



## **B-HEARD: 911 MENTAL HEALTH EMERGENCY ALTERNATE RESPONSE PILOT PROJECT**

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#### **What is B-HEARD?**

The Behavioral Health Emergency Assistance Response Division, or B-HEARD, is a new health-centered response to 911 mental health calls. Beginning with a pilot in East Harlem and parts of Central and North Harlem, 911 call operators will dispatch new B-HEARD Teams — FDNY Emergency Medical Technicians (EMTs)/paramedics teamed with a mental health professional from NYC Health + Hospitals — as the default first responders to people experiencing a mental health emergency. B-HEARD Teams will operate seven days a week, 16 hours a day, in East Harlem and parts of Central and North Harlem.

The new B-HEARD Teams will use their physical and mental health expertise, and experience in crisis response to de-escalate emergency situations and provide immediate care. These teams will have the expertise to respond to a range of behavioral health problems, such as suicide ideation, substance misuse, and mental illness, including serious mental illness, as well as physical health problems, which can be exacerbated by or mask mental health problems.

In emergency situations involving a weapon or imminent risk of harm to self and others, NYPD officers and other emergency response resources will respond.

**How will the B-HEARD pilot in Northern Manhattan work? What should 911 callers expect?**

New Yorkers experiencing or witnessing an emergency should continue to call 911 for themselves, a loved one, a neighbor, or others.

When a B-HEARD Team is dispatched, the team will arrive in a non-transport vehicle and will have the same Basic Life Support equipment as an ambulance. Teams can be identified by their FDNY EMS uniforms and H+H identification and will arrive in an FDNY/EMS marked vehicle. Callers cannot specifically request a B-HEARD Team. Based on a description of the circumstances and need, 911 operators and EMS are trained to triage and assign calls to B-HEARD based on the call location, dispatch criteria and availability of B-HEARD Teams.

### **What are the goals of the B-HEARD pilot?**

B-HEARD is grounded in New York City's commitment to treat mental health emergencies as a health issue, not a public safety problem.

Currently, NYPD officers and FDNY EMTs respond to nearly all mental health 911 calls; however, that often is not the most appropriate form of help for those in a mental health emergency and lacks a mental health professional in the response. B-HEARD will help people with emergency mental health needs quickly get appropriate help and health-centered assessments from trained medical and mental health professionals.

The B-HEARD pilot will likely reduce unnecessary transports to hospitals and will help reduce the number of times police will need to respond to 911 mental health calls. The results of this pilot will inform how the City responds to mental health emergencies in other neighborhoods.

### **What kinds of expertise do the new B-HEARD Teams have?**

B-HEARD Teams include two EMTs/paramedics and a mental health professional. As trained health professionals, the B-HEARD Teams can respond to a range of behavioral health problems, such as suicidal ideation, substance misuse, and mental illness, including serious mental illness, as well as physical health problems, which can be exacerbated by or mask mental health problems. Team members also bring significant experience with mental health crises and are trained jointly to use their physical and mental health expertise and experience in crisis response to assess and de-escalate emergency situations.

### **What kind of assistance can the B-HEARD Teams provide?**

Once on the scene, the Team will work with the person in need of assistance, and if appropriate, other involved parties. The Team will use their experience with crisis response to help de-escalate situations, if needed. They will conduct physical and mental health assessments and can provide on-site assistance, including but not limited to connecting the person to their existing medical and/or mental health provider, crisis counseling, or, with their consent, connecting them to follow-up services. If the person requires emergency medical services, the B-HEARD Team will provide emergency medical care and call EMS for an ambulance transport.

### **Will B-HEARD Teams provide follow-up care?**

The B-HEARD Teams will, when needed, refer people to the NYC Health Department for appropriate follow-up services, including Health Engagement and Assessment Teams (HEAT).

HEAT offers time-limited pre- and post- crisis case management services and support to people presenting with behavioral health challenges and/or a health concern that is affecting daily functioning. Each HEAT team consists of a behavioral health professional and a Health Navigator, or peer with lived experience with mental health, substance misuse, homelessness, and/or the criminal legal system. HEAT services are generally in place for up to 90 days, depending on the person's level of engagement and need.

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### **Can I specifically request a B-HEARD Team?**

No. Callers cannot specifically request a B-HEARD Team. Based on a description of the circumstances and need, 911 operators and EMS are trained to triage and assign calls to B-HEARD Teams based on the call location, dispatch criteria and availability of B-HEARD Teams.

### **Will B-HEARD Teams be deployed in violent situations? When a person is suicidal?**

B-HEARD Teams will not be dispatched to 911 mental health calls where violence and/or imminent suicide or harm is identified by the 911 operator. Such calls will continue to be handled by NYPD and EMS. Once on the scene, NYPD or EMS can request support from B-HEARD Teams.

### **Will B-HEARD teams be made available for youth under 18 years old?**

Yes.

### **How will police be involved in this pilot?**

B-HEARD Teams will respond to all mental health emergency calls without law enforcement except where police response is required. The circumstances in which police response is required include situations in subways or involving violence, weapons, imminent harm, criminality, or other circumstances requiring law enforcement assistance.

Once a B-HEARD Team has arrived at a location, they can request backup from NYPD if it is not safe for the B-HEARD Team to intervene.

In all neighborhoods other than the pilot neighborhoods, NYPD officers and FDNY/EMS EMTs will continue to provide coordinated responses to mental health emergencies. When there are no B-HEARD Teams available in the pilot neighborhoods, an ambulance and police officers will continue to respond.

### **When and where will B-HEARD operate? How was the pilot area selected?**

B-HEARD Teams will operate seven days a week, 16 hours a day, in East Harlem and parts of Central and North Harlem. These areas were identified based on the volume of 911 mental health calls coming from

these communities (this radio zone has among the highest volume of 911 calls in the city) as well as the availability of community-based mental health resources, including a newly opened Support and Connection Center, a Comprehensive Psychiatric Emergency Program (CPEP) at Harlem Hospital, outpatient clinics and other behavioral health providers.

### **Which city agencies are in charge of the B-HEARD pilot?**

B-HEARD represents a coordinated effort by FDNY/EMS, Health + Hospitals, the Department of Health and Mental Hygiene, the NYPD, and the Mayor's Office of Community Mental Health to move towards a more health-centered approach to mental health emergencies. FDNY Emergency Medical Services and H+H will manage the B-HEARD Teams and provide training and ongoing support. The Mayor's Office of Community Mental Health will provide programmatic oversight for this pilot.

### **What's the difference between B-HEARD Teams and Co-Response Teams?**

There are two key difference between B-HEARD Teams and Co-Response Teams: when the teams intervene and the kinds of professionals who are on each team.

B-HEARD Teams respond to 911 mental health emergency calls and include two EMTs/paramedics and a mental health professional, from FDNY/EMS and NYC Health + Hospitals.

Co-Response Teams (CRT) offer pre- and post-crisis intervention and do not respond to 911 calls. A collaboration between the NYPD and the Department of Health and Mental Hygiene, each team includes two police officers and a clinician, serving community members presenting with mental health or substance use challenges who are at an elevated risk of harm to themselves or others. CRTs offer short-term engagement to facilitate connections to care and linkages to support services. CRT officers volunteer for the assignment, and all CRT members have been trained in Crisis Intervention Training (CIT) and are skilled in working with community members presenting with mental health and substance use challenges.

### **What's the difference between B-HEARD Teams and Mobile Crisis Teams?**

Mobile Crisis Teams respond to referrals from NYC Well for urgent mental health crises whereas the B-HEARD Teams provide an emergency response. Both responses involve face-to-face interventions with the identified individual in crisis, as well as their family or other support systems, to engage, assess, de-escalate and connect individuals to the most appropriate services. Most Mobile Crisis Teams include both professional and paraprofessional staff, for example, a master's-level clinician with a peer support staff person. The B-HEARD Teams consist of a mental health professional and two EMTs/paramedics. From 8:00am to 8:00pm seven days a week, Mobile Crisis Teams arrive within hours to help people who are unable or unwilling to engage in care. These teams consist of mental health clinicians and peers who can provide mental health services, primarily serving both children and adults in their homes. Mobile Crisis teams typically make between one and three contacts with the person in crisis over one to two weeks, provide crisis intervention, de-escalation, assessment and linkage to ongoing mental health and substance use treatment and support.

### **What is a mental health emergency? When should I call 911?**

An emergency is a situation that requires an immediate in-person response from first responders. If someone is at immediate risk of hurting themselves or someone else or is in imminent danger because of a health condition or other situation, call 911 immediately.

Beyond 911, New York City also offers other options for people experiencing behavioral health crises. A behavioral health crisis is defined as a non-life-threatening situation in which a person experiences an intense behavioral, emotional, or psychiatric response that may be triggered by a precipitating event. The person may be at risk of harm to themselves or others, disoriented or out of touch with reality, functionally compromised, or otherwise agitated and unable to be calmed; and if this crisis is left untreated it could result in an emergency.

Call NYC Well at 1-888-NYC-WELL (1-888-692-9355), text “WELL” to 65173, or chat online at [nyc.gov/nycwell](https://nyc.gov/nycwell) to connect to help in a crisis that does not need an immediate in-person response. Counselors are available to provide free, confidential support 24/7 over call, text, or chat. If you’re not sure if 911 or NYC Well is more appropriate, contact NYC Well and a trained counselor will help to assess the most appropriate next steps, including connection to 911 or the City’s full array of urgent mental health services.

### **Can I text 911 with a mental health emergency?**

Text-to-911 is a reliable and safe way to reach emergency services in New York City. You should always call 911 if you can and text 911 only if you can’t call. Text-to-911 is beneficial to the Deaf, people with hearing loss or speech disabilities, and those who can't safely call 911, including those experiencing domestic or intimate partner violence. For more information, go to <https://www1.nyc.gov/site/text911/index.page>.