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**NEW YORK CITY ANNOUNCES NEW MENTAL HEALTH TEAMS TO RESPOND  
TO MENTAL HEALTH CRISES**

*For the first time in the city's history, mental health and medical experts will be the default response to 911 mental health calls in two high-need communities*

**NEW YORK**—For the first time in the city's history, Mayor de Blasio today announced that new Mental Health Teams of Emergency Medical Services (EMS) health professionals and mental health crisis workers will be dispatched through 911 to respond to mental health emergencies in two high-need communities.

“One in five New Yorkers struggle with a mental health condition. Now, more than ever, we must do everything we can to reach those people before crisis strikes,” said **Mayor Bill de Blasio**. “For the first time in our city's history, health responders will be the default responders for a person in crisis, making sure those struggling with mental illness receive the help they need.”

"The most innovative breakthroughs in mental health services are often the result of multi-agency partnership, and today marks a new chapter in how the City responds to New Yorkers who are experiencing mental health crises, said **First Lady Chirlane McCray**. “This is the first time in our history that health professionals will be the default responders to mental health emergencies, an approach that is more compassionate and effective for better long term outcomes.

The overall number of mental health 911 calls fell by over 8,000 in 2019, the first decline following a decade in which 911 mental health calls increased every year and in every precinct in the city. This decline, which has continued into 2020, follows a concerted effort to strengthen how the City prevents and responds to mental health crises, including the introduction of new mobile intervention and treatment teams over the last several years.

Currently, NYPD officers and FDNY Emergency Medical Services Emergency Medical Technicians (EMTs) respond to nearly all mental health 911 calls, regardless of the severity of health needs, whether a crime is involved, or whether there is an imminent risk of violence. In the health-centered pilot announced today, new Mental Health Teams of health professionals and crisis workers from FDNY Emergency Medical Services will be the default response to mental health emergencies in two high-need precincts.

Beginning in February 2021, new Mental Health Teams will use their physical and mental health expertise, and experience in crisis response to de-escalate emergency situations, will help reduce the number of times police will need to respond to 911 mental health calls in these

precincts. These teams will have the expertise to respond to a range of behavioral health problems, such as suicide attempts, substance misuse, and serious mental illness, as well as physical health problems, which can be exacerbated by or mask mental health problems. NYC Health + Hospitals will train and provide ongoing technical assistance and support. In selecting team members for this program, FDNY will prioritize professionals with significant experience with mental health crises.

In emergency situations involving a weapon or imminent risk of harm, the new Mental Health Teams will respond along with NYPD officers. Over 65% of all operational staff in NYPD patrol precincts across the City have now been trained in Crisis Intervention Team training, a state-of-the-art approach that continues to improve the way officers recognize and respond to behavioral health problems experienced by people they encounter. In all precincts other than the two precincts selected for this pilot, NYPD officers and FDNY Emergency Medical Services EMTs will continue to provide coordinated responses to mental health emergencies.

The pilot announced today is modeled on successful, alternative to police response programs in other cities. The CAHOOTS (Crisis Assistance Helping Out On The Streets) program in Eugene, Oregon is embedded into the 911 system and includes teams of paramedics and crisis workers who have significant experience in the mental health field. Designed as an alternative to police response for non-violent situations, CAHOOTS teams responded to approximately 24,000 calls last year and addressed a wide range of mental health-related crises. In approximately 150 cases, CAHOOTS teams requested police backup. Similar approaches are also being pursued in cities such as Albuquerque, Denver, Los Angeles and San Francisco, among others.

The new health-centered approach builds on significant work undertaken over the last few years to strengthen mental health crisis prevention and response. In partnership with the [NYC Crisis Prevention and Response Task Force](#), the City is reducing the number of mental health crises that result in 911 calls by expanding the number of mental health teams who can intervene before crises occur and stabilize people in the weeks following a crisis. And to ensure those with the most serious needs stay connected to treatment, the City has also expanded intensive, mobile treatment for New Yorkers with serious mental illness. Key accomplishments include:

### **Improve Response Times for Mobile Crisis Teams**

By January, Mobile Crisis Teams will be able to respond to urgent mental health situations within two hours citywide during the day and evening. Mobile Crisis Teams, often dispatched by NYC Well and operated by hospitals and community-based organizations, respond to urgent mental health needs approximately 21,000 times per year, often serving children and adults in their homes. Mobile Crisis Teams can include nurses, social workers, psychologists and psychiatrists, community liaisons and peers. Services can include assessment, crisis counseling and connection to ongoing services. Through the Crisis Prevention and Response Task Force, the City improved response times of our mobile crisis teams.

### **Continued Access to Care**

Four new intensive mobile treatment teams will continue to provide ongoing, clinical care to New Yorkers with serious mental illness who have been poorly served by more traditional treatment models. Many clients are experiencing homelessness or have recently been involved in the justice system. These teams are effective at helping clients stay connected to care, increasing stability in clients' lives, and reducing homelessness.

The results of the pilot period will inform how the City responds to mental health emergencies in other neighborhoods. This pilot represents a concerted effort by FDNY, H+H, DOHMH, the NYPD, and the Mayor's Office of ThriveNYC to move towards a more health-centered approach. The Mayor's Office of ThriveNYC will provide programmatic oversight for this pilot.

“Emergencies are not all the same and the skills needed to respond vary as well,” said **Health Commissioner Dr. Dave A. Chokshi**. “Expanding the role of mental health in emergency services means that people with urgent behavioral health needs can quickly get appropriate and effective help from trained health professionals.”

“NYC Health + Hospitals is excited to partner with other City agencies as we continue to meet the needs of New Yorkers experiencing mental health crisis more expediently,” said **NYC Health + Hospitals Deputy Chief Medical Officer and Director of the Office of Behavioral Health Charles Barron, MD**. “Mental health challenges can be extremely sensitive to address and proper training of all professionals is necessary to ensure trust and expert engagement are met into further support services. COVID-19 has proven to be difficult for everyone, with isolation and the anxieties that come with the uncertainty of the pandemic posing new challenges for everyone. No New Yorker should feel alone to navigate feelings of depression, anxieties, thoughts of suicide and more.”

"Bringing mental health support to New Yorkers where and when they need it is at the heart of all of ThriveNYC's work. We are working toward a city where fewer mental health needs become crises, and when mental health needs do become crises, we reach people quickly with the care they need", said **Susan Herman, Director of the Mayor's Office of ThriveNYC**. "The pilot announced today is a vital step forward, grounded in New York City's commitment to treat mental health crises as public health issues, not public safety problems."

“Responding to help New Yorkers in need of emergency medical care is the core mission of the FDNY. No one does it better than our dedicated and professional EMTs and Paramedics,” said **Fire Commissioner Daniel A. Nigro**. “Working together with our partners at the Department of Health, Health and Hospitals, NYPD, and ThriveNYC, we will further improve that outstanding level of care through this pilot program that will create new EMS Mental Health teams to place a greater focus on the mental health crises of our patients. Our goal is simple: to be there for every New Yorker during their most difficult moments and provide critical mental health care.”

“The NYPD looks forward to participating in this important pilot program. The participation of mental health professionals is a long awaited improvement in the city’s initial response to people in crisis,” said **Police Commissioner Dermot Shea**. “Our officers applaud the intervention by health professionals in these non violent cases and as always stand ready to assist.”

“The overwhelming effect of stress, anxiety, depression, and mental illness can cause harrowing situations for people. I thank the City’s initiative in creating a Mental Health Teams of Emergency Medical Services (EMS) specifically designed to deal with these crises with a more health-centered and care approach,” said **New York State Senator Luis Sepúlveda, Chairman of the Crime Victims, Crime and Correction Committee**. “Too often, 911 has been dispatched to incidents outside their area of expertise; having a designated team handle mental health distress calls will adequately respond and de-escalate situations safely. This new crisis response

can meaningfully impact our communities, especially in our highest-needs areas where they lack the vital mental health resources needed to provide direct support. With the ongoing pandemic, we must continue to offer care alternatives when addressing mental health needs to help our communities thrive, heal, and prevent poor health outcomes. The City's response task force is a significant step in maximizing a more positive health practice. ”

“Every day, SUS sees the results of thoughtful clinical intervention with vulnerable New Yorkers. The City's new Mental Health Teams are a solid step forward in ensuring the safety of people in crisis and the expansion of person-centered programs,” said **Trish Marsik, Chief Operating Officer, Services for the Underserved (SUS)**.

“Supporting people who are experiencing a behavioral health crisis means quickly connecting them to effective, compassionate care. The launch of the Mental Health Team is a significant step toward ensuring that New Yorkers who call 911 for themselves, a loved one, or a neighbor, will ultimately get the treatment they need and be placed on a path of long-term support and well-being. It's exciting to see New York City boldly address a challenge faced by so many communities across the country,” said **Dr. Ayesha Delany-Brumsey, Behavioral Health Director, The Council of State Governments Justice Center**.

“Mental illness is not a crime, but we call upon the police as first responders in a mental health crisis. Now, New York City is changing the outdated and dangerous use of police that too often has led to injury and even death. The decision to have health professionals respond to mental health crises underscores New York City's commitment to caring for not punishing people with mental illnesses,” said **Linda Rosenberg MSW, Columbia University Department of Psychiatry; Former CEO, National Council for Behavioral Health**.

“Most 911 calls for a behavioral health emergency do not result in an arrest or criminal charges. Rather, individuals involved need a mental health or substance use response, by health and mental health clinicians, so that they receive appropriate help. Crisis response, particularly through the new EMS teams announced today, is an effective manner of handling these emergencies, with the ultimate goal of connecting individuals to care.” We are in strong support of the City's new approach to behavioral health emergencies,” said **Amy Dorin, President & CEO, The Coalition for Behavioral Health**.

“CASES applauds the Administration's important initiative to help people with mental illness get the help they need,” said **Joel Copperman, CASES CEO and President**. “The new program will mean that in most cases social workers and health professionals will deliver crisis services to individuals with mental health conditions rather than the police. We know that mental-health teams, with the knowledge and skills to respond and refer individuals to the appropriate resources, can help achieve more peaceful and therapeutic outcomes. CASES has a long history of working with individuals with mental illness in our communities and we welcome this latest initiative with pleasure.”

“For decades we have relied on a broken system to respond to our friends, family members, and loved ones experiencing crisis. As the killings of Miguel Richards, Daniel Prude, Walter Wallace Jr., and so many others demonstrate, these crises can become deadly when we rely on police as the only resource to intervene. Mobile Mental Health Teams pose an opportunity for New Yorkers to bring to their communities a compassionate response built around support,

stabilization, and prevention rather than enforcement. We should be asking ourselves why it is that law enforcement has become the default system to handle situations related to mental health, addiction, poverty, and homelessness, and what public safety should really mean for our most vulnerable neighbors,” said **Tim Black, Director of Consulting at White Bird Clinic/CAHOOTS**.

“This bold initiative will yield great improvements in care for the residents of NYC,” said **Joseph Conte, PhD, CPHQ, Executive Director, Staten Island Performing Provider System** said. “We can be sure under this program our outstanding first responders will improve safety, equity, and dignity for those in need of behavioral health response. The SI PPS is proud to have participated in the early pilot initiatives that paved the way for this innovative strategy.”

“Our current response to people in mental health emergencies has led to too many lost lives, including 67-year-old Fountain House member Deborah Danner, who was killed in her Bronx apartment in 2016 during a mental health call involving law enforcement as first responders. As advocates and many law enforcement experts agree, such emergencies are best handled by mental health professionals, ideally working with peers with lived experience,” said **Ashwin Vasan, MD, PhD, President and CEO of Fountain House**. “We are encouraged that New York City is embarking on an important new pilot deploying mental health teams consisting of emergency medical services health professionals and social workers for mental health emergencies. This initiative is an important step in the right direction as we strive for our goal of an approach that goes even further - one that is peer-inclusive and separate from 911. At a time when the coronavirus pandemic has led to a secondary mental-health pandemic and surge in homelessness, health-first responses will be more critical than ever.”

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