

# THE INSIDER

## NORTHWESTERN CRISIS INTERVENTION

### BEING A CIT OFFICER

**OFFICERS TRAINED TO DATE:**

WINCHESTER	6
REGIONAL JAIL	4
PAGE COUNTY	5
WARREN COUNTY	3
SHENANDOAH CO.	2
CLARKE CO.	1
NWCSB	9
<b>TOTAL</b>	<b>30</b>
TRAINERS	13

When I was first approached about attending the CIT School in New River Valley, I was excited and looked forward to learning new skills. Since I have always been interested in working with people and understanding them better, I thought this would be an excellent way to learn more about mental illness, a very interesting and challenging subject. The CIT staff in New River Valley was excellent and the training was truly one of the best I have received to date. I came back to my department eager to learn more about our clients and to develop our CIT team.

Unfortunately, manpower and turnover problems limited us in the beginning. However, to date, I believe our department has more CIT-trained officers than any other agency in our immediate area, and we have more officers interested in attending the training. I can only speak for myself, but I think this training has made me more confident, comfortable, and eager to work with people in crisis. However, just like any skill, I feel if it is not used it can be lost.

Mental illness really scares some, and I guess to a point, it did me, too. I now find myself reading and learning more about mental health every day. The first four steps in CIT training as far as an initial encounter with someone in crisis are really so basic, yet some of us take them for granted and

how they might help to de-escalate a person and the situation. I know I have heard many times how some people feel officers are “not approachable”, “not friendly”, “don’t care”, “don’t understand”, etc. Simply introducing yourself and letting the person in crisis know you have obtained some special training in order to help them, can erase several of the labels above. Listening and taking time to really hear what someone is trying to say is sometimes all it takes. Finally, let the person be a part of the solution.

Sometimes all any of us wants is to be heard and understood. Especially in this busy, non-stop world we live in today. These skills, just like many other skills officers learn, can be applied in many different areas of our lives while dealing with family, friends, co-workers and anyone in crisis. A crisis can happen at any time to any one of us. It is just by the “Grace of God” that some of us have more coping skills and support systems than others.

I feel if nothing else, the CIT Training has made me much more approachable and understanding. When I read some of the facts that NAMI recently published in one of their newsletters, it made me even more interested in working with others and helping them. Those facts included:

1. One in four adults experience a mental disorder in a given year.
2. Early identification and treatment is of vital importance. By getting people the treatment they need early, recovery is accelerated, and
3. Mental disorders are the leading cause of disability in North America.

By being more aware and comfortable with asking the difficult questions, we may just be able to help someone on the street or someone very close to us, get the help they need so it is not a constant battle they feel they are fighting alone.

I know I still have so much to learn. It is with great anticipation that I hope to be a part of big changes and the development of many new programs and ideas for our community regarding the CIT Program. Hopefully by this time next year we will have had local training with more officers becoming CIT certified and the program will gain momentum and continue to be a worthwhile training and career development for our officers and the detention center staff. It is a great program and well worth the time to attend!

~~~MPO Lisa Hyde

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Virginia Stands out at the National CIT Convention



**Chief Michael A. Gibson**  
University of Virginia accepts Award at National Convention in Atlanta, GA

## CHIEF OF THE YEAR—2008

The room stood to applaud the Chief of the Year at the National CIT Conference. Lo and behold it is one of Virginia's finest:

**Chief Michael A. Gibson of the University of Virginia.**

"I was very honored and surprised," Chief Gibson said.

In presenting the award to Chief Gibson the evening of November 5<sup>th</sup> at the Crisis Intervention Team's National Conference in Atlanta, the national organization cited his dedication to the program. He has given matching grant funds with department money for training, met department training goals, including having 55 percent of his officers certified in CIT training.

"This is a multifaceted training for police officers to recognize and deal with someone with a mental illness and safely navigate through the encounter," Gibson

said. "Police now have one more tool. This does not make us mental health experts, but the officers have the skills to engage people in such a way as to get the right kind of help and use the right resources."

Gibson was also cited for supporting custody exchange among local police departments, by which Charlottesville and Albemarle police Departments can bring a person to the University of Virginia Medical Center Emergency Room for evaluation and turn custody over to the University Police.

So congratulation to Chief Gibson, the Thomas Jefferson Area CIT program, and to the fine state of Virginia for setting an excellent example of what community collaboration is all about. **(quotes from an article by Matt Kelly in UVA Today)**

## VA Suicide Prevention Hotline Credited with 2,600 "Saves"

**FOR IMMEDIATE RELEASE  
February 7, 2009**

WASHINGTON – As the military deals with a record number of suicides among active-duty forces, Secretary of Veterans Affairs Eric K. Shinseki reminded Veterans and their families that the Department of Veterans Affairs (VA) has an extensive array of services to help Veterans in distress.

"I urge Veterans and their loved ones to take advantage of our suicide-prevention program," said Shinseki. "Help for these heroes is a phone call away."

Since July 2007, VA has operated an around-the-clock suicide-prevention hotline that has received about 100,000 calls and has

been credited with rescuing over 2,600 people. The number for VA's suicide prevention hotline is **1-800-273-TALK**.

VA operates the largest mental health program in the country, with special efforts in each of the Department's 153 medical centers and more than 750 outpatient clinics to identify and treat at-risk patients.

In addition to operating the suicide-prevention hotline, VA has given all medical workers training in suicide prevention, created suicide prevention coordinators at each medical center, and given primary care clinics responsibility for mental health screening.

"We are reaching out to our newest generation of heroes – the Veterans

of Iraq and Afghanistan – to ensure they are aware of the services available to them," Shinseki added.

New requests or referrals for mental health appointments receive a preliminary evaluation within 24 hours and a comprehensive evaluation with 14 days. Emergency cases are dealt with immediately.

VA operates Readjustment Counseling Centers, commonly called Vet Centers, in 232 communities, where Veterans can receive care for a wide variety of issues related to leaving the military. Vet Center personnel are trained to identify at-risk Veterans and to counsel and connect them to appropriate VA medical services.



## COMMUNITY WORKING TOGETHER AS A TEAM

In early November, I was contacted by a Warren County Jail Correctional Officer. He requested that I come and assess a lady that the Sheriff's Department had arrested due to her brandishing a fire arm at a local Convenience Store.

Upon speaking with both the arresting officer and the individual it became very clear that this inmate needed immediate hospitalization at the state hospital. The inmate presented as delusional stating that she had traveled from the southwest region of the United States, on her way to Washington D.C. to alert the President that "They" were taking over the country and that there were no police officers left in her hometown. She also stated that all of the police officers were being eliminated throughout our Country. She believed her ex-boyfriend belonged to "They" and was following her and going to harm her. While getting gas at a local Convenience Store she saw two men in an SUV pull in believing that they were out to harm her.

She told me about her daughter whom she asked me to call. I called her daughter and confirmed with her that her mother was in Virginia. Prior to her arrival in Virginia, the inmate had taken her daughter's car and it had been reported that she had been having strange behaviors. This inmate was a business woman from the southwest region of the United States.

After I completed a pre-screening on this individual, she was admitted to Western State Hospital, where she spent the next three months in treatment. While at Western State, her Social Worker then arranged to have her car moved to their facility parking garage and I was contacted to coordinate her treatment and services prior to her court date. I also spoke with the Commonwealth Attorney in regard to this individual. After going to court in early January her case was carried over so she was then taken back to the jail. Upon returning to the jail she became very distraught and was hearing voices, crying and threatening to harm herself.

At this time she was then readmitted to Western State. During the interim until her next court appearance, the Social Worker at Western State and I coordinated services in order to obtain information about the Mental Health System in the southwest region of the United States. Information about her financial situation was also obtained. Her daughter wanted her to return home if at all possible. I also worked with the local jail officers and medical services as well as with the Commonwealth Attorney in order to make this happen after she was returned to the jail for her final hearing.

The inmate was released from the local jail with one year of unsupervised probation and the agreement not to return to Virginia. One of the other conditions was that she needed to follow all of the recommendations as given by Northwestern Community Services.

At this point CIT funds were utilized in order for her to be able to have housing for the night awaiting her return to the southwest region of the United States. I provided her with a written outline for her trip back home to include follow-up at her local mental health center.

CIT staff also worked with her in helping to make phone calls to her family as well as providing transportation to a local motel at which she was housed for the night. The next day I transported her back to Western State Hospital in order for her to pick up her car as well as picking up the money she had deposited into an account at Western State Hospital upon her admission.

The outcome of this particular case shows how well the community was able to work together through the judicial system, the state hospital as well as the local community mental health center, Northwestern Community Services. The CIT program wishes to extend their appreciation to the staff at Western State Hospital, the Warren County Jail, the Warren County Sheriff's Department, the Commonwealth Attorney's office and the Warren County Court House in making this collaboration of services work for the betterment of the individual described above.

This example clearly shows how together our community can make a difference for the mentally ill.

**T**ogether **E**veryone **A**ccomplishes **M**ore!



~~~By Carol Schott  
CIT Therapist

# NORTHWESTERN CRISIS INTERVENTION TEAM

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## PROMOTING TEAMWORK

Bringing all the puzzle pieces together—PROMOTES.....

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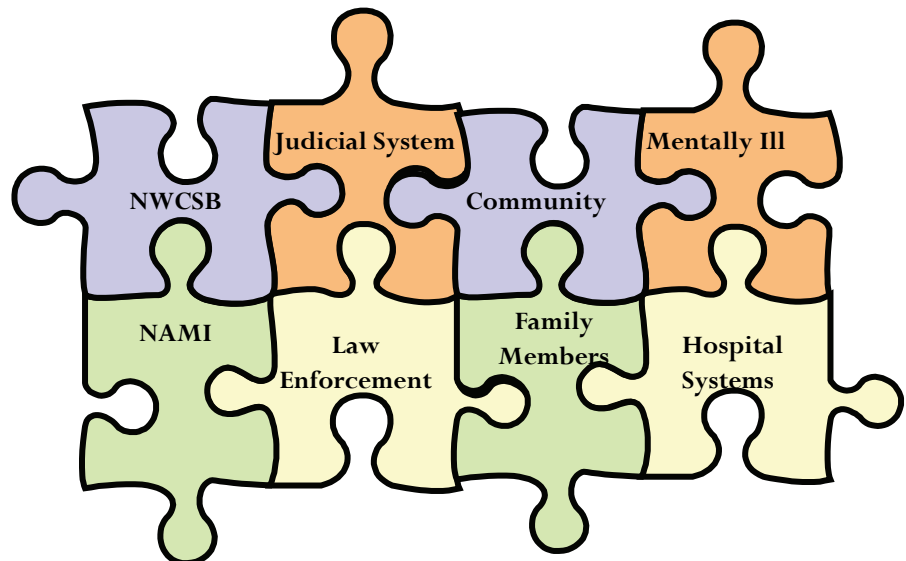
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TEAMWORK = **T**ogether **E**veryone **A**ccomplishes **M**ore!

### Crisis Intervention Team

#### *TRAIN THE TRAINER*

In order to develop our Crisis Intervention Team further, the following individuals completed the 2.5 day training and became certified **CIT Trainers** for our region:

Lisa Hyde  
Gregory Voorhees  
Jonathan Dixon

Winchester Police Department  
Winchester Police Department  
Winchester Police Department

Greg Bowers  
Roseanna Carroll  
Pam Walker

Northwestern Regional Adult Detention Center  
Northwestern Regional Adult Detention Center  
Northwestern Regional Adult Detention Center

Brian Caviness  
Melissa Breedon  
Dominika Seal

Page County Sheriff Department  
Page County Sheriff Department  
Page County Sheriff Department

Ramona Dobbs  
Carol Schott  
Susan Frye  
Dennis Vaughn

Northwestern CSB, CIT Supervisor  
Northwestern CSB, CIT Therapist  
Northwestern CSB, Crisis Services Therapist  
Northwestern CSB, Crisis Services Supervisor