



THOMAS JEFFERSON AREA CRISIS INTERVENTION TEAM

CONTACT INFORMATION:

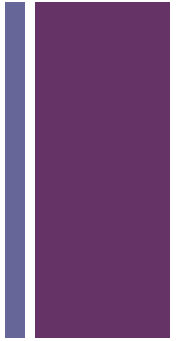
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50 WAYS TO IMPROVE YOUR CIT

+

1 = INTRODUCTIONS



- 1. YOUR NAME ???
- 2. AGENCY / DEPARTMENT ???
- 3. # OF YEARS OF SERVICE ???
- 4. WHAT DO YOU SEE ???



2 = STIGMA EXERCISE

Stigma of mental illness

- **Mentally ill persons denied participation in family life, social networks, and productive employment**
- **Stigma has detrimental effect on mentally ill person's recovery and level of self-acceptance**
- **Rejection of people with mental illness affects family and caretakers**
- **Major causes of stigma are myths, misconceptions and negative stereotypes of people in community**



3= MENTAL HEALTH QUIZ



- This quiz developed by VOCAL (the Virginia Organization of Consumers Asserting Leadership).
- VOCAL is a statewide consumer-run nonprofit organization dedicated to mental health recovery, empowerment, and peer leadership.

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4 = How to set the classroom



- CLASS ROOM STYLE
ROWS OF DESKS

VS.

- SINGLE U – SHAPE
ROW OF DESKS

+ # 5= HOUSE RULES

- 1. START ON TIME.....FINISH EARLY
- 2. TRAINERS WILL BE INTERESTING & INFORMATIVE
- 3. HAVE FUN / NO WEAPONS
- 4. CELL PHONES OFF / VIBRATE
- 5. NO TEXTING DURING CLASS
- 6. OTHERS RULES???

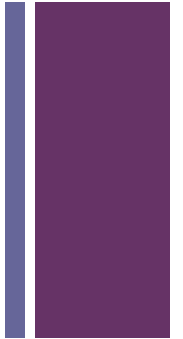


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6 = FOOD

(breaking bread together)

- Have foundations/programs sponsor your lunch.
- Virginia Division of the Southern States Police Benevolent Association





7 = CLASS/SESSION EVALUATIONS



■ **Thomas Jefferson Area CIT EVALUATION FORM**

■ **NAME:** _____ (Optional) **AGENCY:** _____ (Optional)

■ **SESSION** _____

■ **Interesting & Informative** _____ **Interesting & Not Informative** _____

■ **Uninteresting** _____ **A Waste of Time** _____

■ **COMMENTS:** _____

■ _____

■ **What did you like best?** _____

■ **What did you like least?** _____

■ **What would you suggest for the next training on this unit?** _____

■ _____



#8 = PRE TEST – POST TEST



- *For questions 1-10, please rate yourself by circling an answer as of today and a second circle to indicate before class began on Monday. (1 = Low 5 = High)*

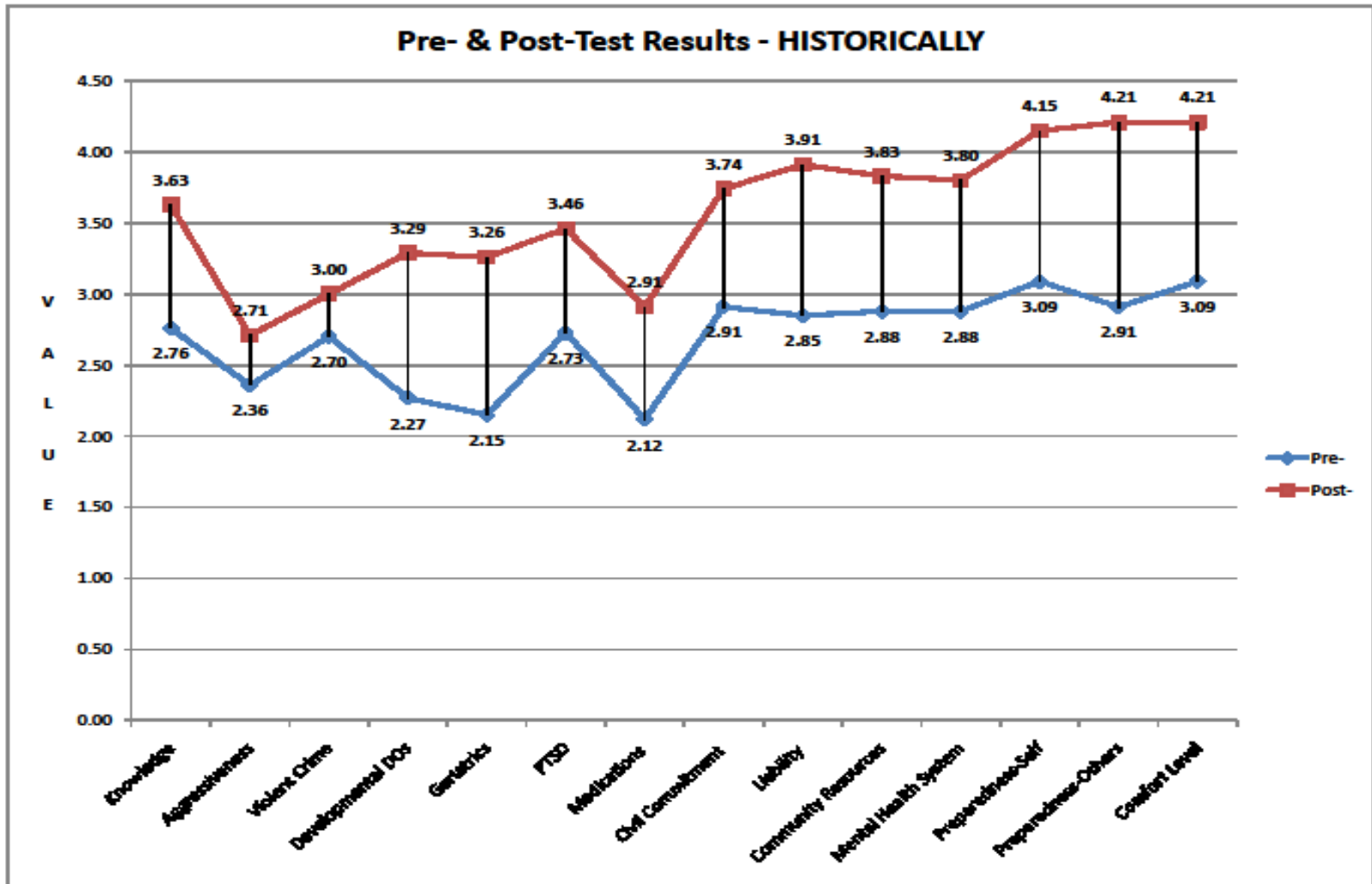
1.) How would you rate your comfort level in dealing with an individual suffering with mental illness?

■ Prior to this week: 1 2 3 4 5

■ After training week: 1 2 3 4 5

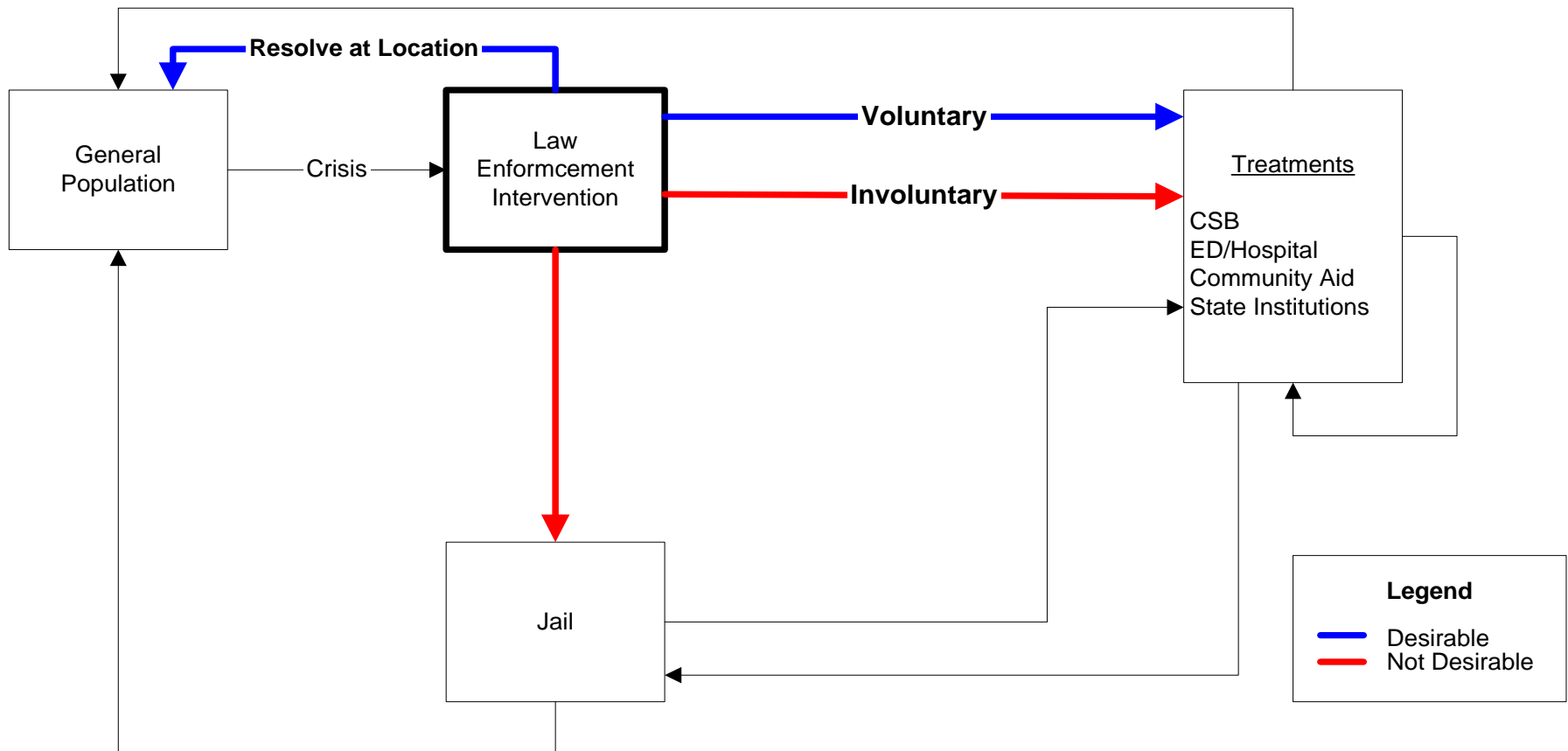


#9 = PRE/POST TEST RESULTS



#10 Power Point Slides

(boring!)



+ Four Outcomes for Officers Responding to Mental Health Crisis Calls





Jail





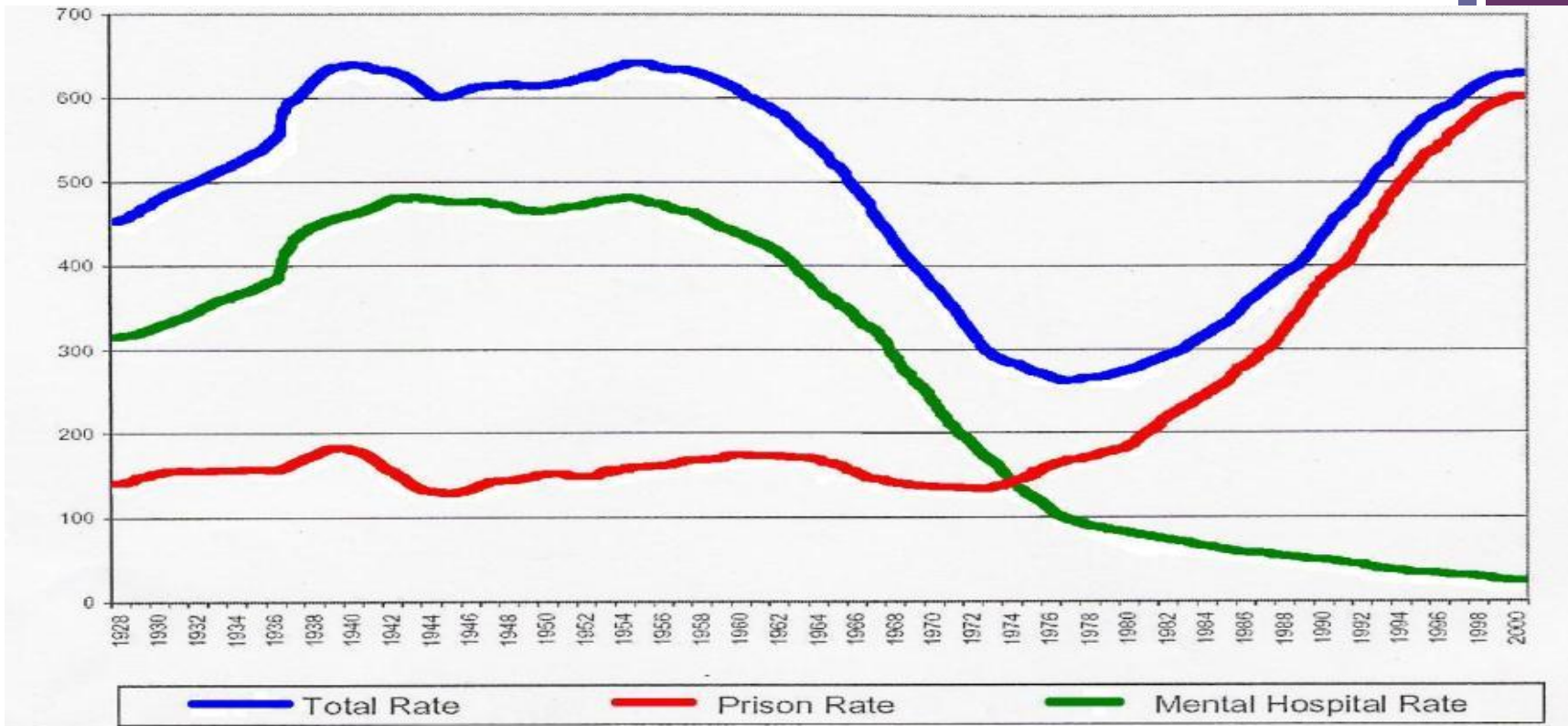
OBJECTIVES & OUTCOMES

- Keep many individuals with mental illness out of the criminal justice system *(when safe and appropriate).*





#11 The Need for CIT



Institutionalization in the United States, 1928-2000 (per 100,000 adults)*

*U. of Chicago, Public Law Working Paper

REGIONAL JAIL	RATED CAPACITY	CURRENT COUNT	OPERATING AT
Central Virginia	242	400	160%
Albemarle Charlottesville	329	425	130%

Estimated Number of Inmates with Mental Illness in Our Local Prison Systems

Regional Jail	Current Count	Number of Inmates with Mental Illness(17-18%)
Central Virginia	400	68 - 72
Albemarle-Charlottesville	425	80 - 85



The Need for CIT



- There are **400 to 500 offenders** with mental illness in Charlottesville/Albemarle area
- **3,200 to 3,500** people in Virginia jails on any given day have a mental illness

-Virginia Department of Correction

- Inmates with mental illness regularly experience **recidivism rates above 70 percent**

-National Institute of Corrections



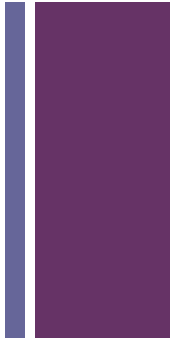
The Need for CIT.....

Incarceration of offenders with mental illness often exacerbates the problem for two reasons:

- 1.) Predatory inmates mistreat and take advantage of inmates with mental illness.
- 2.) usually leading to an extended period of incarceration and added criminal charges.

-Consensus Project Report

1/3 of our regional state psychiatric hospital's (Western State Hospital) released forensic admissions are rearrested.



US Military Veterans



Veterans account for **21-25 %** of all suicides in the US
-VHA Undersecretary for Health

Overall suicide rate for soldiers in 2006 was **17.3 per 100,000 soldiers**

-US. Army

Overall suicide rate for citizens of US in 2005 was **11.05 per 100,000 citizens**

-CDC

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Post-Traumatic Stress Disorder (PTSD)

Symptoms include reliving the event, avoiding situations related to the event, feeling numb, hyperarousal, feelings of shame and despair, depression, rage, physical symptoms

The rate of diagnosable **1 in 5**

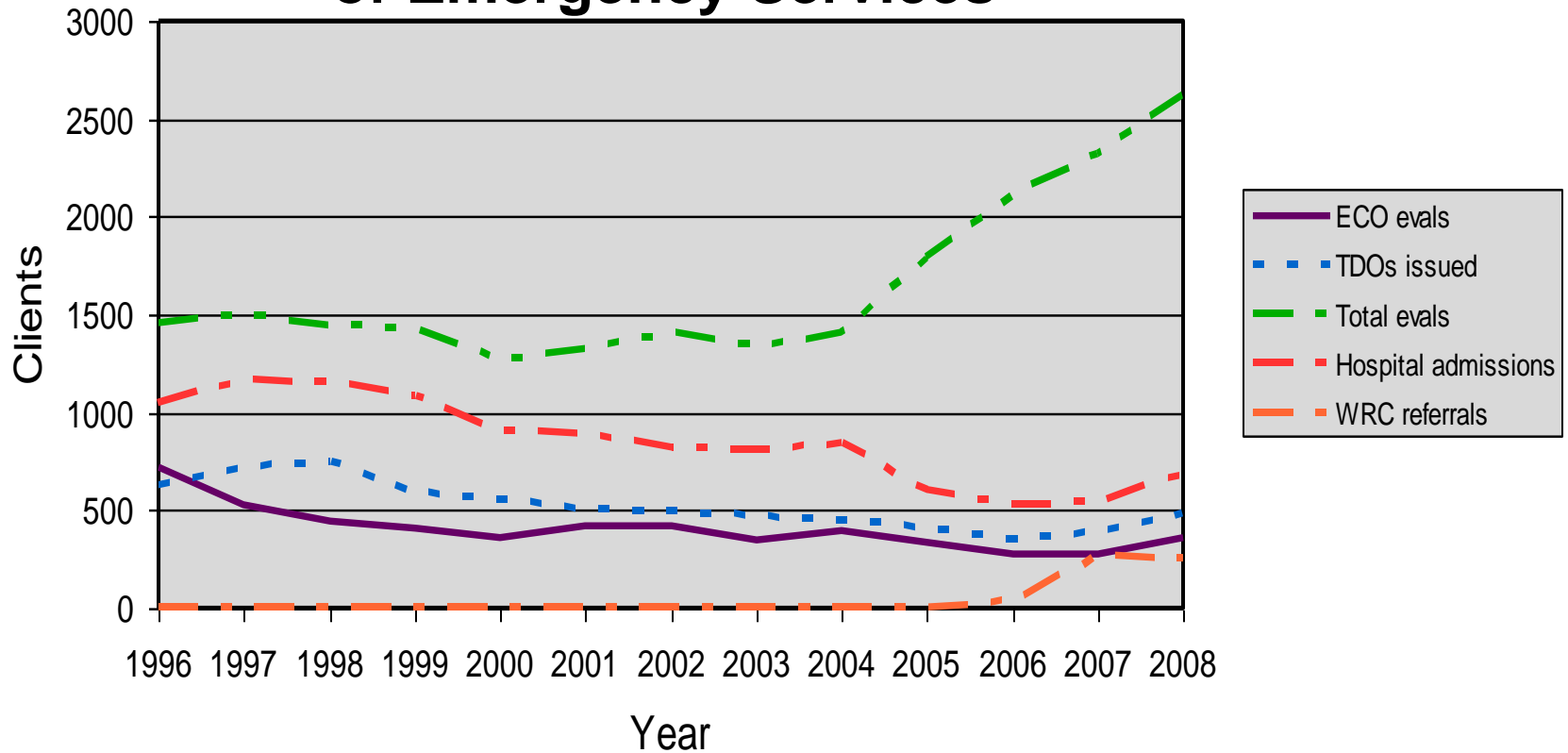
PTSD among returning
for Veterans



+ Region Ten Community Services

Covering Charlottesville, Albemarle, Green, Nelson, Louisa, and Fluvanna

Trends in the Department of Emergency Services





#12 What is CIT???

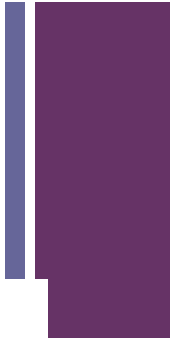
CIT is...

**An exemplary pre-booking
jail diversion program for
the mentally ill.**

**A process of addressing system
change for crisis care within a
community as a whole.**

**About responsibility to the
community, family members,
and consumers of mental
health services.**

**More than a training program
for selected police officers. CIT is
a mindset!**



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VISION



- Safety for the Officer,
- Safety for the Community
- Safety for the Person in Crisis





MISSION



- CIT is designed to educate and prepare law enforcement officers who come into contact with people in crisis, to recognize the signs and symptoms of mental illness and to respond effectively and appropriately to the individual.



#13 WHAT CIT IS NOT.....



■ Active Shooter

- Virginia Tech

- Columbine High School

- Sandy Hook

■ Situations where your personal safety / community safety is endangered

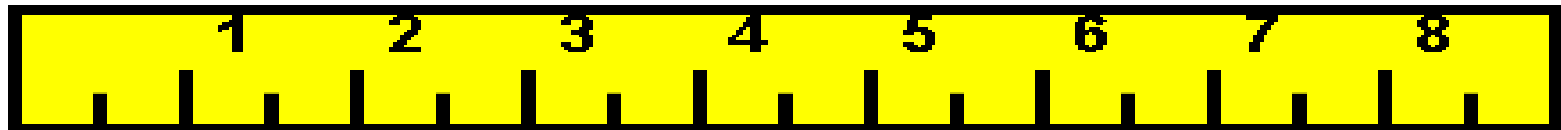
■ IMPORTANT: *Follow your department's protocols on officer safety*



#14 Data Collection- Measuring the Success of CIT



What gets **MEASURED**
is what gets **DONE**



If you can't **MEASURE** it
you can't **MANAGE** it



OBJECTIVES & OUTCOMES



- **Objective:** Reduce officer injuries due to mental health crisis calls.
- **Outcome:** Over five years (2008-2012) there were over 6,000 mental health crisis calls with **NOT** a single documented officer injury (Charlottesville, Albemarle, UVA).



OBJECTIVES & OUTCOMES

- Objective: **Reduce time** that officers spend on mental health related calls.
- Outcome: Reduced officer ECO / TDO time from an average of 4 to 6 hours per call to an average of **52 minutes** (from time of dispatch to the time of releasing custody of patient at UVA hospital ER with Custody Exchange MOA with UVA Police Department).





OBJECTIVES & OUTCOMES



- **Objective:** Based on the Virginia CIT Model, **train a minimum of 25% of patrol officers** within each law enforcement department to be trained in CIT.
- **Outcomes:** Over **70% of all police** officers (Charlottesville, Albemarle, UVA) instructed in 40-Hour Virginia Department of Criminal Justice Services (DCJS) accredited trainings.



OUTCOMES (Continued)



- Over **30% of county sheriff deputies** within 8 of the 9 rural counties trained in the Thomas Jefferson Area CIT region.
- **100% of Emergency Dispatchers** instructed within 8 of the 9 localities in the TJA-CIT area in 4-Hour CIT Training (currently increased to 8 hour trainings).
- Trained over **1,000 officers** within TJA-CIT area and throughout Virginia.



+ Four Outcomes for Officers Responding to Mental Health Crisis Calls



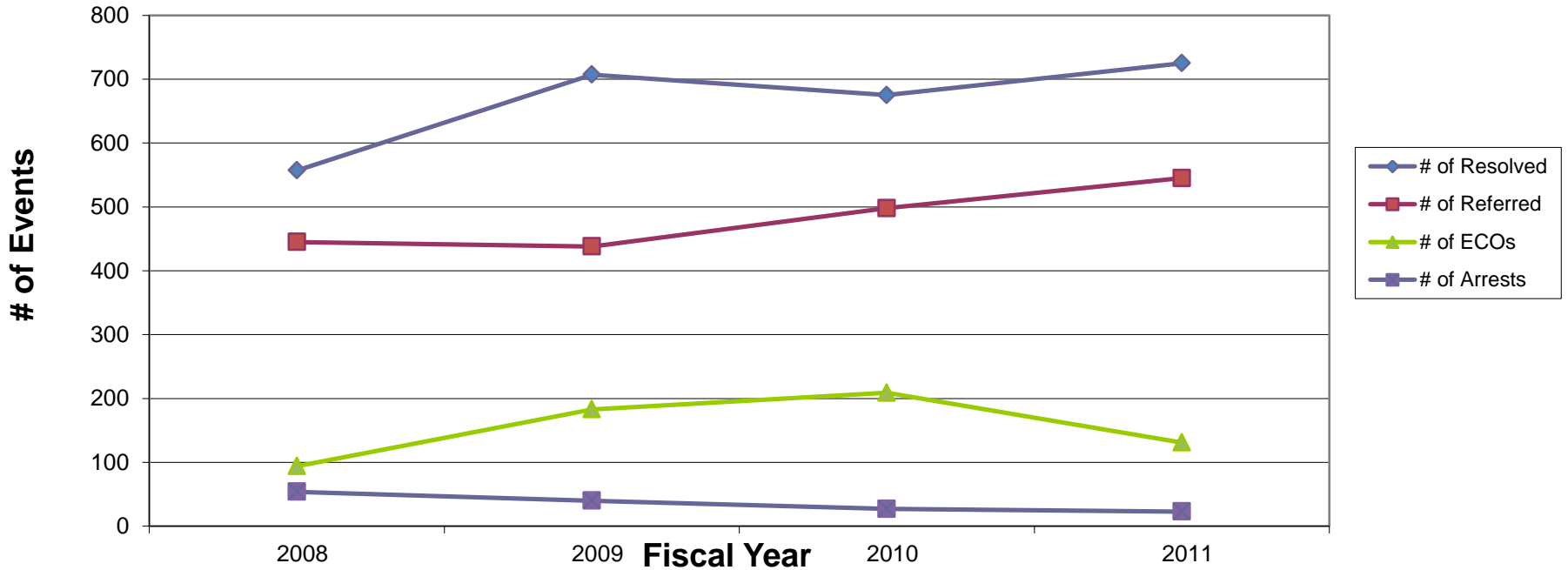


OBJECTIVES & OUTCOMES



■ 4 Years of 911 Mental Health Crisis Calls

Combination of CIT Statistics



ACTION: The consensus was for officers to report to 911 dispatchers the following:

- 931-3** Mental Health Crisis Calls resolved at location
- 931-7** Mental Health Crisis Calls – Voluntary Committal Transport (*to hospital, Region Ten, On Our Own, Home, Club House, etc.*)
- 931-1** Mental Health Crisis Call – Emergency Custody Order (ECO)

- 931 & Arrest Code** Mental Health Crisis Call resolved with an arrest to jail



OBJECTIVES & OUTCOMES



- **Developed Standard Operating Procedures (SOP)**
- **With Law Enforcement Departments for improved communications between Officers, Emergency Dispatchers, local Hospitals and Region Ten CSB with responding and transporting to Emergency Custody Orders (ECO) Crisis Calls.**

+ Communication Policy

Before CIT

After CIT

Officer does not communicate request for services and notification

Officer makes request to dispatcher for services and notification

#1 No call to MEDCOM to notify about mental health patient in route for appropriate medical service

Call is made to MEDCOM to notify about mental health patient in route for appropriate medical services

#2 No consistent policy to communicate with Region 10 Emergency Services Department for mental health evaluation preparation

Call is made to Region 10 Emergency Services department for mental health evaluation

#3 Long custody times with patient while waiting for mental health and medical services

Call is made to UVA Shift Officer for custody exchange preparation

+ **Communication Policy**

Action	Benefit
Officer Requests Dispatcher Action to...	<u><i>Quicker, Faster, Safer</i></u>
1) Medcom	Medical Service Preparation
2) Region Ten	Evaluation Response Time
3) UVA Police	Patient Custody Exchange



OBJECTIVES & OUTCOMES



- **Objective:** CIT Taskforce is to design and implement written protocols that govern the agencies' interactions in working with people experiencing acute episodes of mental illness in situations in which law enforcement has intervened.





Goals of CIT Receiving Facility

- ❑ Accept All Patients (Regardless of Clinical Status)
- ❑ 15 Minute Officer Turnaround
- ❑ Appropriate Facility (re: Level of Acuity)
- ❑ Evaluations 2 to 6 hours (Up to 24 hours)
- ❑ Medical Examination
- ❑ Complete Mental Status Examination
- ❑ Wide-Ranging Disposition Options
- ❑ Security provided when needed



OBJECTIVES & OUTCOMES



- **Created Memorandum of Agreement (MOA)**
- **Contracted with University of VA. Police Department establishing a Regional CIT Custody Exchange Program to enhance the handling of ECO patients at the University of Virginia Emergency Department (UVA ED) for evaluation. Seven localities signed the TJA-CIT MOA for FY2014.**



ECO Stats

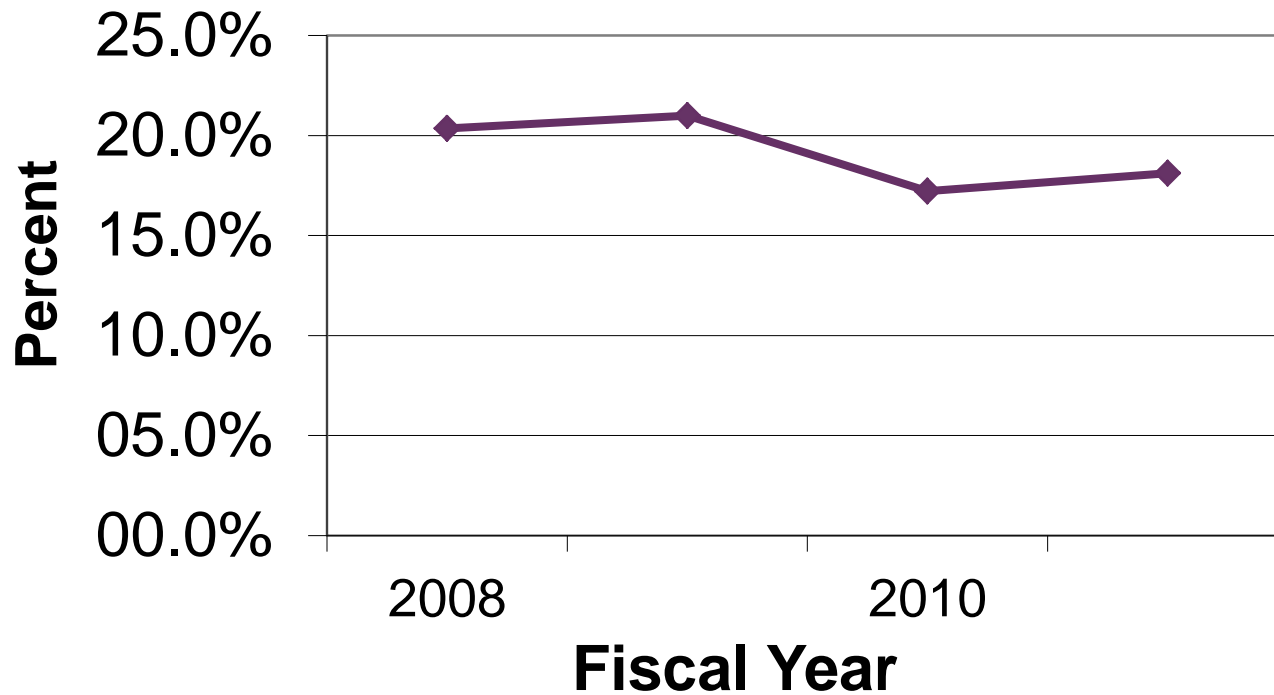
(2008 to 2012)

Statistic	Average
Time in Custody	2:56 Hours
Originating Officer Time	0:52 Minutes
ER Custody	2:15 Hours
MH Evaluator Delay	0:53 Minutes
Percent Not TDO	50%
Percent by CIT Officer	40%
Percent ER Diversion Room Used	21%

+ Emergency Room Usage for ECOs

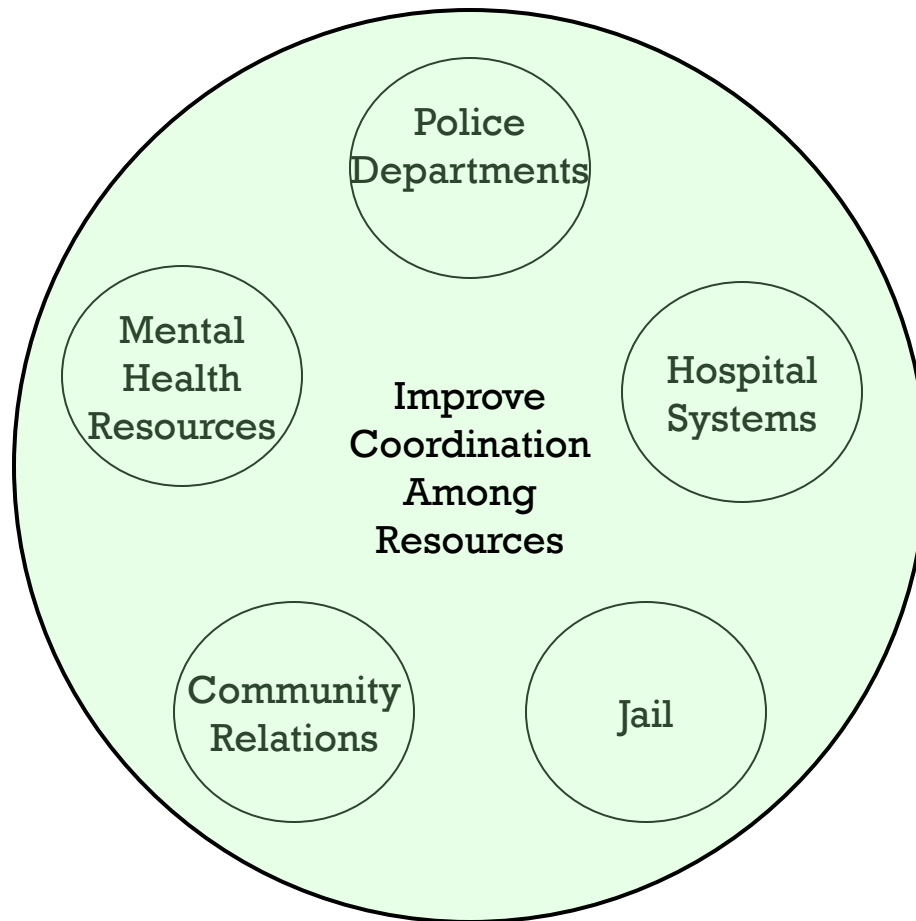


UVA Emergency Department: Percent of Time that Rooms 46/47 were used for ECOs



Objectives

Efficient, Effective, Integrated
Crisis Intervention System





16 Monthly CIT Review Team Meetings

- Where representatives from local law enforcement agencies (Police, Jail, 911, Probation) meet with community agencies (Hospitals, Mental Health Agencies, Wounded Warrior Program) to proactively review critical mental health cases and develop support and accountability plans to reduce incarceration





LAW ENFORCEMENT, MENTAL HEALTH, AND MEDICAL

■ Law Enforcement

- Officers
 - Magistrates
 - Probation
- Dispatchers(911)
 - Jail staff

■ Mental Health Agencies

- Emergency Services Warrior
 - Mental Health Advocates
 - Peer Consumer Specialist
- VA Wounded

■ Hospitals

- Doctors, Nurses, Psych Dept.



YOUR CRISIS TEAM CONTACTS



■ ALBEMARLE POLICE DEPARTMENT

- **Det. Mike Wells**
- **Cpl. Greg Davis**

■ CHARLOTTESVILLE POLICE DEPARTMENT

- **Sgt. Eric Pendleton**
- **Officer Kathryn Saunders**

■ UNIVERSITY OF VIRGINIA POLICE DEPARTMENT

- **Sgt. Casey Acord**
- **Officer Debra Davenport**



Data Entry Templates

Police /Jail

Hospitals

Region Ten
Emergency
Services

On Our Own

911- ECC

Data Processing

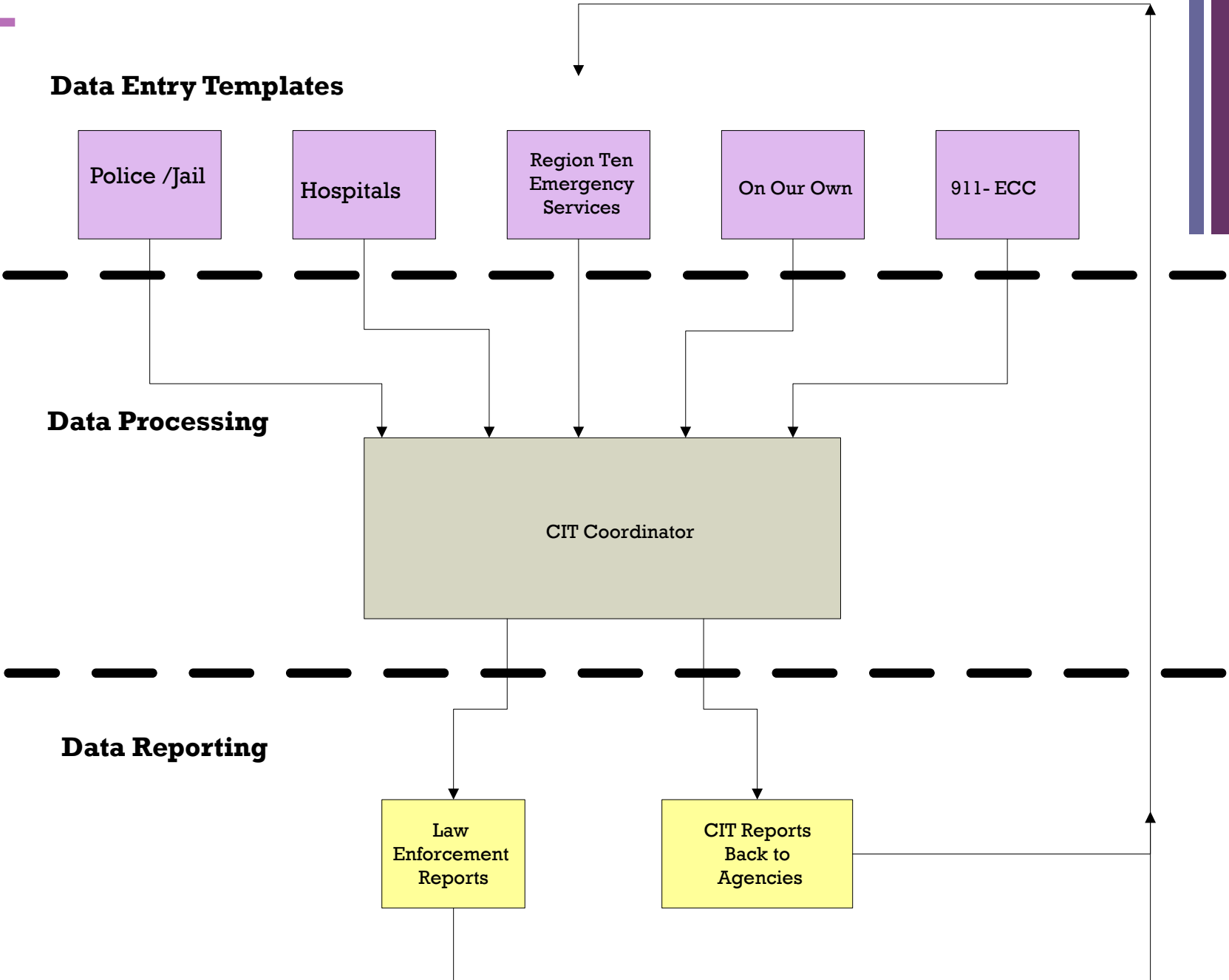
CIT Coordinator

Data Reporting

Law
Enforcement
Reports

CIT Reports
Back to
Agencies

48





Meeting Notes

- **Robert D.:** (presented by Det. Wells) – Temporary Detaining Order (TDO) issued on Feb. 12, but now in jail at ACRJ. Concerned about his mental health. Known to carry knives and box cutters. Jail reports that the psych Dr. Coen is now seeing him. He has no known residence, homeless.
- **ACTION:** Any updates about his pending release....Jail will report to Officer Robert Worfell.
- **Patricia B.** (presented by Det. Wells) – Worried about her mental health. She constantly calls 911 to report that people are watching her outside her home even though no is there.
- **ACTION:** Det. Wells will call Officer Mikesh to call Molly Yates (Emergency Services Clinician) to schedule time to visit her together for a **Support/Accountability Intervention.**



#17 Support/Accountability Intervention



- Sending a Mental Health Professional and a CIT Officer to meet a person in crisis due to a mental illness.
- **SUPPORT** - Offering Mental Health and Community Services
- **ACCOUNTABILITY** – If destructive and disruptive behaviors continues the following actions will happen by a certain process



#18 Cell Phone / E-mail LIST of Crisis Review Team Members



- The focus is NOT the monthly meeting.
- The focus is developing trust, relationship, and contacts between your mental health, law enforcement and medical personnel.
- **QUESTION:** Do you have the cell # of all your team/taskforce in your cell phone???

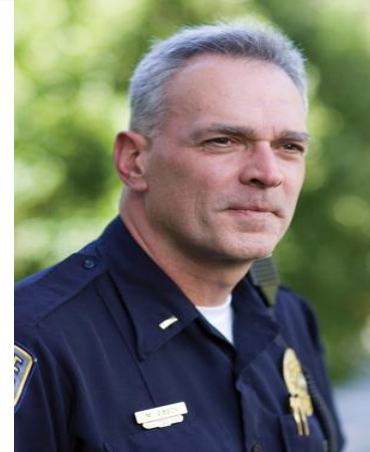
19 DIRECT QUOTES ABOUT CIT



- **CIT is still the most sought after training provided locally ”**

—Chief Mike Gibson,

University of Virginia Police Department



- **The CIT training was one of the very best training sessions that has been given to me in my 28 years as a police officer”**

—Chief Tim Longo, Charlottesville Police Department



Timothy J. Longo Sr.

+ DIRECT QUOTES ABOUT CIT

- **“In the law enforcement community the Jail is the biggest benefactor of the CIT Program”**

—Col. Ronald Matthews Charlottesville-Albemarle Regional Jail

- **“There is no doubt in my mind that CIT training results in less instances of deadly use of force. I highly recommend that police administrators make this training mandatory for all of their officers”**

—Col. Steve Sellers, Albemarle County Police Department



+ DIRECT QUOTES ABOUT CIT

- **“Mutual respect, collaboration, and planning between law enforcement and Region Ten has never been better. CIT works!”**

—Buzz Barnet, LCSW, Emergency Services Director Region Ten CSB

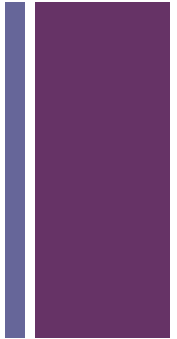
- **“NAMI applauds CIT and all their efforts to help those in crisis!”**

— Sally Rinehart, President, NAMI-Blue Ridge Family Alliance





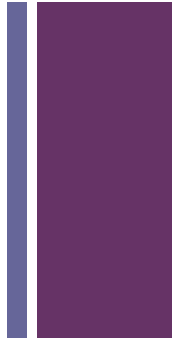
20 – Share the CIT success stories within your community



- **TO:** Albemarle Police Col. Sellers, Maj. Lantz, Maj. Parent, Cpl. Davis, Det. Wells
- **RE:** **CIT : Albemarle Officer Schneider**
- **From:** Lawrence Barnett, Emergency Services Director
Sent: Monday, October 07, 2013 8:56 AM
- Patrol Officer Michael Schneider was involved in an OI-ECO (Officer Initiated Emergency Custody Order) yesterday with a young man, stayed with him throughout the 6 hour ECO. Officer Schneider was fabulous! He was very patient with this young man, respectful, and focused. He especially did a great job as the ECO was about to expire in getting this young man to cooperate with hospital officials. My thanks to Officer Schneider for the great work he does!
-

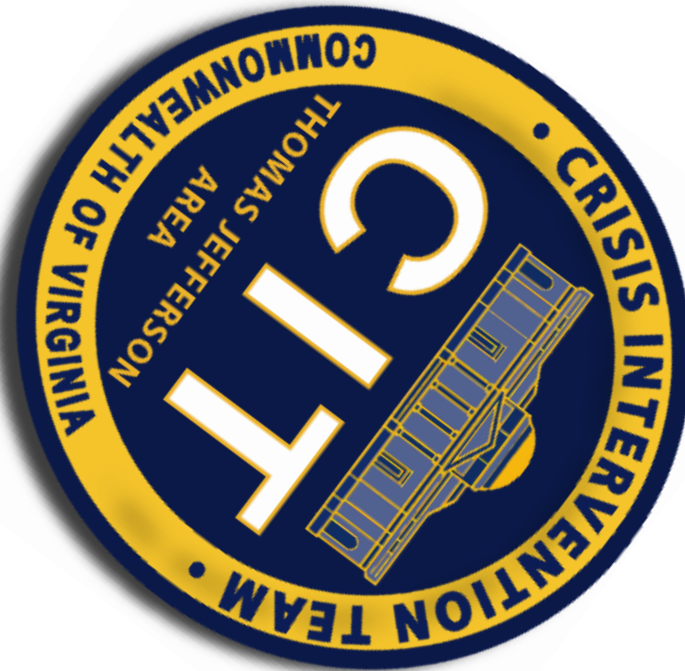
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21 YOUR CIT PIN



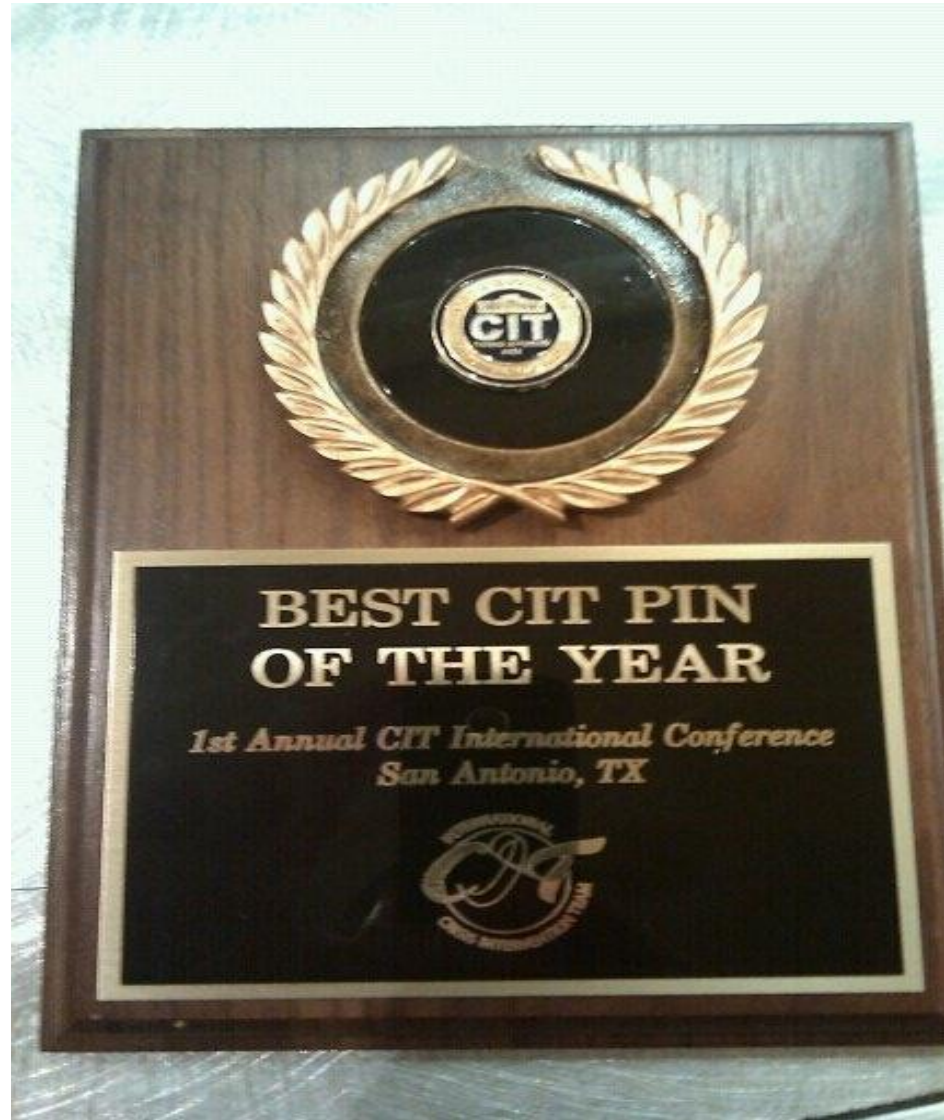
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#22 TWO PRONGS – NOT ONE!!!



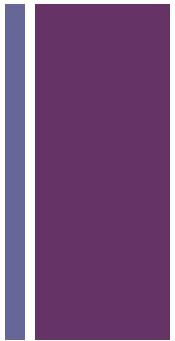
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Just showing off!!!





23 - How to read a drug bottle



McCreery Pharmacy

A

Phone: 123-4567 Fax: 234-5678

JOHN BROWN Dr. Mary Jones 345-6789

B

Rx No: 0123-3456 Date: 1/1/2006

C

AMIODARONE 200 mg

D

Take 1 tablet every morning

Refills: 2 Use before: 1/1/2008



DO NOT eat grapefruit or drink grapefruit juice at any time while taking this medication.

E



You should avoid prolonged or excessive exposure to direct and/or artificial **sunlight** while taking this medication.



#24 DRUG CARD



- See DOCUMENT.....

- ***NOTE: Tom.....don't forget to hand out the Drug Cards.....they promise to give you a great evaluation....they promise!!!***

Thomas Jefferson Crisis Intervention Team (CIT)

PSYCHIATRIC MEDICATION REFERENCE LIST

ANTIPSYCHOTIC

Schizophrenia, Bipolar,
Complex Depression

<u>BRAND</u>	<u>GENERIC</u>
Abilify	aripiprazole
Clozaril	clozapine
Geodon	ziprasidone
Haldol	haloperidol
Risperdal	risperidone
Seroquel	quetiapine
Thorazine	chlorpromazine
Zyprexa	olanzapine

MOOD STABILIZERS

Bipolar Disorder

<u>BRAND</u>	<u>GENERIC</u>
Lithium	lithium
Depakene	valproic acid
Depakote	divalproex
Lamictal	lamotrigine
Tegretol	carbamazepine
Topomax	topiramate
Trileptal	oxcarbazapine

PSYCHIATRIC MEDICATION REFERENCE LIST

ANTIDEPRESSANTS

Depression & Anxiety

<u>BRAND</u>	<u>GENERIC</u>
Celexa	citalopram
Cymbalta	duloxetine
Elavil	amitriptyline
Effexor	venlafaxine
Lexapro	escitalopram
Paxil	paroxetine
Prozac	fluoxetine
Remeron	mirtazapine
Wellbutrin	bupropion
Zoloft	sertraline

ANTI-ANXIETY

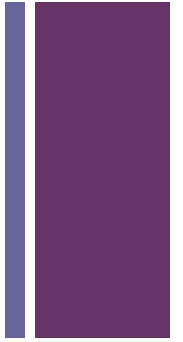
short acting

<u>BRAND</u>	<u>GENERIC</u>
Ativan	lorazepam
Klonopin	clonazepam
Valium	diazepam
Xanax	alprazolam

ADHD MEDICATION

Adderall	amphetamine
Concerta	methylphenidate
Ritalin	methylphenidate
Strattera	atomoxetine

+ #25 Community Connection Card



■ See Document

REMINDER: Tom.....don't forget to hand out the Community Connection Card, they really did promise to give you a great evaluation.....



First Response Community Connection Card

Crisis / Mental Health Helplines (24 Hours)

Emergency (police, rescue, fire)	911
Region Ten Emergency Services	972-1800
Madison House Help-Line	295-8255
Runaway Emergency Services Program	972-SAFE
Suicide Hotline	800-784-2433/800-273-8255
Poison Control Center	1-800-222-1222
Sexual Assault Resource Agency (SARA)	977-7273
Shelter for Help in Emergency (Collect Calls Accepted)	293-8509
Alzheimer's Safe Return	1-800-272-3900
Social Services Albemarle	972-4010
Charlottesville	970-3400

Counseling / Parenting / Mental Health

Children Youth & Family Services (CYFS)	296-4118
Region Ten Community Services Board	972-1800
On Our Own (mental health peer support)	979-2440

Substance Abuse Services

AL-Anon	1-(800) 344-2666	972-7011
Alateen	1-(800) 344-2666	972-7011
Alcoholics Anonymous		293-6565
Narcotics Anonymous		979-8298
Mohr Center		979-8871

Law Enforcement

Albemarle Police	296-5807
Charlottesville Police	970-3282
UVA Police	924-7166
Anonymous Tips	
Crime Stoppers	977-4000
Drug Information	970-3376



#26- Community Connection – RESOURCE GUIDE



- **Mental Health Association**
- 911 East Jefferson Street
- Charlottesville, VA 22902
- **Phone: (434) 977-4673**
- **Website: <http://mha.avenue.org/>**
- **Hours: 9am-4:30pm M-F**
- **Services Area: Albemarle, Charlottesville, Fluvanna, Greene, Louisa, Nelson**
- **Description of Services:**
- **Provides direct services for the mentally disabled and their families and/or care givers; promotes mental health; prevents mental illness; assures the proper treatment of mentally ill children, adolescents, and adults. Provides information on community risks and needs for mental health.**
- **SEE DOCUMENT**



#27 - EXERCISE - Giving Directions



- After leaving the south-east parking lot turn right onto McCormick Blvd. Parkway.
- Drive 8 blocks and merge right onto Rt. 250 Bypass, located just past the Best Buy store and KFC store located on the right side of the road.
- Drive about 2 and half miles and turn right onto McIntire Road by the skate park and rescue squad building.
- At the 2nd street light merge right and drive up Harris Street, a steep and windy road.
- The building located half mile up the road on the left side at 750 Harris Street.



28 A – Z Exercise



- What emotions / behaviors do you see when encountering someone experiencing a mental health crisis.



29 – Role Play Evaluations



■ See document

+

30 - Calling for Help for Someone in a Mental Health Crisis





■ See document.....

+ #31 – Crisis Plan Card

I have a **Mental Health Crisis Plan**
I have an _____ *Advance Directive*
I have a _____ *WRAP Plan*

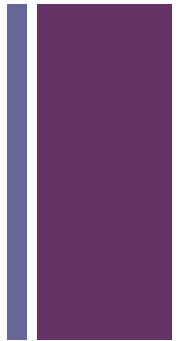
Virginia State Code 37.2.815 requires that a Psychiatric Crisis Plan be reviewed if available when assisting an individual in a psychiatric crisis. This card will help law enforcement, first responders, and emergency personnel assist you in times of crisis. Keep this on you and accessible.

 **VOCAL** See back of card for information. 

Crisis Contact Person: _____
Relationship to me: _____
Contact Phone Number: (_____) _____ - _____
Location of Written Crisis Plan: _____
Allergies or other conditions: _____



CRISIS PLAN CARD - Advance



My Action Plan

Allergies: Bee Stings, Latex, Sulfa
Medical: Schizoaffective, Hypertension
Medications:
Zyprexa 50mg BID
Seroquel 100mg QPM
Klonopin .05mg BIDPRN
Lisinopril 15m g TID
Abilify 25mg BID
Lexapro 20mg BID
See med list for more info.



Issued: 4.30.13

Special Instructions: I prefer RMH
XRDS, UVA in that order
Triggers: Anxiety, Loud sounds/ places
Coping Skills: Running/ Jogging, Deep
Breathing, talking to family/ case manager



My Action Plan



- Developed by:
- Blue Ridge CIT, NAMI, and Valley Community Services Board
- (540) 885 – 0866
- www.BlueRidgeCIT.com
- *Please remind Tom to give out the brochures....*

+ # 32 - Honor your best CIT members



+ Back Side of Challenge Coin





33 – VIDEO - Supporting Combat Veterans



Psychological Effects on War Veterans, A Soldier's Heart

- **Summary:** As the War in Iraq continues, the first measures of its psychological toll are coming in. A medical study estimates that more than one in seven returning veterans are expected to suffer from major depression, anxiety, or Post Traumatic Stress Disorder. For those who have survived the fighting, the battle is not over. For some, the return home can be as painful as war itself. PBS FRONTLINE (60 minute video) tells the stories of soldiers who have come home haunted by their experiences and asks whether the government is doing enough to help. This workshop will demonstrate the horrific stigma of mental illness in our society. Materials and information will be provided to duplicate this class for your use for CIT Trainings.



34 - CRISIS ASSESSMENT TEAM within your law enforcement departments.



■ See document

- The mission of the Crisis Assessment Team is to *intervene* before a crisis becomes acute, to *offer* mental health services to those without current providers, *reduce* the frequent calls for service to 911 or the Police Department, and in the event help is declined, to *leverage* possible criminal charges or other external supports to facilitate recovery for each person served.



35 – Risk Assessment Check



- See Document
- **“Risk Assessment” is a request by Region Ten or a concerned community member for Law Enforcement to stop by a specific address and conduct a brief face to face voluntary interview with an individual who has come to the attention of the mental health community and has recently presented in a such a way as to draw heightened concern, not reaching the ECO level, through behavior or verbal statements indicating possible inability to care for self or risk of immediate harm to self.**



36 - Use Index Cards



Use index cards to answer questions/comments at the end of each critical and/or senseative topic presentation.

- **IMPORTANT:** Tell participants NOT to write their name on card
- Example: Who believes that suicide is wrong??
- Example: Who believes that suicide is a sin??
- Example: ????

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#37 - MARKETING / PROMOTING CIT



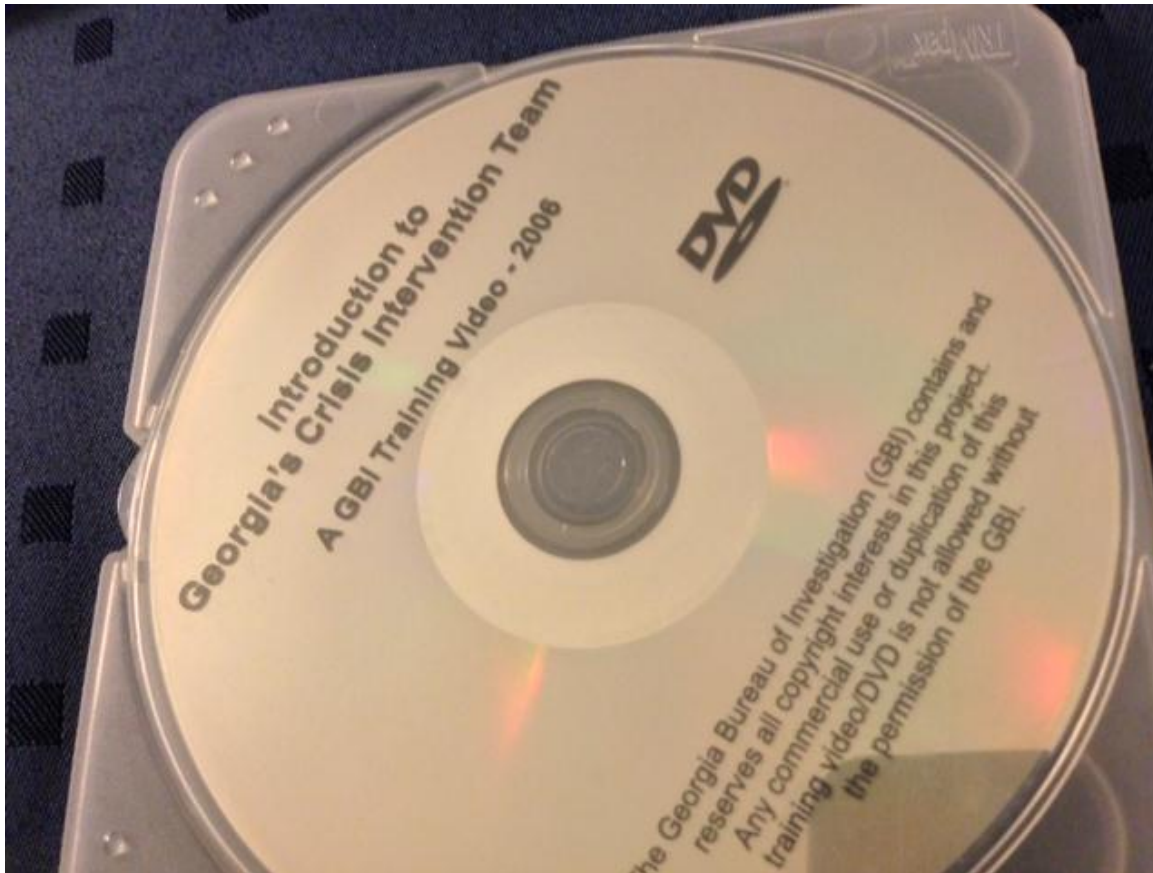
■ T-SHIRTS

VS.

■ POLO SHIRTS

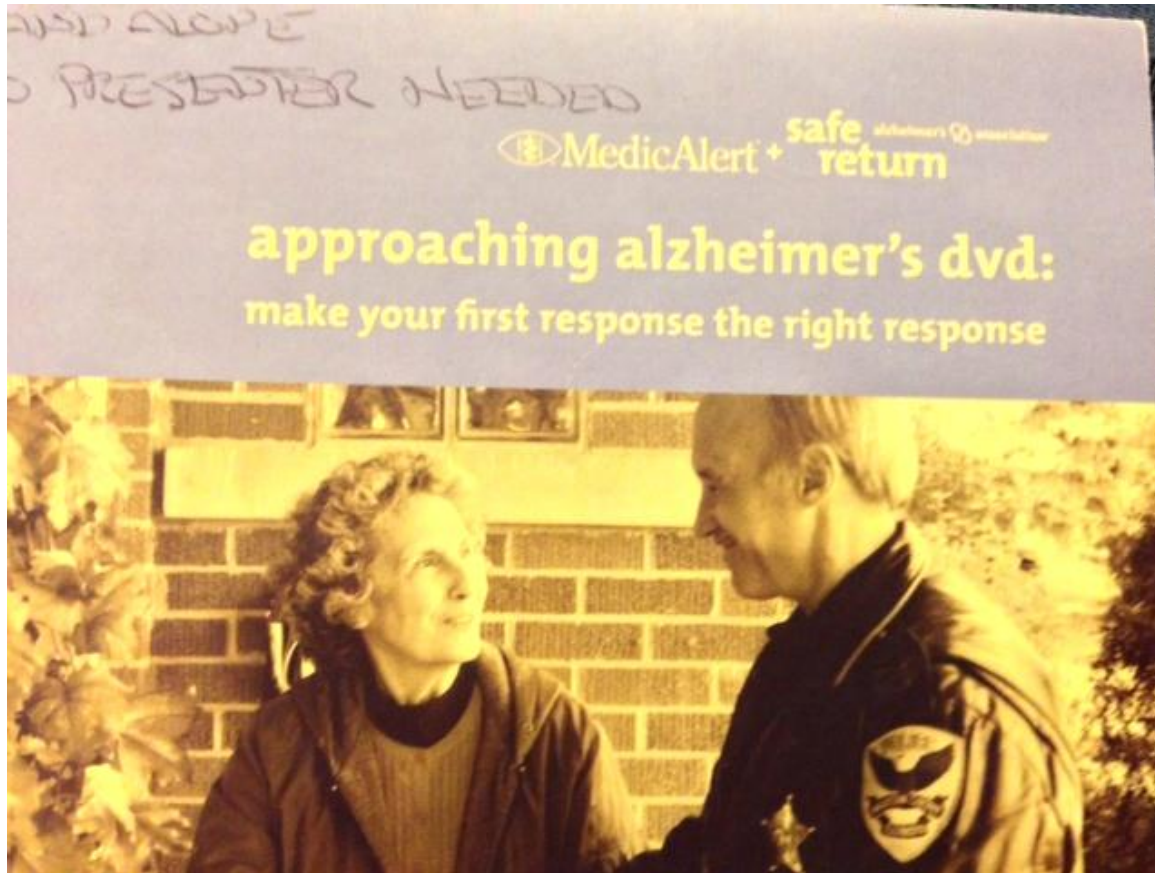
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#38– VIDEO – Introduction to Georgia CIT Training Video



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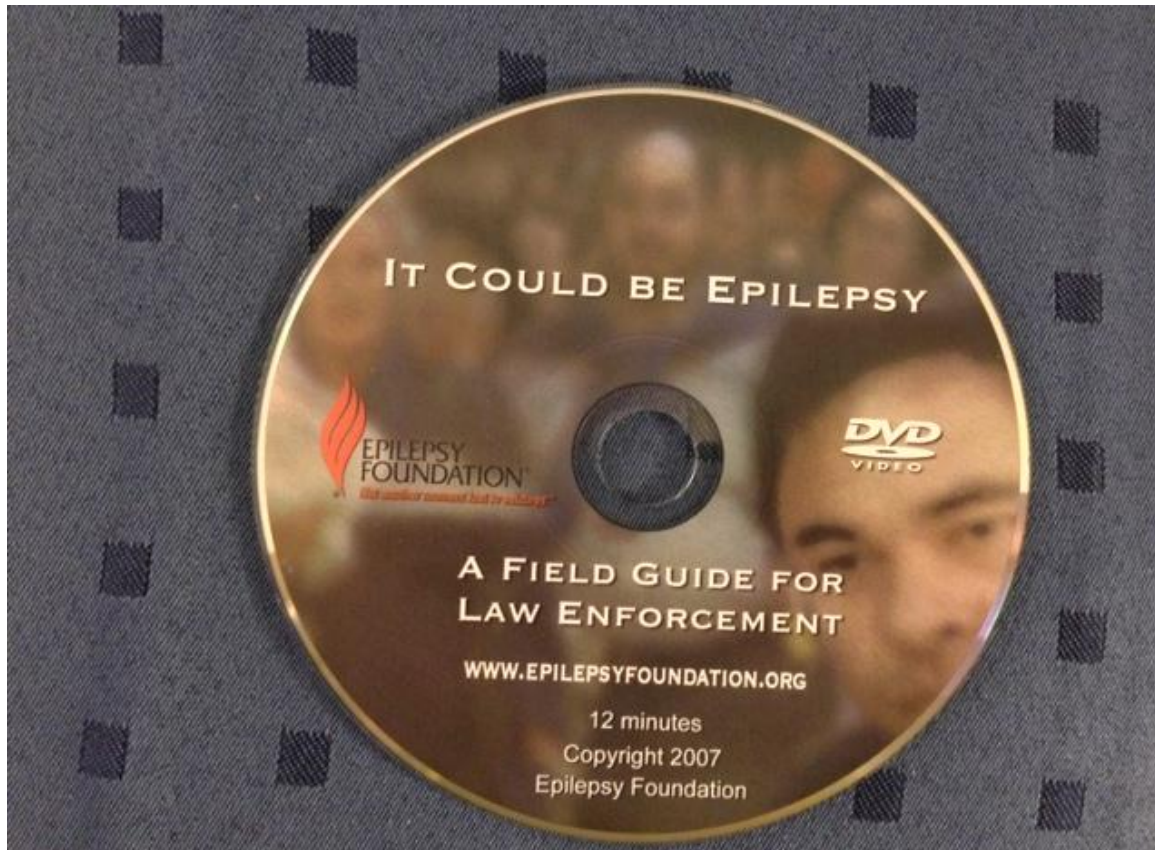
#39 - VIDEO = Alzhiemers www.alz.org



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40 – IT COULD BE EPILEPSY

www.epilepsyfoundation.org



+ # 41 – SLIDE SHOW =

50 Famous People with
Mental Illness

- <http://www.wcvb.com/health/-/9848730/14414700/-/ctp5n4/-/index.html>



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42 – CULTURAL DIVERSITY

Tale of Two Brains –

Male vs. Female

- http://www.youtube.com/watch?v=xxtUH_bHBxs





43 - The POWER of LISTENING



- *“The most basic and powerful way to connect to another person is to listen. Just listen. Perhaps the most important thing we ever give each other is our attention....A loving silence often has for more power to heal and to connect than the most well-intentioned words.”*

- *Rachel Naomi Remen, Clinical Professor of Family and Community Medicine, University of California. San Francisco School of Medicine.*

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44 Crisis – Tell you story

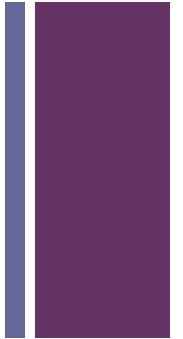


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#45 - video – JUST Listen!

Stop trying to fix it

(It's not about the nail)



■ <http://www.youtube.com/watch?v=-4EDhdAHrOg>

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46 – VIRGINIA CIT COALITION



■ ALL Presentation documents

■ www.vacitcoalition.org

+ #47 - #50 = Your Best Ideas

