**Virginia Department of Corrections**

**Facility Security and Control**

**Operating Procedure 420.4**

**Corrections Crisis Intervention Team**

**Authority:**
Directive 420, *Incarcerated Offender Control & Use of Force*

**Effective Date:** November 1, 2022

**Amended:** 4/1/23

**Supersedes:**
Operating Procedure 420.4, November 1, 2019

**Access:** □ Restricted   ✓ Public   □ Inmate

**ACA/PREA Standards:**
None

---

**Content Owner:** Lois Fegan  
Chief of Restorative Housing

**Reviewer:** Randall C. Mathena  
Director of Security & Correctional Enforcement

**Signatory:** A. David Robinson  
Chief of Corrections Operations

---

**Review**
The Content Owner will review this operating procedure annually and re-write it no later than three years after the effective date.

**Compliance**
This operating procedure applies to all units operated by the Virginia Department of Corrections (DOC). Practices and procedures must comply with applicable State and Federal laws and regulations, American Correctional Association (ACA) standards, Prison Rape Elimination Act (PREA) standards, and DOC directives and operating procedures.
# Table of Contents

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>DEFINITIONS</td>
<td>3</td>
</tr>
<tr>
<td>PURPOSE</td>
<td>4</td>
</tr>
<tr>
<td>PROCEDURE</td>
<td>4</td>
</tr>
<tr>
<td>I. CCIT Administration and Responsibilities</td>
<td>4</td>
</tr>
<tr>
<td>II. CCIT Member Selection Process</td>
<td>5</td>
</tr>
<tr>
<td>REFERENCES</td>
<td>6</td>
</tr>
<tr>
<td>ATTACHMENTS</td>
<td>6</td>
</tr>
<tr>
<td>FORM CITATIONS</td>
<td>6</td>
</tr>
</tbody>
</table>
DEFINITIONS

**Cool Down Space** - A safe and secure room in general population for inmates to reflect on their behavior choices, manage their emotions, reduce stress, and practice self-directed behavior.

**Community Corrections Alternative Program (CCAP)** - A system of residential facilities operated by the Department of Corrections to provide evidence-based programming as a diversionary alternative to incarceration in accordance with |COV| §53.1-67.9, *Establishment of community corrections alternative program; supervision upon completion.*

**Corrections Crisis Intervention Team (CCIT)** - Corrections employees, mental health providers, and mental health advocates who are learning and working together through specialized training on more effective methods to deal with someone experiencing a mental health crisis.

**Corrections Crisis Intervention Team (CCIT) Liaison** - A CCIT certified staff member designated to act as the facility conduit between management, training, and CCIT Corrections Officers.

**Corrections Crisis Intervention Team (CCIT) Member** - A DOC employee who received specialized training in recognizing symptoms of mental illness, identifying individuals who are in crisis, and using communication skills to assist in de-escalating potentially dangerous situations.

**Crisis** - An individual is in crisis when they are unable to cope with internal or external stimuli creating an inability to function at a reasonable level, thus creating a risk of harm to themselves or others.

**Inmate** - A person who is incarcerated in a Virginia Department of Corrections facility or who is Virginia Department of Corrections responsible to serve a state sentence.

**Probationer/Parolee** - A person who is on community supervision as the result of the commission of a criminal offense and released to the community under the jurisdiction of Courts, paroling authorities, the Virginia Department of Corrections, or other release authority; this includes post release supervision and Community Corrections Alternative Programs.
PURPOSE
This operating procedure defines the structure and utilization of the Corrections Crisis Intervention Team (CCIT) to reduce use of force incidents by training staff to de-escalate situations involving Department of Corrections (DOC) inmates and CCAP probationers/parolees in crisis utilizing specialized intervention techniques.

PROCEDURE
I. CCIT Administration and Responsibilities
   A. A Steering Committee consisting of the following multi-disciplinary team members governs the CCIT:
      1. Chief of Mental Health and Wellness Services or designee
      2. Training Director or designee
      3. Mental Health Initiatives Administrator or designee
      4. Two Training and Development Coordinators or designees
   B. The CCIT Steering Committee meets on a biannual basis to:
      1. Review recommendations from facility CCIT Committees
      2. Develop a research plan
      3. Review research
      4. Ensure consistent implementation across the agency
      5. Serve as a liaison with community partners
      6. Monitor CCIT implementation
   C. The CCIT Steering Committee may form subgroups, such as the Training and Evaluation Committees as necessary to achieve CCIT goals.
   D. The CCIT Steering Committee:
      1. Oversees and supports the development and implementation of CCIT trainings throughout the DOC.
      2. Develops and implements a standardized training curriculum, selects speakers, establishes an annual training schedule, develops online training resources, and serves as a resource for the facility CCIT committees.
   E. Each facility utilizing a CCIT must establish a committee to guide and implement CCIT within the facility. The committee will meet quarterly or more frequently if needed.
      1. Facility CCIT Committee membership includes, at a minimum:
         a. Facility Unit Head or designee
         b. Chief of Security or designee
         c. Facility Training Officer
         d. Mental Health Clinician Senior or designee
         e. CCIT Liaison
         f. Community-based mental health advocate member - by invitation
      2. The facility committee will:
         a. Handle the selection of participants
         b. Mentor CCIT members
         c. Review facility incidents where CCIT was used, successful and unsuccessful
      3. The facility committee provides feedback and quarterly reports to the CCIT Steering Committee,
reviews data reports and monitors for accuracy, provides program support/problem solving, and ensures adherence to CCIT principles.

F. Mental Health Advocates
   1. Each committee invites at least one community-based mental health advocate member.
   2. This member provides input from the perspective of people who live with mental illnesses and/or their family members.

II. CCIT Member Selection Process
   A. Any staff member desiring to become a CCIT member should notify their supervisor.
   B. Training
      1. CCIT Training:
         a. Assists staff in learning to recognize and respond to inmates in crisis.
         b. Helps staff recognize some apparent signs and symptoms of crisis.
         c. Equips staff with tools and techniques they can use to diffuse situations in a professional, competent, and empathetic manner.
         d. Helps to prevent injuries and other tragedies.
      2. To be CCIT certified, staff must successfully complete the Commonwealth’s 40-hour training program.
      3. The DOC curriculum will include at the minimum the following topics:
         a. Mental health disorders and treatment
         b. Treatment systems
         c. Verbal de-escalation and effective communication
         d. Cultural competence
         e. Policies, procedures, and legal issues
         f. Self-care
         g. Hearing voices, understanding Schizophrenia
         h. Dealing with veterans in crisis
         i. The Four Coaching Plays/Basic Corrections Crisis Intervention Team Skills
         j. Role plays
         k. Mental Health Services And Success Stories in The Community
   C. Facility CCIT Response
      1. As a situation is developing and a CCIT trained staff member is immediately available, the CCIT trained staff member may utilize CCIT de-escalation tools without authorization from the Shift Commander.
      2. As the situation continues, CCIT trained staff must evaluate the circumstances and any available information to determine what further response, if any, such as use of the institution’s cool down space is necessary to include notifying the Shift Commander of the incident.
      3. If CCIT trained staff is not immediately available, and a non-CCIT staff member determines that the CCIT de-escalation tools may be beneficial in an escalating situation, the staff member must contact the Shift Commander and request activation of trained CCIT staff.
   D. Reporting
      1. When CCIT trained staff utilize their training to intervene in a planned use of force incident, during an active incident, or to prevent a crisis or incident, the staff member must complete and submit an Internal Incident Report in VACORIS prior to the end of their shift; see Attachment 1, Corrections
2. The Internal Incident Report must include the following information:
   a. Type of Incident; select “Corrections Crisis Intervention Team involved”
   b. Description of incident
   c. Action taken during incident
   d. Location of incident
   e. Special inmate and CCAP probationer/parolee characteristics
   f. Time spent intervening
   g. Any referrals offered/requested

E. The Facility Unit Head may temporarily suspend or remove a CCIT member, pending a review into their conduct or any circumstances that may affect their continued voluntary participation with the CCIT program.

REFERENCES
COV §53.1-67.9, Establishment of community corrections alternative program; supervision upon completion
Virginia Crisis Intervention Team Coalition

ATTACHMENTS
Attachment 1, Corrections Crisis Intervention Team Internal Incident Instructions

FORM CITATIONS
None