## STATE OF NEW YORK

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2021-2022 Regular Sessions

## IN ASSEMBLY

April 26, 2021

Introduced by M. of A. GUNTHER, FRONTUS, FERNANDEZ -- read once and referred to the Committee on Mental Health -- committee discharged, bill amended, ordered reprinted as amended and recommitted to said committee -- reported and referred to the Committee on Ways and Means -- committee discharged, bill amended, ordered reprinted as amended and recommitted to said committee

AN ACT to amend the county law, in relation to a 9-8-8 suicide prevention and mental health crisis hotline system

The People of the State of New York, represented in Senate and Assembly, do enact as follows:

Section 1. Short title. This act shall be known and may be cited as the "9-8-8 Suicide Prevention and Mental Health Crisis Act".

 $\S$  2. The county law is amended by adding a new article 6-B to read as follows:

## ARTICLE 6-B

9-8-8 SUICIDE PREVENTION AND MENTAL HEALTH CRISIS ACT Section 340. Definitions.

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- 341. 9-8-8 suicide prevention and mental health crisis hotline system.
- 10 § 340. Definitions. As used in this article, unless the context 11 requires otherwise:
- 12 1. "9-8-8" shall mean the three digit phone number designated by the
  13 federal communications commission for the purpose of connecting individ14 uals experiencing a mental health crisis with suicide prevention and
  15 mental health crisis counselors, mobile crisis teams, and crisis receiv16 ing and stabilization services and other mental health crises services
  17 through the national suicide prevention lifeline.
- 2. "9-8-8 crisis hotline center" shall mean a state-identified and funded center participating in the National Suicide Prevention Lifeline Network to respond to statewide or regional 9-8-8 calls.

EXPLANATION--Matter in <u>italics</u> (underscored) is new; matter in brackets
[-] is old law to be omitted.

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3. "Crisis receiving and stabilization services" shall mean facilities providing short-term observation and crisis stabilization services under article thirty-six of the mental hygiene law, or other crisis services approved or licensed by the office of mental health.

- 5 <u>4. "Mental health professional" shall mean any of the following, but</u> 6 <u>shall not be limited to:</u>
  - (a) a licensed clinical social worker, licensed under article one hundred fifty-four of the education law;
  - (b) a licensed psychologist, licensed under article one hundred fifty-three of the education law;
  - (c) a registered professional nurse, licensed under article one hundred thirty-nine of the education law;
- 13 (d) a licensed master social worker, licensed under article one 14 hundred fifty-four of the education law, under the supervision of a 15 physician, psychologist or licensed clinical social worker; and
  - (e) a licensed mental health counselor, licensed under article one hundred sixty-three of the education law.
  - 5. "Mobile crisis teams" shall mean a team that may include, but not be limited to, mental health professionals, certified alcoholism and substance abuse counselors, family peer advocates, and peers, to provide onsite community-based intervention for individuals who are experiencing a mental health crisis, or an "approved mobile crisis outreach team" under article nine of the mental hygiene law.
  - 6. "National suicide prevention lifeline" or "NSPL" shall mean the national network of local crisis centers that provide free and confidential emotional support to people in suicidal crisis or emotional distress twenty-four hours a day, seven days a week via a toll-free hotline number, which receives calls made through the 9-8-8 system. The toll-free number is maintained by the Assistant Secretary for Mental Health and Substance Use under the United States Substance Abuse and Mental Health Services Administration.
  - 7. "Peer" shall mean an individual who is a current or former recipient of mental health or substance use services who provides advocacy and mutual support for other services users through a model of shared personal experience, who are employed on the basis of their personal knowledge and recovery from a mental illness, addiction, or both, and who meet the certification requirements set forth by the New York state peer specialist certification board.
  - 8. "Family peer advocates" shall mean individuals with lived-experience as the biological, foster, or adoptive parent or primary caregiver of a child or youth with a social, emotional, behavioral, mental health, substance use disorder, or developmental disability, who meet the current requirements for a credentialed family peer advocate, or other certification related to culturally responsive trauma informed care.
  - 9. "Veterans crisis line" or "VCL" shall mean the veterans crisis line maintained by the secretary of veterans affairs of the United States Department of Veterans Affairs.
- 48 <u>10. "Substance Abuse and Mental Health Services Administration"</u> 49 <u>("SAMHSA") shall mean the agency within the United States Department of</u> 50 <u>Health and Human Services.</u>
- § 341. 9-8-8 suicide prevention and mental health crisis hotline system. 1. The department of public service, in consultation with the commissioners of the office of mental health and the office of addiction services and supports shall, on or before July sixteenth, two thousand twenty-two, designate a 9-8-8 crisis hotline center or centers that shall provide suicide prevention and crisis intervention services to

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individuals accessing the 9-8-8 suicide prevention and mental health crisis hotline from anywhere within the state twenty-four hours a day, seven days a week. A designated 9-8-8 crisis hotline center shall meet 3 the following requirements:

- (a) Have an active agreement with the administrator of the National Suicide Prevention Lifeline for participation within the network.
- 7 (b) Adhere to NSPL policies, requirements and best practices quide-8 <u>lines for operation and clinical assessment standards.</u>
- 9 (c) Utilize technology including chat and text that is interoperable between and across crisis and emergency systems used throughout the 10 state, including but not limited to, 911, emergency medical services, 11 and other nonbehavioral health crisis services, and with the administra-12 13 tor of the National Suicide Prevention Lifeline.
  - (d) Coordinate with 9-8-8 crisis hotline centers and 911 operators for the appropriate deployment of a mobile crisis team and/or law enforcement, and when appropriate emergency medical services or fire services.
  - (e)(i) The department of public service in conjunction with the commissioners of the office of mental health and the office of addiction services and supports shall have joint oversight of suicide prevention and crisis service activities and essential coordination with a designated 9-8-8 hotline center, and shall work in concert with NSPL and VCL networks for the purposes of ensuring consistency of public messaging about 9-8-8 services.
  - (ii) The office of mental health shall in consultation with the local mental hygiene directors established under section 41.55 of the mental hygiene law, crisis receiving and stabilization service providers, statewide mental health and substance use organizations, and other stakeholders deemed appropriate by the office, shall establish training guidelines for 9-8-8 crisis hotline center staff, 911 operators, and first responders, to assess callers for suicidal risk, provide crisis counseling and crisis intervention, offer referrals to mental health and/or substance use services, and on providing linguistically and culturally competent care.
  - (f) Meet the requirements set forth by the NSPL for serving high risk and specialized populations including but not limited to: Black, Hispanic, Latino, Asian, Pacific Islander, Native American, Alaskan Native; lesbian, gay, bisexual, transgender, nonbinary, queer, and questioning individuals; individuals with an intellectual or developmental disability; individuals experiencing homelessness or housing instability; members of rural communities; veterans; immigrants and refugees; children and youth; older adults; and religious communities as identified by the federal Substance Abuse and Mental Health Services Administration, including training requirements and policies for transferring such callers to appropriate specialized centers or subnetworks within or outside the NSPL network and for providing linguistically and culturally competent care.
  - (q) May provide follow-up services as needed to individuals accessing the 9-8-8 suicide prevention and mental health crisis hotline consistent with guidance and policies established by the NSPL.
- 2. The commissioner of the office of mental health and the commis-50 51 sioner of the office of addiction services and supports shall establish a comprehensive list of reporting metrics to be included in an annual 52 53 report under this article on the 9-8-8 suicide prevention and mental 54 health crisis hotline's usage, services and impact which shall include, 55 at a minimum:

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- 1 (a) The volume of requests for assistance that the 9-8-8 suicide 2 prevention and mental health crisis hotline received;
- 3 (b) The average length of time taken to respond to each request for 4 assistance, and the aggregate rates of call abandonment;
- 5 (c) The types of requests for assistance that the 9-8-8 suicide 6 prevention and mental health crisis hotline received;
  - (d) The number of mobile crisis teams dispatched;
  - (e) The number of individuals engaged by mobile crisis teams including any support provided beyond the resolution of an initial crisis;
- 10 <u>(f) The number of individuals transported by mobile crisis teams to a</u>
  11 <u>crisis receiving and stabilization service center or other mental health</u>
  12 <u>crisis service;</u>
- 13 (g) The number of such individuals transferred by mobile crisis team
  14 responders to the custody of law enforcement or transported to an emer15 gency room or inpatient mental health services;
  - (h) the number of times a mobile crisis team was the first responder to a mental health crisis and had to request deployment of law enforcement, including the reason for the request, and the outcome of the law enforcement response; and
  - (i) The age, gender, race, ethnicity, national origin, and high risk category or the individual, if reasonably ascertainable, of individuals contacted, transported, or transferred by each mobile crisis team.
  - 3. The commissioners of the office of mental health and the office of addiction services and supports shall submit an annual report beginning no later than December thirty-first, two thousand twenty-three and annually thereafter, regarding the comprehensive list of reporting metrics to the governor, the temporary president of the senate, the speaker of the assembly, the minority leader of the senate and the minority leader of the assembly.
- 30 4. The commissioner of the office of mental health, in consultation 31 with the commissioners of the department of taxation and finance, the 32 office of addiction services and supports, and the department of public service, shall submit a report that details the resources necessary to 33 make the NSPL, available, operational, and effective across the state, 34 35 including an evaluation of available and new revenue sources to support the implementation, staffing, and ongoing activities of 9-8-8 services 36 that are reasonably attributed to: (a) ensuring the efficient and effec-37 tive routing of calls made to the NSPL to an appropriate 9-8-8 crisis 38 hotline center; (b) personnel and the provision of mental health, crisis 39 outreach and stabilization services directly related to the NSPL; and 40 41 (c) the establishment of a trust fund for the purpose of depositing any 42 dedicated revenues collected to create and maintain a statewide 9-8-8 43 suicide prevention and mental health crisis hotline system. The report shall be submitted on or before December thirty-first, two thousand 44 45 twenty-one to the governor, the speaker of the assembly, the temporary 46 president of the senate, and the minority leaders of the senate and the 47
  - § 3. This act shall take effect immediately.