October 10, 2025

Testimony to the New York Senate Committee on Alcoholism and Substance Use Disorders

Public Hearing on The Treatment Court Expansion Act



Thank you, Senators Fernandez and Ramos, for the opportunity to present written testimony to the Senate Alcoholism and Substance Use Disorder Committee as part of today's hearing regarding the Treatment Court Expansion Act.

The Office of Mental Health (OMH) is pleased to outline some of the work being done to assist individuals with mental health challenges who come into contact with the criminal justice system. Governor Hochul has made tremendous investments in community-based services since taking office to support all New Yorkers with mental health needs, which includes this population who often require the most intensive community-based treatment.

Community-based Mental Health Services

Improving access to community-based mental health care is the first step in ensuring that individuals receive treatment that will help them to live successfully in the community. Some of the recent investments designed to increase access include tripling the number of Certified Community Behavioral Health Clinics (CCBHC), adding 42 new Assertive Community Treatment (ACT) teams, expansion of the Intensive and Sustained Engagement Team (INSET) program, the launch of Safe Options Support teams across the State to engage chronically unsheltered homeless individuals, and additional housing slots which bring the total number of operational units of housing in New York State to 50,673.

Beyond the general investments, there have been many specialized investments for individuals in the criminal justice system. The Academy for Justice Informed Practice supports community providers who are working with individuals involved with the criminal justice system whether they run general services or those specifically funded for community re-entry from prison. New York State has nearly 1,000 forensic housing units including transitional settings and scattered site supportive housing across the state for individuals returning to the community and additional units to be used for either individuals with incarceration history or as alternatives to incarceration. Additionally, OMH funds specialized forensic Intensive Case Management and has capacity to serve over 1,000 individuals in Forensic Assertive Community Treatment (FACT) statewide.

Comprehensive Crisis System Development

The launch of the 988 suicide and crisis line in 2022 provided New York State with a central access point for the community-based crisis system. Ensuring that the state builds increased capacity for telephonic, mobile, and residential crisis services as well as funding crisis stabilization centers to provide the appropriate level of care when and where individuals need it is an important component of reducing individuals interfacing with the criminal justice system. Additionally, New York State is funding 12 new Comprehensive Psychiatric Emergency Programs (CPEPs) across the state.

Diversion Efforts and Recent Investments in Forensic Services

OMH created a Mental Health Criminal Justice (MH/CJ) Collaboration Unit which provides training as well as Train-the-Trainer opportunities for Peace and Police Officers. In 2024, this unit provided over 60 training courses/sessions reaching nearly 1,700 individuals.

OMH has also allocated funding from the Community Mental Health Block Grant to support diversion services in communities across New York State. Those services are specifically for individuals who have a serious mental illness who encounter law enforcement or the wider criminal justice system who are at risk of incarceration or are currently in local correctional facilities.

For Crisis Intervention Team (CIT) training, the MH/CJ Collaboration Unit promotes the use of sequential intercept mapping to bring county mental health and local law enforcement together to understand regional resources and collaborate on joint responses. Since 2015, 54 Jurisdictions within 40 Counties have received CIT training. CIT expansion funding has allowed for work in the areas of CIT for Youth in-service training. Increased funding has also allowed for 2 Train-the-Trainer courses to be conducted, certifying 42 new instructors. The funding also allowed 911 Diversion Training to be provided to 75 dispatchers in select counties, resulting in the diversion of response from law enforcement to a mental health response when screened as safe to do so.

The Mobile Access Program (MAP) began in 2019 and serves as an extension of the CIT program. MAP connects individuals to resources for mental health consultation and avoid unnecessary transports to hospitals. Under MAP, police officers and mental health professionals are equipped with iPads so that officers can remotely connect an individual to a mental health professional without necessarily having to transport to a different location such as the hospital or jail, unless that level of intervention is deemed necessary. Eighteen Jurisdictions in nine counties are funded for MAP. Through 2024, 1,498 MAP sessions have been completed and 72% of individuals remained in the community after the session.

Established as part of the MH initiatives of FY24-25, Court-based Mental Health Navigators support individuals in the community with mental health needs who are currently facing criminal charges. Navigators are based within county government and work with local systems to coordinate voluntary care for justice-involved individuals to support their health, wellness, and recovery. Ideally, Navigators work at courthouses and work closely with peer specialists to foster rapid connection to services and encourage engagement and participation with services. Funding provides for 71 navigators across 40 counties, inclusive of NYC. As of 9/26/25, 17 counties have functioning navigator programs; the rest are currently in the process of hiring staff.

Also, part of the mental health initiatives of Fiscal Year 24-25, the Aligning to Build Lasting Engagement (ABLE) Team focuses on the distinct subgroup of individuals with serious mental illness who cycle through shelters, hospitals, jails, and prisons. The ABLE Team works to establish connections between law enforcement, correctional entities, hospitals, and other community providers. This team facilitates connections to services and coordinates with the OMH regional field offices to collaborate with local mental health providers and resources. Current pilot counties are Albany, Onondaga, and Erie.

Pre-release and Re-entry Services

For those individuals whose interactions with the legal system result in a prison sentence, OMH provides a full array of mental health services in New York State prisons. At the end of their sentence, for individuals with mental illness returning to the community from prison, OMH pre-release services is focused on developing a strong discharge which will provide the treatment and

supports needed to remain stable and successful in the community and prevent future interactions with the criminal justice system. Some specialized units exist for individuals returning to the community with serious mental illness, including Safe Transition and Empowerment Program (STEP), an expanded program model providing in-reach and case management services to all females leaving prison and returning to New York City. Specialized programs also exist for individuals with serious mental illnessI and histories of violence prior to release to the community. Additionally, OMH funds a specialized Reentry Coordination System (RCS) operated by the Center for Urban Community Services (CUCS) that provides centralized referral coordination for persons with SMI who are returning to New York City.

Thank you for the opportunity to provide this written testimony to the Senate Alcoholism and Substance Use Disorder Committee.