

Crisis Intervention Training (CIT)

The benefits of CIT-trained staff for reducing behavioral challenges in prison residents with mental health issues

Agency: Pennsylvania
Department of Corrections State
Correctional Institution (SCI)
Greene

Pilot Duration:
08/31/16–11/30/16

Pracademic*: Tina Staley

Context
Crisis Intervention Training (CIT)
teaches corrections staff to
respond appropriately to
situations involving incarcerated
individuals with mental health
disorders, but not all staff have
been trained.

Key Finding
A mental health unit structured
with only CIT-trained staff
experienced fewer informal
(lower-level) misconducts than a
similar unit without CIT-trained
staff.

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who lead trials.

Background

More than half of prison residents have a diagnosed mental health disorder. Some correctional institutions have established training programs to prepare staff for interactions with persons diagnosed with mental health conditions. Efforts are focused on resolving crisis and reducing disruptive behaviors. Crisis Intervention Training (CIT) is an intensive four-day program to teach corrections officers skills and methods for interacting with this population.

Pilot Design

In a small feasibility pilot, SCI Greene randomly assigned two pods in a Residential Treatment Unit (RTU), housing persons with mental health diagnoses. All staff in the intervention condition pod were CIT trained, whereas staff in the control condition pod were not. All other procedures remained identical.

Results

The table shows baseline characteristics and outcomes. The groups differed in custody/risk level, which may have influenced the outcomes because higher custody levels indicate a greater potential for problem behavior. Outcome analysis revealed no differences between the groups’

rates of higher level misconducts that required a formal hearing, whereas the intervention group had a lower percentage of informally resolved misconducts. The control group also reported more grievances. Of specific interest is that a lower number of the intervention group were transferred to specialized units due to problem behavior or for psychiatric observation. These results indicate a benefit of CIT for correctional staff and provide justification for a randomized controlled trial.

**Baseline Characteristics
and Outcome Results**

	Intervention; n=98	Comparison; n=96
Custody level 3	39.8%	22.9%
Custody level 4	25.5%	45.8%
Mental health diagnosis	76.5%	80.2%
Misconducts	2.9%	5.8%
Informal Resolutions*	0.6%	2.9%
Grievances*	0	5
Transfer to psych observation	10	20
Transfer to seg housing	3	6

*statistically significant difference ($p < 0.05$)

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