

Collaborating  
to Deliver  
Results

PARTNER  
AGENCIES  
& OFFICES

# THRIVENYC: ENHANCING ACCESS TO MENTAL HEALTH SUPPORT FOR EVERY NEW YORKER IN NEED



Launched by First Lady Chirlane McCray and Mayor Bill de Blasio in 2015, ThriveNYC closes critical gaps in mental healthcare and activates every part of City government to promote mental health. In Fiscal 2019, this work was consolidated under the management of the Mayor’s Office of ThriveNYC, which partners with 12 City agencies and almost 200 community-based organizations to implement over 30 innovative programs that reach hundreds of thousands of New Yorkers every year. ThriveNYC’s programs advance four goals:

- Promote mental health for the youngest New Yorkers
- Eliminate barriers to care
- Reach people with the highest need
- Strengthen crisis prevention and response

Mayor’s Office  
to End Domestic  
and Gender  
Based Violence

Mayor’s Office  
for Economic  
Opportunity

Mayor’s Office  
of Labor  
Relations

ThriveNYC brings mental health support to communities and locations where it never existed before. ThriveNYC does this by reaching people with the highest need—those with serious mental illness, those affected by trauma and those living in historically underserved neighborhoods—and by breaking down barriers to care for all New Yorkers. ThriveNYC’s programs are motivated by six foundational principles: change the culture; act early; close treatment gaps; partner with communities; use data better; and strengthen government’s ability to lead.

ThriveNYC is committed to countering painful, long-standing and racist inequities in mental health. One way ThriveNYC advances equity is by concentrating new mental health support where it is needed most: in Fiscal 2020, over 70 percent of service locations for ThriveNYC programs were in federally designated mental health provider shortage areas, meaning neighborhoods with low levels of mental health providers per capita.

To understand the impact of ThriveNYC’s work, ThriveNYC uses an approach similar to other large-scale public health initiatives. This includes data on nearly 200 reach and impact metrics for ThriveNYC’s programs, which is regularly updated on ThriveNYC’s website. Depending on how the data is collected for each measure—such as through an annual survey, regular client screening or observation—the data is updated either quarterly, semi-annually or annually.

ThriveNYC’s measurement approach is informed by a Science Advisory Group comprised of leading national and international experts in epidemiology, mental healthcare and the social drivers of mental health. In March 2020, this Science Advisory Group published two

population-level measures that can be directly associated with ThriveNYC's work. If ThriveNYC continues to close gaps in mental healthcare, the Science Advisory Group projects that New York City will see changes in these measures in the next five years:

1. More New Yorkers with mental health needs are connected to treatment. Defined as 1) more New Yorkers with an identified mental health need receive treatment, and 2) greater equity in connection to treatment.
2. Fewer mental health needs become crises. Defined as 1) fewer mental health emergencies, as measured by 911 dispatches and emergency department visits, and 2) less disparity in mental health emergencies.

The COVID-19 pandemic has profoundly affected the mental health of New Yorkers. To ensure that services continued to reach people who need care, nearly all of ThriveNYC's 30 programs continued to deliver services during the pandemic. Many programs—specifically those that reach New Yorkers with the highest need and those that strengthen crisis prevention and response—continued to provide in-person services, including in over 100 shelters for families with children, over 40 runaway and homeless youth residences and drop-in centers and at 46 high-need sites within the NYC Health + Hospitals system. Mobile treatment teams continued to provide intensive, ongoing, community-based treatment to people with serious mental illness, many of whom are experiencing homelessness. Several programs introduced new tele-mental health services, including those for isolated older adults and students.

During the COVID-19 pandemic, ThriveNYC also launched new engagement strategies to eliminate barriers to care for particularly high need populations. For example, to reach veterans during the pandemic, ThriveNYC and the Department of Veterans' Services (DVS) launched Mission: VetCheck, in which volunteers from the veterans' community were trained to make supportive check-in calls to veterans. Over 12,800 calls to veterans were made between April and the end of June 2020. Mission: VetCheck is helping to reduce social isolation for veterans and is addressing veterans' needs during the pandemic (calls resulted in over 300 referrals back to DVS for help with issues like food assistance, unemployment, and COVID-19 testing information). ThriveNYC trained over 400 employers and employees in workplace mental health strategies and over 150 faith leaders representing diverse faith traditions in how to promote mental health during and following a disaster. In addition, ThriveNYC created an Online Guide to Mental Health Support New Yorkers Can Access While Staying Home, which has had over 31,000 visits since late March and includes a directory of remote mental health services. More information, as well as additional COVID-19 mental health resources and toolkits, is available on ThriveNYC's website.

## PROMOTE MENTAL HEALTH FOR THE YOUNGEST NEW YORKERS

Half of all lifetime mental health disorders appear before the age of 14. ThriveNYC supports several programs to promote healthy development and lifelong positive mental health practices of young New Yorkers, grounded in research showing that early identification and treatment of mental health disorders can build mental health in the long term.

ThriveNYC has also partnered with the Department of Education (DOE) to significantly enhance access to mental health support in New York City's public schools. In Fiscal 2020, ThriveNYC partnered with DOE to offer onsite mental health support in high-need schools, including clinicians in 248 schools and access to onsite mental health clinics in 129 of those schools. ThriveNYC supports training to help educators and caregivers better identify symptoms of trauma and emotional and psychological distress in order to meet the mental health needs of their school communities. In the beginning of the 2019/2020 school year, the City launched a new partnership between ThriveNYC and DOE: School Response Clinicians, licensed clinical social workers who support students across the city. These social workers provide care to students to prevent crises and in times of immediate emotional distress, provide onsite counseling, and help connect students to long-term care if necessary.

During the COVID-19 pandemic, students in high-need schools and students enrolled in school-based mental health clinics continued to receive counseling remotely and School Response Clinicians offered wellness check-in calls and individual mental health sessions remotely to students in emotional distress or crisis. Additionally, school-based mental health support was added to the newly created Regional Enrichment Centers, offering in-person social and emotional support to children of frontline workers.

## ELIMINATE BARRIERS TO CARE

One in five adults in New York City experiences a mental health disorder in any given year. Yet hundreds of thousands of individuals in need are not connected to care. Barriers to care vary, ranging from a lack of nearby care options and complicated healthcare systems, to insurance coverage, and language barriers as well as the cultural competency of providers. ThriveNYC addresses these barriers and increases access to care in many ways. Below are highlights from this work.

NYC Well is the City's comprehensive mental health helpline. Available by call, text or online chat, NYC Well provides a safe, easy way for New Yorkers to connect to care no matter where they are, what emotional state they are in, or what signs and symptoms they express. Trained counselors and peer support specialists provide brief counseling, peer support, assistance navigating the mental healthcare system and help setting appointments with mental healthcare providers. The service is free, confidential and has the capacity to respond in over 200 languages. NYC Well answered 262,200 calls, texts and chats from people seeking mental health support in Fiscal 2020, for a total of 945,528 since launching in 2016. NYC Well also deploys Mobile Crisis Teams operated by hospitals and community-based organizations to respond to urgent mental health needs approximately 12,000 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. Teams can arrive within hours of a referral and services can include assessment, crisis counseling and connection to ongoing services.

During the COVID-19 pandemic, NYC Well responded to an increased need. NYC Well answered 17 percent more calls in May 2020 than in May 2019, and more calls in June 2020 than in June 2019. There were more than 120,000 visits to the NYC Well website in April 2020—up 400 percent from April 2019. Mobile Crisis Teams continued to go to people's homes when needed, with protocols in place to screen for COVID-19 symptoms before teams entered a home and with access to personal protective equipment for team members.

The Connections to Care (C2C) program is an innovative partnership between 14 community-based organizations (CBOs), the Mayor's Office of ThriveNYC, the Mayor's Office for Economic Opportunity, the Mayor's Fund and the Department of Health and Mental Hygiene. Through C2C, CBOs work with mental health providers who train and coach CBO staff to screen their clients for mental health needs, offer direct support when appropriate, and link to local health providers for further care if needed. In Fiscal 2020, C2C trained 182 employees from participating CBOs (for a total of 1,863 since 2016) and reached over 11,371 people from all five boroughs (for a total of 46,045 since launch in 2016). This includes 1,286 participants who were referred to outside care in Fiscal 2020 (for a total of over 5,123 since launch). During the COVID-19 pandemic, C2C providers continued to operate both onsite where necessary as well as remotely, conducting mental health screening and referrals by phone and developing new ways to support clients, including virtual support groups on relevant topics such as anxiety, grief and loss.

In Fiscal 2020, 22,263 community members and 12,088 City employees were trained in Mental Health First Aid, for a total of 159,952 in the last four years. Mental Health First Aid (MHFA) is an evidence-informed, free, eight-hour training that helps people become more comfortable talking about mental health, listening to others, recognizing signs and symptoms of mental illness and directing people in need to relevant services. In March 2020, the City suspended Mental Health First Aid trainings due to COVID-19 safety precautions. In June 2020, the City announced that, for the remainder of 2020, Mental Health First Aid trainings would be replaced with a new virtual model specifically designed to address the impact of the public health emergency. The City has redirected MHFA staff to conduct a phased approach to deliver mental health disaster response and coping sessions to target populations. These sessions and trainings are projected to serve 10,000 residents in the hardest hit communities from July to December 2020 and will engage community and faith-based organizations to reach residents in the communities hardest hit by the pandemic.

## REACH PEOPLE WITH THE HIGHEST NEED

Many who are particularly vulnerable to mental illness—often those who have been exposed to trauma—are especially underserved. ThriveNYC implements programs that bring new, dedicated support to these individuals, with a current focus on victims of crime, families living in shelters, aging New Yorkers, veterans, vulnerable young people and people living in historically underserved neighborhoods. Below are some highlights from this work.

## **PEOPLE HARMED BY CRIME, VIOLENCE OR ABUSE**

From 2016 to Fiscal 2020, the Crime Victim Assistance Program supported over 165,000 people, 49,904 of whom were served through the program in Fiscal 2020. Before the launch of ThriveNYC, many crime victims navigated the complicated landscape of the criminal justice and social service systems alone. Only Housing Police Service Areas and three precincts had an onsite victim advocate to serve victims of domestic violence. Now, through ThriveNYC, victims of any kind of crime can be served by the Crime Victim Assistance Program, which operates in precincts and Housing Police Service Areas citywide. The program provides supportive counseling, connections to individual or group therapy, safety planning, assistance with victim compensation and help navigating the legal and financial challenges that can emerge after a crime has occurred. During the COVID-19 pandemic, Crime Victim Assistance Program advocates ceased in-person services to ensure safe operations and transitioned to phone outreach and support. Because overall crime complaints fell during the first several months of the pandemic and advocates began working remotely in March, which decreased their ability to connect with and serve victims in person in the precincts, this program provided a lower-than-average volume of services between March and June 2020. This resulted in fewer clients served during the entirety of Fiscal 2020 than the originally set target of 55,000 for the indicator 'Individuals who, after reporting a crime, received support to deal with the emotional, physical and financial aftermath of crime through the Crime Victim Assistance Program (with NYPD).'

## **FAMILIES LIVING IN SHELTERS**

In partnership with ThriveNYC, the Department of Homeless Services (DHS) has placed 340 licensed social workers in over 100 shelters for families with children across the city. These clinicians served 19,766 families in shelter since the inception of the program in 2016, and 5,986 families in Fiscal 2020. Through ThriveNYC's partnership with DHS, each family with children residing in shelter now has access to dedicated licensed social workers who conduct behavioral health assessments and engage families around their barriers to permanent housing. These assessments include behavioral health history and screenings for current concerns, as well as developmental screenings for children, among other things. During the COVID-19 pandemic, the City's shelters remained open and fully operational, providing essential services and support to families experiencing homelessness. Social work services continued to be provided in-person in family shelters by licensed clinical social workers.

## **AGING NEW YORKERS**

Older adults have high rates of late-onset mental health disorders, yet low rates of assessment and treatment. Before ThriveNYC, many seniors went without ready access to mental health support. In Fiscal 2020, ThriveNYC and the Department for the Aging (DFTA) partnered to bring onsite clinicians to 48 senior centers operated by DFTA, which included an expansion to 23 new senior centers in Fiscal 2020. Over 520 seniors experiencing mental health issues were treated through this program in Fiscal 2020 and 1,080 seniors have received both short-term and ongoing clinical treatment through this program in the last three years. Since launch, 58 percent of seniors suffering from depression who received onsite treatment have shown clinically significant improvement. During the COVID-19 pandemic, clinicians provided new tele-mental health services to existing clients and conducted new client assessments by phone.

## **VETERANS**

To enhance mental health for veterans, ThriveNYC partners with DVS to support outreach teams that work directly with veterans and their families and caretakers, connecting them to a range of community-based services as they transition home. In Fiscal 2020, successful connections to care, services and resources through this program increased by over 400 percent compared to Fiscal 2019. This significant increase was due to a high volume of referrals from Mission: VetCheck and, earlier in the Fiscal Year, due to a high volume of referrals from DVS outreach efforts to encourage eligible veterans to enroll in the FairFares program, which supplies discounted MetroCards to eligible low-income New Yorkers.

## **VULNERABLE YOUNG PEOPLE**

The Department of Youth and Community Development (DYCD) funds Runaway and Homeless Youth (RHY) Drop-in Centers, Crisis Services and Transitional Independent Living Residential Programs, which provide specialized services to vulnerable youth, including LGBTQ+ identifying youth. Since 2016, ThriveNYC has partnered with DYCD's RHY programs to enhance mental health services offered to young people residing in more than 40 RHY residential programs and eight drop-in centers across all five boroughs. Approximately 2,600 young people were served by mental health professionals in Fiscal 2020, and more than 13,600 young people have been served through this program since 2016. During the COVID-19 pandemic, mental health support continued to be provided to youth both in-person and through

new tele-mental health services at residential programs (which remained open and operational) and drop-in centers (which operated on a modified schedule).

## **PEOPLE LIVING IN HISTORICALLY UNDERSERVED NEIGHBORHOODS**

In 2016, ThriveNYC launched the Mental Health Service Corps (MHSC), a workforce development program that builds the next generation of behavioral health practitioners trained in innovative integrative care practices. MHSC was managed by DOHMH and operated by the City University of New York from 2016 through the end of 2019. Between July 1 and December 31, 2019, this program served 11,293 people. On January 1, 2020, NYC Health + Hospitals launched a redesigned, streamlined Mental Health Service Corps at 46 H+H sites across the five boroughs. Seventy-six percent of service locations in the new MHSC are located in federally designated mental health professional shortage areas. During the COVID-19 pandemic, Corps Members continued to deliver in-person and remote mental health services.

## **STRENGTHEN CRISIS PREVENTION AND RESPONSE**

To prevent crises and help New Yorkers with serious mental health needs function well in their communities, ThriveNYC works with several City agencies to ensure those with critical needs can access and stay connected to treatment. Below are highlights from this work.

Co-Response Teams, a collaboration between the New York City Police Department (NYPD) and DOHMH, are a pre- and post-crisis intervention. Each team includes two police officers and one behavioral health professional from DOHMH. Teams are available 16 hours a day, seven days a week to assist people with mental illness and substance use disorders who may be at an elevated risk of harm to themselves or others. Co-Response Teams connect or re-connect people to care or another stabilizing support, including medical, mental health, legal, housing and other social and clinical services. In the last four years, these teams have had over 4,000 face-to-face encounters (defined as in person engagement) with New Yorkers and have assisted more than 1,900 people across the city, 677 of whom were served in Fiscal 2020 (defined as clinical assessment, counseling, psycho-education, service referral, connection to care or other stabilizing support, or transportation to a hospital, clinic, or doctor's appointment). In addition to creating greater stability for these New Yorkers, Co-Response Teams also reduce the subsequent number of enforcement interactions with the Police Department. During the COVID-19 pandemic, Co-Response Teams engaged people and their support networks (such as family members, service providers, and friends) by phone 4,470 times.

ThriveNYC also partners with DOHMH to implement several new mobile treatment team models. As one example, ThriveNYC provides additional substance use expertise to 40 of the City's Assertive Community Treatment (ACT) Teams, which provide intensive, mobile, community-based mental health treatment and rehabilitation services to New Yorkers with serious mental illnesses. These ThriveNYC-enhanced teams have the capacity to serve 2,720 individuals at a time. Beyond ThriveNYC, there are eight additional New York State-funded ACT teams and one additional City-funded team in New York City. In total, ACT teams have capacity to serve 3,312 individuals at a time.

ThriveNYC supports four Forensic ACT (FACT) Teams, which provide the same intensive mental health treatment and rehabilitation services as ACT teams, and include additional staff focused on serving clients with current or recent justice system involvement. Beyond ThriveNYC, there is one additional New York State-funded FACT team in New York City. In total, FACT teams have capacity to serve 340 clients at a time.

ThriveNYC also supported the creation of Intensive Mobile Treatment (IMT) teams managed by DOHMH. IMT teams provide a particularly flexible model of mental health treatment and intensive support to adults with mental illness and/or substance use disorders, homelessness and/or transience and escalating behaviors. IMT teams include mental health, substance use, and peer specialists who help individuals maintain a treatment plan and facilitate connection to housing and additional supportive services. IMT teams currently have the capacity to serve up to 189 individuals at a time.

Collectively, mobile treatment teams in NYC have a capacity to serve over 3,841 clients at a time. Due to the unique needs of each client, the duration of service for each client served by a team can vary, but teams work to engage clients for several months. During the COVID-19 pandemic, ACT, FACT and IMT teams provided a combination of tele-mental health and in-person services.

## NOTE ON THE EFFECT OF THE COVID-19 PANDEMIC

Due to considerable COVID-19-related operational adjustments, there were substantial changes in how clients were served through many City services, including ThriveNYC programs. Nearly all of ThriveNYC programs have continued to offer critical support to New Yorkers during the COVID-19 pandemic, although operational adjustments resulted in reduced numbers of clients served for some programs. One short-term stabilization program, the Support and Connection Center in East Harlem, and two in-person training programs (Mental Health First Aid and Crisis Intervention Training) suspended operations during COVID-19 due to safety precautions.

| SELECTED PERFORMANCE INDICATORS   | Actual |         |         |         |         | Target  |         |
|---|--------|---------|---------|---------|---------|---------|---------|
|   | FY16   | FY17    | FY18    | FY19    | FY20    | FY20    | FY21    |
| <b>Promoting mental health for the youngest New Yorkers</b>   |        |         |         |         |         |         |         |
| Schools with access to Thrive-funded on-site clinical mental health services (with DOE/DOHMH)   | N/A    | 172     | 235     | 247     | 248     | 248     | 248     |
| Mental health workshops and trainings conducted for teachers, school staff, mental health professionals, families, and students (with DOE and DOHMH)<br>*includes Community Schools, Prevention and Intervention Program, School Mental Health Consultants, Social Emotional Learning (Pre-K, Trauma Smart), Youth Mental Health First Aid. | N/A    | 3,920   | 6,512   | 9,151   | 7,781   | 7,057   | 7,057   |
| <b>Eliminate Barriers to Care</b>   |        |         |         |         |         |         |         |
| People who live or work in NYC trained in Mental Health First Aid (with DOHMH)  | 4,771  | 18,656  | 48,988  | 53,186  | 34,351  | 53,000  | N/A     |
| Supportive connections provided by NYC Well, a behavioral health helpline (with DOHMH)  | N/A    | 152,600 | 256,600 | 274,400 | 262,200 | 268,600 | 303,600 |
| Individuals who received mental health support through Connections to Care (with OEO)   | 321    | 7,532   | 12,080  | 14,741  | 11,371  | 10,900  | 7,267   |
| <b>Reach people with the highest need</b>   |        |         |         |         |         |         |         |
| Individuals who, after reporting a crime, received support to deal with the emotional, physical and financial aftermath of crime through the Crime Victim Assistance Program (with NYPD)  | N/A    | 16,088  | 40,410  | 59,008  | 49,904  | 55,000  | 55,000  |
| Veterans, family members and caregivers who were successfully connected to care, services or resources through VetsThriveNYC (with DVS)   | N/A    | 194     | 282     | 504     | 1,402   | 500     | 608     |
| Young people who received mental health support in a city-funded residential program or drop-in center serving runaway and homeless youth (with DYCD)   | 1,835  | 2,408   | 2,802   | 2,569   | 2,648   | 2,800   | 2,600   |
| Families living in shelter who received biopsychosocial screenings from mental health clinicians (with DHS)   | N/A    | N/A     | 36%     | 66%     | 79%     | 80%     | 80%     |
| Individuals who received clinical services from Mental Health Service Corps behavioral health clinicians (with H+H)   | N/A    | N/A     | N/A     | N/A     | 2,749   | 2,475   | 4,950   |
| <b>Strengthen crisis prevention and response</b>  |        |         |         |         |         |         |         |
| Individuals who received services from long-term mobile community-based treatment providers (with DOHMH)<br>*includes ACT, FACT, and IMT Teams  | N/A    | N/A     | N/A     | 4,706   | 4,477   | 3,649   | 3,649   |
| New individuals engaged by a Co-Response Team (with DOHMH and NYPD)   | 53     | 229     | 280     | 686     | 677     | 400     | 400     |

## NOTEWORTHY CHANGES, ADDITIONS OR DELETIONS

- For the indicator ‘Schools with access to Thrive-funded on-site clinical mental health services (with DOE/DOHMH),’ the Fiscal 2017-2021 data and Fiscal 2020 and 2021 targets were updated to reflect the total number of unique schools that receive mental health services through this program. In prior MMR publications, data and targets for this indicator reflected a mixture of individual schools and campuses, which may include several co-located schools.
- In Fiscal 2020, Mental Health First Aid training was conducted for only eight full months (July - February) before in-person training was suspended during the COVID-19 pandemic. During those eight months, the program was on track to meet the annual Fiscal 2020 target for the indicator ‘People who live or work in NYC trained in Mental Health First Aid (with DOHMH).’ The Fiscal 2021 target for this indicator was removed because this training will continue to be suspended during the COVID-19 pandemic. A new target will be set and published in future reports, following the pandemic.
- The Fiscal 2019 data for the indicator ‘Individuals who received mental health support through Connections to Care (with OEO)’ was amended to reflect finalized performance data provided by C2C sites.
- NYC Well exceeded the target of 233,000 answered calls in Fiscal 2020 that was originally set in the Preliminary Fiscal 2020 Mayor’s Management Report. Given the increasing demand for services through NYC Well during the COVID-19 pandemic, the NYC Well targets for Fiscal 2020 and Fiscal 2021 have since been adjusted upward and annualized. Data for Fiscal 2016, 2017, 2018, and 2019 were updated to reflect actual values. Previously reported values were rounded values.
- For the indicator ‘Individuals who received mental health support through Connections to Care (with OEO),’ the Fiscal 2021 target is lower than the Fiscal 2020 target because program funding ends eight months into the Fiscal Year in February 2021 as intended at the completion of a five-year pilot period.
- The indicator ‘Requests from veterans, family members and caregivers that resulted in a successful connection to care, services or resources (with DVS)’ was revised to ‘Veterans, family members and caregivers who were successfully connected to care, services or resources through VetsThriveNYC (with DVS)’ since the data values represent a count of individuals and not requests. Individuals may request support more than once. Given this revision to this indicator, the Fiscal 2020 target for this indicator was also amended to measure people successfully connected to services. The Fiscal 2019 data for this indicator was also amended due to this indicator being underreported due to a midyear shift in their data collection system. This underreporting was fixed and reconciled in Fiscal 2020.
- In Fiscal 2020, ThriveNYC and DVS significantly surpassed the target for the indicator ‘Veterans, family members and caregivers who were successfully connected to care, services or resources through VetsThriveNYC (with DVS).’ This dramatic uptick in successful connections to care was due, in the first four months of Fiscal 2020, to DVS’ targeted outreach for the FairFares program, which provides discounted NYC MetroCards to eligible low-income New Yorkers. During these months, DVS coordinators engaged over 700 student veterans for pre-qualification for FairFares, successfully enrolling about half of those engaged. During the last four months of Fiscal 2020, successful connections to care again increased. This was due to DVS receiving a high volume of referrals from Mission: VetCheck. The Fiscal 2021 target for this indicator was increased to reflect the City’s plans to continue enhanced outreach to veterans through Mission: VetCheck, and the anticipation of a continued high volume of referrals from Mission: VetCheck to DVS.
- The Fiscal 2021 target for the indicator ‘Young people who received mental health support in a city-funded residential program or drop-in center serving runaway and homeless youth (with DYCD)’ was revised to reflect the actual annual average of youth who have sought support through this program over the previous two years.
- In Fiscal 2020, the Mental Health Service Corps was operated by DOHMH from July through December 2019 and by H+H from January through June 2020. In this MMR, the target for the indicator “Individuals who received clinical services from Mental Health Service Corps behavioral health clinicians (with H+H)” was revised to reflect only unique individuals served through the program operated by H+H. Data for this indicator reflects individuals served through the program operated by H+H. Data on the previous model of this program, operated by DOHMH, is available in previous MMR publications.

- The Fiscal 2019 data for the indicator ‘Individuals who received services from long-term mobile community-based treatment providers (with DOHMH)’ has been updated. The originally reported data was incorrect because of a technological problem in the database for this program that was producing incorrect counts. This problem has now been fixed.
- Since the publication of the Preliminary Fiscal 2020 Mayor’s Management Report, the number of ‘New individuals engaged by a Co-Response Team’ reported for Fiscal 2019 has been increased to include data that was not previously available due to a data reporting lag.

## ADDITIONAL RESOURCES

For additional information on items referenced in the narrative, go to:

- ThriveNYC’s new data dashboard:  
<https://thrivenyc.cityofnewyork.us/dashboard/>
- ThriveNYC news:  
<https://thrivenyc.cityofnewyork.us/news/>
- ThriveNYC’s Guide to Mental Health Support New Yorkers Can Access While Staying Home:  
[https://thrivenyc.cityofnewyork.us/mental\\_health\\_support\\_while\\_home](https://thrivenyc.cityofnewyork.us/mental_health_support_while_home)