City of Toronto Mobile Crisis Intervention Team Program













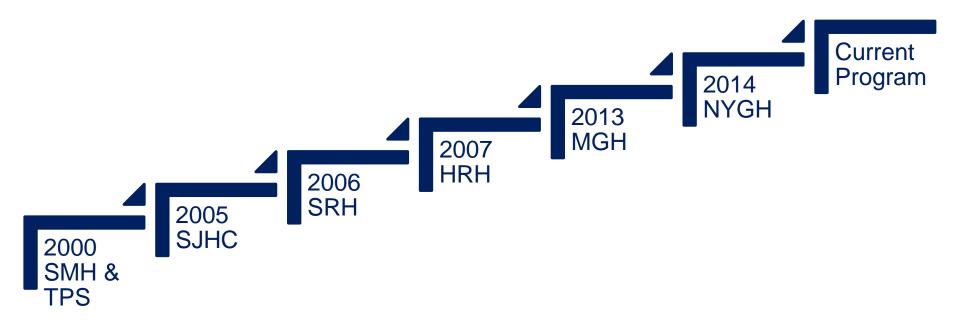






History of MCIT





















Mobile Crisis Intervention Team



- Partners a mental health registered nurse and a specially trained police officer.
- Provides a community response to individuals who are experiencing a crisis.



















Program Goals



- Provide prompt assessment and support to a person experiencing a crisis.
- De-escalate and prevent injury.
- Link people in mental health crises to appropriate community services if follow-up treatment is recommended.
- Reduce pressure on the justice system.
- Reduce visits to emergency department.









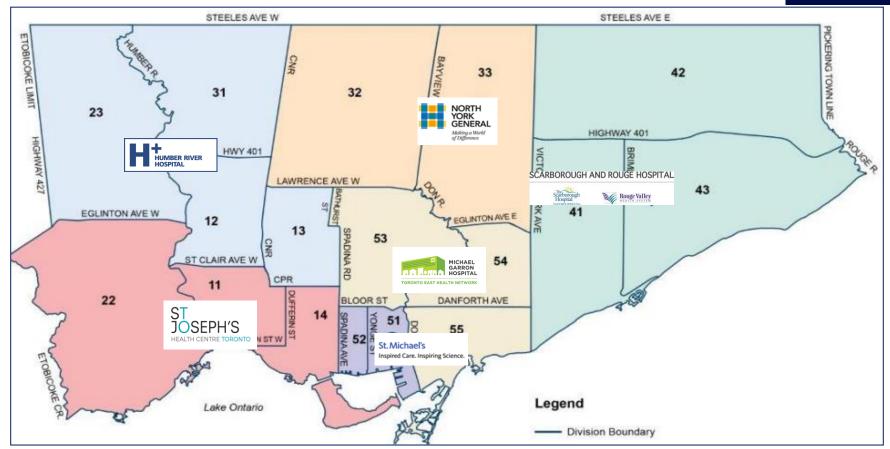






City of Toronto MCIT Program





















Roles



Complementary, yet distinct.

Officer	Nurse
 Ensures safety and security of everyone on the scene. 	 Completes Mental Health Assessment.
 Utilizes Section 17 under Mental Health Act (MHA). 	 Collaborates with officer in apprehension decision-making.
 Executes MHA Forms. Determines need for follow-up 	 Facilitates improved communication with Emergency Department.
	 Determines most appropriate continuation of care.
	Determines need for follow-up.













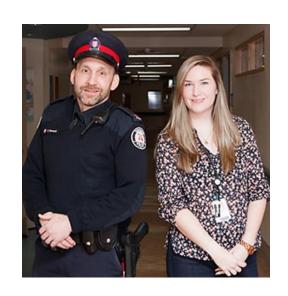




Benefits of MCIT



- ✓ Combined mental health and police expertise leads to better care
- ✓ Clients seen in their own setting
- ✓ De-escalate and avert injury
- ✓ Support and re-assure clients

















Evaluating MCIT in Toronto



Reports written in 2014, 2015, and 2017 found...

- MCIT helps keep care in the community.
- MCIT prevents unnecessary admissions to the ED and interactions with the justice system.
- Client feedback indicates overall satisfaction with MCIT encounters including high levels of safety, respect, and de-escalation.















Enhanced Service & Level of Care



Higher quality of care has resulted from:

- Increased time spent with clients
- Reduced handcuff use
- Increased shared decision making between MCIT and clients
- More sensitive communication
- Decreased stigma
- Greater Primary Response Unit collaboration

















Percentage of PIC Calls Attended by MCIT



2013	2014	2015	2016
20% (4,119 / 20,562)	23% (5,124 / 22,357)	26% (6,148 / 23,302)	26% (6,638 / 25,613)

- # of person in crisis calls to TPS continues to rise
- Calls attended continues to increase for MCIT















1 team Fri - Sun

2 teams Mon - Thurs

2 teams Mon - Thurs

1 team Fri - Sun

1 team Fri - Sun

1 team Mon - Sun

1 team Mon - Sun

51, 52

53, 54, 55

41, 42, 43

32, 33

Hours of

Operation

11am-9pm

11am-9pm

11am-9pm

12pm-10pm

12pm-10pm

12pm-10pm

leam Distribution & Hours			
Abbreviation	Health Centre	Divisions	
HRH	Humber River Hospital	12, 13, 23, 312 teams Mon - Thurs1 team Fri - Sun	
SJHC	St. Joseph's Hospital	11,14, 22 • 2 teams Mon - Thurs	

St. Michael's Hospital

Michael Garron Hospital

Scarborough & Rouge

North York General

Hospital

Hospital

SMH

MGH

SRH

NYGH

Frequently Asked Questions



What types of calls do MCIT respond to?

- Suicidal
- Psychotic
- Depression
- Anxiety
- Forms (1, 2, 47, 9): can assist but generally a PRU function

What types of calls do they not respond to?

- Violent individuals with weapons
- Overdoses















Video Clip

Inside Toronto Police Service's Mobile Crisis Intervention Teams

https://youtu.be/osrzI06wT5E

















QUESTIONS?



















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