. They are the first link in the CIT chain. The 9-11 call taker routinely speaks to callers in crisis , but typically receives very little training in de-escalation techniques. This workshop will explain why it is vital to include 9-1-1 personnel in your CIT training program. You will also be given a guide to what components are necessary in CIT training for 9-1-1 personnel.</p>	
<p>Focused Behavioral Health Techniques for Crisis Negotiations</p>	<p>Susie Kroll</p>
<p>Participants of this workshop will be able to recognize behaviors with a behavioral/mental health component and implement negotiations techniques to advance rapport-building. This workshop incorporates crisis intervention training, signs & symptoms recognition, and tenants of hostage/crisis negotiations. Skills learned can be utilized by all levels of law enforcement from patrol, investigations, and specialty teams.</p>	
<p>What Happens After the Crisis is Resolved? Post-Crisis Navigation!</p>	<p>Erica Chestnut-Ramirez; Terence Lynn</p>

<p>CIT Programs have transformed how law-enforcement addresses individuals experiencing behavioral-health crises. Unfortunately, in many communities, even those with robust crisis-systems, still struggle to connect people to the meaningful ongoing care needed to address underlying behavioral-health needs. To help address this gap we implemented Post-Crisis Transition Navigation services. CIT Officers refer individuals to these Certified Peer-Navigators, who bridge this gap. Navigators work during the post-crisis period, providing support and “warm-handoffs” to ongoing services and treatment. Rather than just handing someone a “resource-sheet,” the Navigator functions more like a “Tour-Guide” to literally and figuratively walk alongside the individual, resulting in amazing outcomes.</p>	
<p>Development of a Diversion Center - Pre-charge alternatives for LEOS</p>	<p>Raymond Lomelo; Tom Mitchell</p>
<p>Have you considered pre-charge alternatives for your areas law enforcement who respond to people with mental illness' accused of committing low-level misdemeanors. Are you interested in developing something new? Would you like to see how it was done in Harris County, Texas? Come and joins us and discover how we collaborated to create the Ed Emmett Mental Health Diversion center.</p>	
<p>Tuesday, August 25, 2020</p>	
<p>12:00 PM - 1:00 PM EST</p>	
<p>Racial Equity and CIT: Existing Research and Emerging Strategies to Address Disparities</p>	<p>Jackson Beck; Pat Strode; Tremaine Clayton; Alex Liao</p>
<p>CIT programs demonstrate the value of community collaboration, but there is a dearth of research examining the extent to which program benefits are shared among communities of color. With evidence already pointing toward significant racial disparities in criminal justice and mental health outcomes, it is incumbent that communities consider strategies to address racial equity in program planning, implementation, and evaluation. In this workshop, Vera will introduce the concept of racial equity in CIT programs, describe how communities highlighted in Vera case studies did or did not account for racial equity, and suggest opportunities to promote racial equity in program development.</p>	
<p>BJA VALOR National CIT Implementation Program: Research Outcomes Across Four Pilot Sites</p>	<p>Colette Scott; Chanson Noether</p>
<p>The secret to sustainability is robust data to support the effectiveness of the program. Effective measurement of CIT program performance includes the evaluation of measurable outcomes utilizing quantitative and qualitative methods. The BJA VALOR CIT Project Team will present research to assess the effectiveness of training at the officer and agency levels including the overall success of the program in reaching goals at the system and community levels. The instruments used to evaluate the training and impact will be shared with participants. Presenters will provide evidence to suggest the collection of robust data can support the sustainability of CIT programs.</p>	
<p>Hoarding for Law Enforcement and Other Public Officials</p>	<p>Maria Spetalnik</p>

<p>Sooner or later public officials find themselves dealing with someone who hoards. The sights, sounds, smells, and emotions can be quite overwhelming for the unprepared. Maria uses humor and real-life examples from her years of work to help guide you through the environment. She will highlight the dangers that may be present, as well as give you a glimpse at how the hoarding person thinks and why they are so resistant to change. You will learn how to read the clues in the hoard to know how to work with the citizen to achieve the best results.</p>	
<p>The Opioid Crisis - Breaking the Cycle</p>	<p>Wendy Philpot; Rob Ferraro</p>
<p>Law-Enforcement is on the front-line of the Opioid epidemic. While an increasing number of departments are equipping officers with Narcan, which greatly increases the ability to prevent opioid fatalities, too often, there is little follow-up or ongoing coordination for preventing future overdoses use. In response, Tempe’s CIT Program and EMPACT partnered on ground-breaking collaboration to deploy Narcan and built a 24/7 system to immediately connect the individual to Peer-Support Specialists, even while they’re still in the hospital. A perfect partnership of CIT and community behavioral health working hand-in-hand to break the cycle of addiction and reduce the burden on law-enforcement.</p>	
<p>In Custody Evaluations: Supporting Recovery after the arrest</p>	<p>Jason Blomberg</p>
<p>This workshop will look at the in-custody program created by the Mesa Police Department to provide court ordered mental health evaluations, court ordered treatment hearings, and stabilization for individuals held in custody for misdemeanor crimes through the Mesa City Court. The program allows people suffering from mental illness who lack the insight for voluntary services to begin court ordered treatment while simultaneously satisfying law enforcement’s responsibility to ensure the public’s safety and the accountability of the offender. The goal of the program is to begin recovery in-custody to reduce recidivism and provide continuing mental health support after release.</p>	
<p>1:30 PM - 2:30 PM EST</p>	
<p>A Native American Approach to CIT</p>	<p>LeMoine LaPointe; Mark Anderson</p>
<p>This interactive workshop for community, public safety and mental health, explores BSF’s approach to working with indigenous homeland and urban communities in Minnesota, South Dakota, North Dakota, Wisconsin, Nebraska, Montana and beyond. Building on strengths and assets of each community to design and implement innovations, participants will experience a Conversational Cycle we use in our work: 4 conversations, Discovery, Dream, Design and Delivery. The Discovery conversation, answers questions like: What values do you bring to your CIT work? What practices in your community's past still guide your work? What are you doing today in CIT that is the most exciting?</p>	
<p>How to Build a Countywide CIT Program: The Ventura County Model</p>	<p>Mark Stadler; Felicia Skaggs</p>

<p>Following a series of officer involved shootings of persons with mental illness in the late 1990's, Law enforcement leaders in Ventura County were determined to find a better way to deal with the increasing violent contacts between officers and persons with mental illness. With the help of Major Sam Cochran and the San Jose Police Department in California, Ventura County built from the ground up a County wide collaboration between NAMI, Behavioral Health, and all law enforcement agencies in Ventura County. Ventura County CIT has continued to grow and become stronger by finding funding sources, utilizing technology, and partnership building.</p>	
<p>The Whys and How's of Incorporating Brain Injury, into the CIT Curriculum</p>	<p>Anastasia Edmonston; Jennifer Spieth</p>
<p>This workshop will share tips and strategies regarding the integration of Brain Injury information into the CIT Curriculum from the point of view of a Maryland Police CIT Coordinator and a Brain Injury Trainer. People with brain injury have higher rates of depression, anxiety and substance use. People living with brain injuries are at higher risk of completed suicide and are over-represented among the incarcerated, the homeless and victims of intimate partner violence. How officers can look for clues of a history of brain injury and strategies to engage with and deescalate as needed will be shared.</p>	
<p>CARE: A multidisciplinary response to community-based behavioral health emergencies</p>	<p>Kevin Spratlin; Michael Sims; James Lash</p>
<p>Known as the "Memphis Model", CIT originated in Memphis, TN, in 1988. Since that time, Memphis police officers have demonstrated how this model has fundamentally shifted the way that law enforcement interacts with mental consumers. Despite this, there were gaps identified in how our city was dealing with these persons. The answer to addressing those who were "falling through the cracks" was to develop a multidisciplinary team which combines the complementary skills sets of police, EMS, and crisis services. This three-person team has been deployed on the streets of Memphis since 2018 and have been making a difference ever since.</p>	
<p>Two Great Examples of Transforming Crisis Response Systems</p>	<p>Michael Hatch; Don Kamin</p>
<p>This presentation will describe two programs in New York State that divert individuals from criminal justice involvement to mental health evaluation and support. The Broome County 911 Distressed Caller Diversion program avoids law enforcement responses for individuals in emotional distress by redirecting some callers to a crisis hotline or a mobile crisis team. The Mobile Access Program utilizes iPads carried by law enforcement personnel to connect individuals with mental health clinicians when a timely in-person response by a mobile crisis team is not possible. Background development, implementation steps and outcome data for both programs will be shared.</p>	
<p>CIT: SWAT Negotiators/Case Managers-A new view of the world</p>	<p>James Arey; Michael Voltolina</p>
<p>In the Jefferson Parish Sheriff's Office CIT trained deputies have begun to function as case managers when they have been involved as negotiators with individuals suffering with chronic mental illness. This is a case study where a CIT trained deputy functioned as the primary negotiator and has remained in contact with the subject, his family, and his therapist.</p>	

3:00 PM - 4:00 PM	
CAHOOTS: An Integrated Healthcare Model Supporting Officers in the Field	Laurel Lisovskis; Bo Rankin; Sara Stroo
<p>For 30 years CAHOOTS, Crisis Assistance Helping Out On The Streets, has been assisting our community in Eugene, Oregon, deescalating people with mental health crises and providing alternatives and care. CAHOOTS helps to address what help looks like in our community, working in tandem with police and fire/EMS, and consists of crisis workers and medical professionals. The vans are dispatched through the police-fire-ambulance call centers. Come and learn about how Cahoots serves in public safety, providing an efficient and effective collaboration with police. For more on Cahoots, check out the Wall Street Journal: https://www.wsj.com/articles/when-mental-health-experts-not-police-are-the-first-responders-1543071600</p>	
The Village Response: A Multi-Agency Approach in Combating the Opioid Epidemic	Brian Le; Veronica Mahathre; Andy Garner
<p>Georgia has experienced a rise in use and deaths related to opioids and synthetic opioids over the past few years. Georgia's Department of Behavioral Health and Developmental Disabilities Office of Behavioral Health Prevention and Federal Grants (DBHDD/OBHPFG) received a SAMHSA grant to implement State Opioid Response (SOR) initiatives to prevent opioid abuse/misuse and reduce opioid overdose deaths. DBHDD/OBHPFG partnered with the CIT Section of the Georgia Public Safety Training Center (GPSTC) to develop a specialized opioid, substance use crisis response training for law enforcement and first responder agencies that adheres to the Strategic Prevention Framework guidelines provided by SAMHSA. DBHDD and GPSTC also worked with Georgia Public Broadcasting to develop additional training videos.</p>	
Essential Measures for Data & Information Sharing Across the SIM	Chanson Noether; Dan Abreu
<p>Data across the Sequential Intercept Model: Essential Measures was released by SAMHSA in 2019 to assist jurisdictions to use data to improve the outcomes of people with behavioral health disorders who come in contact with the justice system. This presentation will provide a deep dive into this publication with practical guidance on applying the information. We will discuss the recommended measures at each intercept, ways to utilize data, challenges in obtaining data, and more. Presenters will share the work they are doing locally to facilitate effective data and information sharing with special attention on intercepts 0-2.</p>	
Community Court, Restructuring the Judicial System to Connect People to Services	Jeremy Huntoon; Aaron Raine
<p>Imagine reducing the revolving door for some of the homeless individuals that you contact the most? The Mesa Community Court was developed to do just this. By cross-system collaboration the Community Court has become a conduit to services instead and solutions of incarceration. Building on the relationships developed through CIT, the Community Court has partnered with the broader community and treatment providers, including infusing Community Bridges Peer Support specialist, into the court to help address complex issues such as untreated mental illness, substance use, and lack of resources. This person-centered approach, has resulted in reducing recidivism by nearly 85%!</p>	

Wednesday, August 26, 2020	
11:00 AM - 12:00 PM EST	
Uncomfortable Bedfellows: Building Relationships with Psychiatric Emergency and Crisis Programs	John Rozel
One of the most important partners any CIT program has is the local Psychiatric Emergency Department or Crisis Center. However, building and maintaining relationships with health systems can be challenging, and even the best collaborative relationships will face inevitable challenges. Nonetheless, a strong collaborative relationship can be a critical tool for the both teams and both systems. Guidance for creating and maintaining these relationships will be provided based on the presenters nearly 30 years of experience in emergency mental health. Tips for identifying opportunities, avoiding pitfalls, and rebuilding trust after conflict will be provided.	
I'm CIT trained, Now What? Starting a CIT Program from Scratch	Troy Siewert
Many police departments recognize the need for, and benefit of, having a CIT program. As a result, they begin sending officers to the basic 40-hour CIT training class. When these officers complete the training class, however, they are often left wondering what to do next. They have little knowledge of resources, limited inter-agency relationships, no agency policies or protocols – only the information they received in class. Not exactly a recipe for success. Here is how a 100-officer police department created a CIT program from scratch, with very little additional expense, and made it into an IACP-recognized best practice team.	
Suicide prevention - a Survivors story - D.J.Roles	Tom Bender; Dan Marguccio; DJ Roles
This workshop will discuss Suicide statistics and myths. DJ Roles will also present the story of his suicide attempt as well as his continued recovery. DJ will take time to answer questions you may have about his experiences. **Warning - The images shown during this presentation may be upsetting. **	
Autism and the Five Legged Stool: Beyond Law Enforcement	Amanda Stamps; Diana Davis Wilson
Calling the police when a loved one with Autism is in crisis can be a nerve-wracking experience. This workshop will provide insight to the wrap around services in Maricopa county, Arizona in response to calls involve ASD/DDD community members including: An understanding of programs available to identify needs of individuals and training provided to police and community members and an overview of critical safety goals for treatment planning, habilitation and family support. This workshop looks beyond law enforcement training and addresses the 5 elements of the stool as it applies to autism.	
P.A.A.R.I. (Police Assisted Addiction Recovery Initiative) and Anne Arundel County Safe Stations.	Allie Hunter McDade; Jennifer Corbin; Steven Thomas

<p>PAARI was founded in June 2015 with Gloucester Police Department's "safe station" program that recognized addiction is a disease, not a crime. Those with addiction need treatment, not arrest and jail. Since, 541 police departments from 34 states have implemented a pre-arrest program that connects people with addiction to treatment. Arundel County's Safe Station program opened every police and fire station 24/7 as an entry point for anyone seeking recovery, when their window of change is open. All barriers preventing treatment are eliminated, including the criminal justice system, by everyone working together, including the Courts and States Attorney's Office.</p>	
<p>2:00 PM - 3:00 PM EST</p>	
<p>Agitation Treatment in the Emergency Department and the Interface with CIT Personnel</p>	<p>Leslie Zun</p>
<p>Personnel with CIT training frequently bring mental health patients to emergency departments. Emergency departments across the country frequently care for these agitated and violent patients with or without the benefit by the skills afforded by someone with CIT. It is important to understand how these patients are evaluated, treated and dispositions made. It is critical CIT personnel collaborate with the emergency department staff to ensure sage and effective patient care. This talk discusses the emergency departments approach to the agitated patients using case examples.</p>	
<p>In the Loop: Information Sharing Within the Police Department</p>	<p>Kimberly Harris; Trevor Clenney</p>
<p>The ability to obtain information, assess data, and share the product with others in the department has been a challenge. The workshop will take you through the efforts and errors of one department's search for effective communication tools. The eMBHR (Monthly Behavioral Health Report) provides key staff with information on citizens who are either considered 'High Risk' or 'Frequent Utilizers of Service' due to behavioral health symptomology. The BUC (Behavioral Update Card) provides critical information on individuals considered to be a Public Safety Risk due to behavioral health symptomology, actions, and/or stated intent to harm others.</p>	
<p>READ HIDDEN EMOTIONS - The Science Behind a New Skill</p>	<p>Dan Seidman</p>
<p>It is important to know what someone is thinking & feeling when your goal is to build constructive relationships through leading, coaching or selling. In this unique program, you will experience a special video tool and hands-on coaching to help you increase EQ as you learn to spot these emotions. This is a new skill. In the past, training has been kept to law enforcement. Today business pros can adopt these potent techniques and can see an increase in their influence and communication skills.</p>	
<p>Surviving Suicide</p>	<p>Doug Monda</p>

<p>After recovering from personal experience with depression and a failed attempt at suicide in 2013, Doug realized more needed to be done for first responders and their families dealing with career related mental health issues, and founded Survive First, Inc. Survive First provides assistance to any first responder and/or family member in need of mental health support. Doug regularly travels to speak to departments, agencies, and academies, to provide education on first responders and mental health, and an intimate look into the life of a suicide survivor.</p>	
<p>Referral to Intensive Case Management: How LEAD Complements CIT & Co-Response Programs</p>	<p>Kimberly Hendrickson; Tara Moss; Michelle Webb; Andy Feaster</p>
<p>Jurisdictions across the nation have developed a suite of new approaches to meet the needs of people who are involved with the justice system and struggle with behavioral illness. But integrating these varied efforts can be a challenge. In this panel, speakers will discuss Law Enforcement Assisted Diversion (LEAD) in the context of CIT and co-response models. LEAD is a pre-arrest, pre-booking initiative for people whose criminal justice involvement stems from unmet behavioral health needs. Speakers will discuss the LEAD model and describe how jurisdictions can integrate and coordinate LEAD with CIT and co-responder programs to maximize each approach.</p>	
<p>3:30 PM - 4:30 PM EST</p>	
<p>Role of Team in Creating a Climate of Change</p>	<p>Andrea Mincks</p>
<p>A step in creating and maintaining a culture of change is to create a guiding coalition or in simple terms: a good TEAM. Team members empowers others with enough organizational power to lead the change effort and keep it on target through its various stages. This presentation will identify the four stages of group development as well as several common mistakes that we make when working on a team. This accounts for five dysfunctions which can impact our plan for change. The presentation will conclude by looking at the change process and how staff are impacted when components are missing.</p>	
<p>With, Not Against - How to Engage Families and Peers</p>	<p>Hannah Longley; William Baker</p>
<p>In the 5 legged stool of CIT, peers, families and advocates are identified as one of the legs. Although it is recognized that they are an integral component of the CIT program, it can be difficult to engage peers and families effectively in CIT participation. There are ways to encourage involvement in the CIT councils in productive and meaningful ways in the delivery of CIT. The peer and family voice is imperative in delivery of CIT, as well as in the day to day police interactions with their community members, such as crisis planning, family support, and the recovery process.</p>	
<p>Telehealth for Patrol: Welcome to the Future</p>	<p>Frank Webb; Ashley Blackburn; Megan Herrin; Jose Gomez</p>

<p>Harris County, Texas, is believed to have the largest telehealth program for patrol in the nation with 100 deputies equipped with iPads. These deputies are able to connect with a masters-level behavioral health clinician to assist on calls involving individuals in mental health crisis. Telehealth is quick, affordable, and efficient. Learn about Harris County's program, including an evaluation conducted by the University of Houston Downtown, funded by Arnold Ventures. This presentation will also include information on a free Implementation Guide developed to assist agencies interested in starting a telehealth program.</p>	
<p>Let's Kick Some ACEs: Understanding Impact of Childhood Trauma on Individual Behavior</p>	<p>Allison Jackson; Michael Megaro</p>
<p>Forty–Six Million Children will be exposed to violence this year. Two hundred and twenty-three million persons in the United States have experienced a traumatic event prior to the age of 18. This workshop will present both the science of ACEs and Resilience as well as professionals lived experiences with complex trauma as a children. Skills in understanding the brain, building individual resilience and offering help that helps will be offered. Together as individuals, families, support systems, organizations and communities we can take on this health challenge all build thriving for this generation and the next.</p>	
<p>A Unique Partnership: Should It Be Unique?</p>	<p>Kasey Moyer; Mike Woolman</p>
<p>The Mental Health Association of Nebraska is a peer-run organization employing over 45 individuals with personal experience living with mental health, substance use, trauma, and/or histories of incarceration. The Peers team up with the Lincoln Police Department to create a unique partnership proven to decrease calls for service and decrease involuntary mental health holds. Police Officers are often the first contact for people facing mental health and substance use challenges. Referring people who are struggling has resulted in greater access to assistance for employment, housing, medication and other alternatives, which alleviates higher levels of care that often lead to incarceration.</p>	
<p>Thursday, August 27, 2020</p>	
<p>12:00 PM - 1:00 PM EST</p>	
<p>Growing a Beautiful Flower: Building a Blended Mobile Crisis Program</p>	<p>Megan Gleason; Reinette Arnold</p>
<p>Seeds can be planted; however, without the right environment they will not grow. Until recently, developmental disabilities and behavioral health crises were served in silos. The development of a mobile crisis program that can address all individuals is not only an innovative idea, it is a need. Within a year, Behavioral Health Link expanded, developed and currently implements a blended mobile crisis program. Our program success contributes to skilled staff, collaborative partnerships and leadership to serve six counties in one of most populated metropolitan areas in the southeast. To date the program has provided clinical support to over 4000 individuals.</p>	
<p>#Act4MentalHealth: Why Advocacy and Mental Health Policy Matters for CIT</p>	<p>Shannon Scully; Hannah Wesolowski</p>

<p>CIT's unofficial tagline is "more than just training." Advocacy is a critical part of CIT efforts and can support policy changes necessary to divert people in crisis from the justice system. During this session, participants will learn about NAMI's advocacy and current policy priorities to improve the lives of people with mental illness. Participants will also hear about the importance of law enforcement's voice in policy discussions to help change the mental health system, tips on how to engage in advocacy within their community and the best ways to partner with local NAMI advocates.</p>	
<p>Crisis Drop-Off Centers & Peers...How Do I Get Some of That??</p>	<p>Jamie Pothast; Liz DaCosta</p>
<p>Crisis Receiving-Centers are becoming more common across the country, however, many struggle to operate with the necessary "No-Wrong Door" philosophy that law-enforcement needs to reduce reliance on Hospital EDs/Jails. Even less incorporate the critical component of Peer-Support directly into their Crisis Program, frequently due to fears related to Peer-Support staffing working with individuals experiencing a crisis. Learn how to transform the way your community responds to crisis, by infusing Peer Support directly into the delivery of facility-based crisis services and providing a welcoming "No-Wrong Door" admission process (guaranteed acceptance) with quick hand-offs (under 10 minutes), while increasing opportunities for recovery.</p>	
<p>"I'm not Superman"-- Building resilience to trauma in a culture of invincibility</p>	<p>Tim Murphy</p>
<p>First responders experience a lifetime of trauma which takes a toll on brain and body. That toll compounds over time, creating changes in brain architecture and problems with mood, memory, concentration, and physical health. Symptoms may be ignored in a work culture less tolerant of psychological weakness. But, it isn't about being weak, its about being ready. This workshop teaches attendees early signs of difficulty, the brain's response to stress and how to retain peak performance in a crisis. Six pillars of resilience and recovery are described in the first responder culture context while avoiding a psychiatric model of weakness.</p>	
<p>Growing Stronger Together: Stress of Police Work on the Family</p>	<p>Heather Brown; Matt Brown</p>
<p>Growing Stronger Together is a unique presentation that will address how the job can potentially impact the officer and their family. Without proper resources, the stress of the job can have devastating outcomes on the individual and family. The presenters will examine the physical and emotional outcomes on the officer and family. The information will be offered from a clinical and personal point of view. Together they have learned to overcome these negative effects and in turn strengthen their lives together. This presentation will provide viewpoints from the officer and the spouse who is also a clinician.</p>	
<p>1:30 PM - 2:30 PM EST</p>	
<p>Effective Acting for the CIT Roleplayer</p>	<p>Swann Christopher</p>

<p>In this workshop, participants will be taught the ins and outs of acting for CIT scenario role-play. Through a combination of lecture, demonstration and participation, participants will learn how to be a more effective role-player using techniques developed by a professional actor that can be executed by anyone, regardless of their experience level.</p>	
<p>Mobile Crisis Response Teams: A Framework for Ontario</p>	<p>Christine Conrad; Lisa Longworth</p>
<p>Mobile crisis response teams have formed rapidly in Ontario with significant variance in model type, operation and data collection. Ontario's geography differs considerably from densely populated cities, such as Toronto, to the remote north, where provincial, municipal and Indigenous police services respond to large catchment areas. This makes it difficult to evaluate models or make recommendations. This presentation will provide an overview of Mobile Crisis Response Teams: A Provincial Framework and Toolkit which offers core components for successful program development, implementation and expansion, promising practices existing in Ontario, community resources and templates for partnership agreements, funding proposals and data collection.</p>	
<p>Stopping Sexual Abuse and Harm/Deaths of People with Disabilities</p>	<p>Guy Caruso; Aurelia Carter</p>
<p>This intellectual developmental disabilities (IDD) presentation will emphasize the high level of sexual abuse of people, especially woman, with IDD and the importance of the police to both understand and respond to such situations. This presentation will stress the use of de-escalation strategies, and NOT becoming physically involved with people with disabilities, as this has led to the harm/deaths of people and the ruination of officer's lives. Examples of the above will be shared, as well as time for discussion and examples of situations. One of the presenters, a mother of a child with a disability, will share her thoughts.</p>	
<p>Understanding and Utilizing A Psychiatric Advance Directive</p>	<p>Marcus Boyd</p>
<p>A psychiatric or mental health advance directive (PAD) is a legal tool that allows a person with mental illness to state their preferences for treatment in advance of a crisis. They can serve as a way to protect a person's autonomy and ability to self-direct care. They are similar to living wills and other medical advance planning documents used in palliative care.[SAMHSA]</p>	
<p>Law Enforcement Resiliency with Gratitude</p>	<p>Barb Bigalke; Mike Crum</p>
<p>The Negativity Bias is the brain's natural ability to focus on negative events. These negative events tend to control personal thoughts, emotions, and reactions. These thoughts, emotions, and reactions create patterns in thinking that are counterproductive to a person's ability to have positive thoughts. With Resiliency skills like Active Constructive Responding and Gratitude we will show CIT Officers and others how to deal with stressful situations, to fight the negativity bias and to build gratitude. By focusing on Gratitude and positive emotions it will build relationships, lower anxiety, stress and potentially suicide rates within our Law Enforcement Community.</p>	
<p>3:00 PM - 4:00 PM EST</p>	
<p>Rural County and Tribal Peer Support - Navigation Services</p>	<p>Daren Fry</p>

<p>In Arizona northern communities we encounter limited resources and vast, open, rural, land to maneuver when coordinating services for patients. In rural Arizona we have very large Tribal Sovereign Nations that cover a lot of the territory. When building a model to provide peer services, transportation and connecting patients to services, it requires a collaborative approach with rural Governmental Agencies, as well as tribal Governments. We have developed programs to serve these populations With mobile peer supports it allows us to utilize the hours of transportation to share the message of recovery, and connect the patients to services.</p>	
<p>Strategic Planning: From Thoughts to Outcomes, the Missouri Crisis Intervention Team</p>	<p>Jason Klaus; Crystal Kent; Dawn Morris; Jen Gentry</p>
<p>The Missouri Crisis Intervention Team is a network of representatives from each established local council across Missouri, Community Mental Health Liaisons, state agencies and associations, including individuals with lived experience. Every year, the MO CIT Working Committee establishes Strategic Goals to address the needs of local councils, including law enforcement, behavioral health providers and those with lived experience. This presentation will provide an overview of the process and how we address these goals throughout the year.</p>	
<p>You Talkin' to Me?</p>	<p>Kimberly Harris; Trevor Clenney</p>
<p>Certain behavioral health symptoms are believed to contribute to some form of public safety threat. This course will examine how delusions of paranoia and command hallucinations factor into the risk of violence. A targeted interview process is imperative to determine the danger continuum and proceed with appropriate interventions.</p>	
<p>Tackling CIT Data Collection</p>	<p>William Baker; Hannah Longley</p>
<p>CIT Core Elements outlines the necessity of data collection in implementation, however departments can struggle with this component. SAMHSA released a best practice guideline of methods for data informed practices of CIT in communities. Collaborative regional councils can be utilized to develop robust programs. These can also be utilized to examine and develop practical data collection plans and indicators to guide interventions, services, supports, and advocacy. Data collection empowers regional councils and departments to take ownership of their communities and recognition of the importance of data collaboration.</p>	
<p>Friday, August 28, 2020</p>	
<p>1:30 PM - 2:30 PM EST</p>	
<p>LIGHTS, CAMERA, ACTION = Best FREE videos for CIT Trainings and Presentations</p>	<p>Kevin Miller; Mike Wells; Thomas von Hemert</p>
<p>This workshop will present lots of short videos clips and films that you can use in your CIT Trainings and Presentations on numerous mental health and law enforcement topics (suicide prevention, autism, de-escalation techniques, adolescent issues, introduction to CIT, delusions, PTSD, etc.). Participants will receive a handout that lists over 70 short video clips with their website that can be downloaded for FREE. New video material will be provided since this presentation was given back in 2017. Sorry, popcorn NOT provided.</p>	

CIT: Connection to Correction	Tiffanie Ritenour-Herring
<p>Our local LME/MCO Trillium Health Resources has partnered with the North Carolina Department Safety-Prisons in Eastern North Carolina. Together we have created a exemplary model for how to effectively initiate CIT skills in the prison setting. Trillium would like to share our program with attendees of the CIT International Conference. The presentation would focus on how to start a program, partnering with the prison system, de-escalation in the prison setting as well as how their response to crises may differ than that of a "street" officer.</p>	
Batman and Robin: Adventures of a Co-Responder Model in the School System	Megan McCarty; Adeli "Minet" Cortez
<p>Responding to the call of the Governor of Texas, Cypress Fairbanks ISD, in Harris County, took the innovative step to implement a district wide Mental Health Intervention Team (MHIT). The mission of MHIT is to promote and support the mental health needs of the community through prevention, intervention and safety. We will present our co-responder model including who we are, what we do, school safety measures as well as suicide and threat prevention efforts. We will share CIT perspectives from the roles of law enforcement, counseling and psychology highlighting how our dynamic duos positively impact mental health.</p>	
Data Collection for the Law Enforcement Agency	Wade Borchers
<p>Data is used as justification for a large number of policy and procedural decision in a law enforcement agency. The data collected will only tell part of the story. The method of data collection is nearly as important. This workshop will detail the best practices for a law enforcement agency on data collection. The Lenexa, Kansas Police Department has been collecting data for over ten years specifically related to its interactions to those that live with a mental illness. A great deal of underreporting was discovered. The methods used to correctly capture this data will be detailed.</p>	
What Would You Do?	Stacy Condi; Leigh Richardson; Shannon Sommers; Adrienne
<p>Steal a box of cereal or let your child go hungry. What would you do? In this unique and interactive learning experience, participants will face the challenge of 'choosing a path' in an exercise that attaches real life dilemmas with unanticipated outcomes. An individual with lived experience will share her story of the path she chose and how it led to recovery. We will explore the overlap of criminal justice and behavioral health with an emphasis on harm reduction. Participants will shout 'Bingo!' and earn prizes during an overview of Allegheny County Justice Related Services and the sequential intercept model.</p>	