

# STATE OF NEW YORK

6194--B

2021-2022 Regular Sessions

## IN SENATE

April 14, 2021

Introduced by Sens. BROUK, HARCKHAM, BENJAMIN, BROOKS, HELMING -- read twice and ordered printed, and when printed to be committed to the Committee on Local Government -- committee discharged and said bill committed to the Committee on Mental Health and Developmental Disabilities -- committee discharged, bill amended, ordered reprinted as amended and recommitted to said committee -- 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:

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

3 § 2. The county law is amended by adding a new article 6-B to read as  
4 follows:

### ARTICLE 6-B

#### 9-8-8 SUICIDE PREVENTION AND MENTAL HEALTH CRISIS ACT

##### Section 340. Definitions.

8 341. 9-8-8 suicide prevention and mental health crisis hotline  
9 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 individ-  
14 uals experiencing a mental health crisis with suicide prevention and  
15 mental health crisis counselors, mobile crisis teams, and crisis receiv-  
16 ing and stabilization services and other mental health crises services  
17 through the national suicide prevention lifeline.

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

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1 2. "9-8-8 crisis hotline center" shall mean a state-identified and  
2 funded center participating in the National Suicide Prevention Lifeline  
3 Network to respond to statewide or regional 9-8-8 calls.

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

8 4. "Mental health professional" shall mean any of the following, but  
9 shall not be limited to:

10 (a) a licensed clinical social worker, licensed under article one  
11 hundred fifty-four of the education law;

12 (b) a licensed psychologist, licensed under article one hundred  
13 fifty-three of the education law;

14 (c) a registered professional nurse, licensed under article one  
15 hundred thirty-nine of the education law;

16 (d) a licensed master social worker, licensed under article one  
17 hundred fifty-four of the education law, under the supervision of a  
18 physician, psychologist or licensed clinical social worker; and

19 (e) a licensed mental health counselor, licensed under article one  
20 hundred sixty-three of the education law.

21 5. "Mobile crisis teams" shall mean a team that may include, but not  
22 be limited to, mental health professionals, certified alcoholism and  
23 substance abuse counselors, family peer advocates, and peers, to provide  
24 onsite community-based intervention for individuals who are experiencing  
25 a mental health crisis, or an "approved mobile crisis outreach team"  
26 under article nine of the mental hygiene law.

27 6. "National suicide prevention lifeline" or "NSPL" shall mean the  
28 national network of local crisis centers that provide free and confiden-  
29 tial emotional support to people in suicidal crisis or emotional  
30 distress twenty-four hours a day, seven days a week via a toll-free  
31 hotline number, which receives calls made through the 9-8-8 system. The  
32 toll-free number is maintained by the Assistant Secretary for Mental  
33 Health and Substance Use under the United States Substance Abuse and  
34 Mental Health Services Administration.

35 7. "Peer" shall mean an individual who is a current or former recipi-  
36 ent of mental health or substance use services who provides advocacy and  
37 mutual support for other services users through a model of shared  
38 personal experience, who are employed on the basis of their personal  
39 knowledge and recovery from a mental illness, addiction, or both, and  
40 who meet the certification requirements set forth by the New York state  
41 peer specialist certification board.

42 8. "Family peer advocates" shall mean individuals with lived-experi-  
43 ence as the biological, foster, or adoptive parent or primary caregiver  
44 of a child or youth with a social, emotional, behavioral, mental health,  
45 substance use disorder, or developmental disability, who meet the  
46 current requirements for a credentialed family peer advocate, or other  
47 certification related to culturally responsive trauma informed care.

48 9. "Veterans crisis line" or "VCL" shall mean the veterans crisis line  
49 maintained by the secretary of veterans affairs of the United States  
50 Department of Veterans Affairs.

51 10. "Substance Abuse and Mental Health Services Administration"  
52 ("SAMHSA") shall mean the agency within the United States Department of  
53 Health and Human Services.

54 § 341. 9-8-8 suicide prevention and mental health crisis hotline  
55 system. 1. The department of public service, in consultation with the  
56 commissioners of the office of mental health and the office of addiction

1 services and supports shall, on or before July sixteenth, two thousand  
2 twenty-two, designate a 9-8-8 crisis hotline center or centers that  
3 shall provide suicide prevention and crisis intervention services to  
4 individuals accessing the 9-8-8 suicide prevention and mental health  
5 crisis hotline from anywhere within the state twenty-four hours a day,  
6 seven days a week. A designated 9-8-8 crisis hotline center shall meet  
7 the following requirements:

8 (a) Have an active agreement with the administrator of the National  
9 Suicide Prevention Lifeline for participation within the network.

10 (b) Adhere to NSPL policies, requirements and best practices guide-  
11 lines for operation and clinical assessment standards.

12 (c) Utilize technology including chat and text that is interoperable  
13 between and across crisis and emergency systems used throughout the  
14 state, including but not limited to, 911, emergency medical services,  
15 and other nonbehavioral health crisis services, and with the administra-  
16 tor of the National Suicide Prevention Lifeline.

17 (d) Coordinate with 9-8-8 crisis hotline centers and 911 operators for  
18 the appropriate deployment of a mobile crisis team and/or law enforce-  
19 ment, and when appropriate emergency medical services or fire services.

20 (e)(i) The department of public service in conjunction with the  
21 commissioners of the office of mental health and the office of addiction  
22 services and supports shall have joint oversight of suicide prevention  
23 and crisis service activities and essential coordination with a desiq-  
24 ated 9-8-8 hotline center, and shall work in concert with NSPL and VCL  
25 networks for the purposes of ensuring consistency of public messaging  
26 about 9-8-8 services.

27 (ii) The office of mental health shall in consultation with the local  
28 mental hygiene directors established under section 41.55 of the mental  
29 hygiene law, crisis receiving and stabilization service providers,  
30 statewide mental health and substance use organizations, and other  
31 stakeholders deemed appropriate by the office, shall establish training  
32 guidelines for 9-8-8 crisis hotline center staff, 911 operators, and  
33 first responders, to assess callers for suicidal risk, provide crisis  
34 counseling and crisis intervention, offer referrals to mental health  
35 and/or substance use services, and on providing linguistically and  
36 culturally competent care.

37 (f) Meet the requirements set forth by the NSPL for serving high risk  
38 and specialized populations including but not limited to: Black, Hispan-  
39 ic, Latino, Asian, Pacific Islander, Native American, Alaskan Native;  
40 lesbian, gay, bisexual, transgender, nonbinary, queer, and questioning  
41 individuals; individuals with an intellectual or developmental disabili-  
42 ty; individuals experiencing homelessness or housing instability;  
43 members of rural communities; veterans; immigrants and refugees; chil-  
44 dren and youth; older adults; and religious communities as identified by  
45 the federal Substance Abuse and Mental Health Services Administration,  
46 including training requirements and policies for transferring such call-  
47 ers to appropriate specialized centers or subnetworks within or outside  
48 the NSPL network and for providing linguistically and culturally compe-  
49 tent care.

50 (g) May provide follow-up services as needed to individuals accessing  
51 the 9-8-8 suicide prevention and mental health crisis hotline consistent  
52 with guidance and policies established by the NSPL.

53 2. The commissioner of the office of mental health and the commis-  
54 sioner of the office of addiction services and supports shall establish  
55 a comprehensive list of reporting metrics to be included in an annual  
56 report under this article on the 9-8-8 suicide prevention and mental

1 health crisis hotline's usage, services and impact which shall include,  
2 at a minimum:

3 (a) The volume of requests for assistance that the 9-8-8 suicide  
4 prevention and mental health crisis hotline received;

5 (b) The average length of time taken to respond to each request for  
6 assistance, and the aggregate rates of call abandonment;

7 (c) The types of requests for assistance that the 9-8-8 suicide  
8 prevention and mental health crisis hotline received;

9 (d) The number of mobile crisis teams dispatched;

10 (e) The number of individuals engaged by mobile crisis teams including  
11 any support provided beyond the resolution of an initial crisis;

12 (f) The number of individuals transported by mobile crisis teams to a  
13 crisis receiving and stabilization service center or other mental health  
14 crisis service;

15 (g) The number of such individuals transferred by mobile crisis team  
16 responders to the custody of law enforcement or transported to an emer-  
17 gency room or inpatient mental health services;

18 (h) the number of times a mobile crisis team was the first responder  
19 to a mental health crisis and had to request deployment of law enforce-  
20 ment, including the reason for the request, and the outcome of the law  
21 enforcement response; and

22 (i) The age, gender, race, ethnicity, national origin, and high risk  
23 category or the individual, if reasonably ascertainable, of individuals  
24 contacted, transported, or transferred by each mobile crisis team.

25 3. The commissioners of the office of mental health and the office of  
26 addiction services and supports shall submit an annual report beginning  
27 no later than December thirty-first, two thousand twenty-three and annu-  
28 ally thereafter, regarding the comprehensive list of reporting metrics  
29 to the governor, the temporary president of the senate, the speaker of  
30 the assembly, the minority leader of the senate and the minority leader  
31 of the assembly.

32 4. The commissioner of the office of mental health, in consultation  
33 with the commissioners of the department of taxation and finance, the  
34 office of addiction services and supports, and the department of public  
35 service, shall submit a report that details the resources necessary to  
36 make the NSPL, available, operational, and effective across the state,  
37 including an evaluation of available and new revenue sources to support  
38 the implementation, staffing, and ongoing activities of 9-8-8 services  
39 that are reasonably attributed to: (a) ensuring the efficient and effec-  
40 tive routing of calls made to the NSPL to an appropriate 9-8-8 crisis  
41 hotline center; (b) personnel and the provision of mental health, crisis  
42 outreach and stabilization services directly related to the NSPL; and  
43 (c) the establishment of a trust fund for the purpose of depositing any  
44 dedicated revenues collected to create and maintain a statewide 9-8-8  
45 suicide prevention and mental health crisis hotline system. The report  
46 shall be submitted on or before December thirty-first, two thousand  
47 twenty-one to the governor, the speaker of the assembly, the temporary  
48 president of the senate, and the minority leaders of the senate and the  
49 assembly.

50 § 3. This act shall take effect immediately.