CIT Crisis Intervention Team	**Role Play Evaluation**

Evaluator: _____ **Team Number:** _____

Officer: _____	**Pass:** ☐ **Fail:** ☐ **Defer:** ☐
Officer: _____	**Pass:** ☐ **Fail:** ☐ **Defer:** ☐
Officer: _____	**Pass:** ☐ **Fail:** ☐ **Defer:** ☐

Y/N/NA   Time

_____ _____ Introduce Self/Explain CIT
_____ _____ Advocate/Explain Disease

_____ _____ Build Rapport
_____ _____ Demonstrate Empathy
_____ _____ Utilize Personal Experiences
_____ _____ Respect Barrier(s)
_____ _____ Allow Manic Movement
_____ _____ Create Influence
_____ _____ Recover from Misstep(s)

_____ _____ Utilize Active Listening
_____ _____ Paraphrae/Summarize
_____ _____ Utilize Silence
_____ _____ Minimal Encouragers
_____ _____ Reflection of feeling

Y/N/NA   Time

_____ _____ Make Scene Safe
_____ _____ Perform Pat Down

_____ _____ Orientation
_____ _____ Food, Sleep, Living Situation
_____ _____ Psychiatric/Medical History
_____ _____ Address Psychiatric Symptoms
_____ _____ Ask Suicide Question
_____ _____ Explore Suicide Ideation/Plan

_____ _____ Offer Choice
_____ _____ Explain Next Steps
_____ _____ Make Personal Referral/Contact
_____ _____ Identify Care Givers/Supports
_____ _____ Disposition/Resolution

Scenario Highlights:

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Scenario Corrective Notes:

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