

April 7, 2026 CLAS Committee Zoom Meeting

Meeting summary

Quick recap

The meeting focused on mental health crisis response services and police training in Connecticut. Dana Begin from DMHAS presented information about the 988 suicide and crisis line, explaining that 94% of calls are resolved telephonically, with mobile crisis teams providing face-to-face interventions for about 5% of cases. Captain Mike Fumiatti from the New Haven Police Department discussed the Connecticut Alliance to Benefit Law Enforcement (CABLE) and Crisis Intervention Team (CIT) training, which provides 40-hour training to approximately 500 officers annually across Connecticut. The discussion included conversations about equity in crisis response, use of force policies, and the challenges of addressing mental health crises in urban areas. Participants also discussed the need for better public awareness about CIT training and the 988 hotline, with suggestions to create educational materials about these resources.

Next steps

- [Dana Begin \(and/or DMHAS team\): Provide backup data and demographic information regarding the utilization of 988 and mobile crisis services, including any available data on disparities and geographic usage, for review at the next meeting.](#)
- [Mike Fumiatti: Share contact information and background materials \(including website link and training documents\) with the committee for consideration of participation in the iCAN conference panel.](#)
- [Co-Chairs Alice Forrester/Brenetta Henry/Committee: Invite Dana and Mike to present to the larger behavioral health oversight council at a future recorded meeting to increase awareness of 988, CIT training, and crisis response protocols.](#)
- [Alice/Committee: Bring up the issue of broader dissemination of information about 988 and CIT training \(including what CIT encompasses and how to request CIT officers\) to the executive meeting for further action.](#)
- [Dana \(and/or 211/988 leadership\): Follow up on the specific incident where 211 would not speak to a family member about a person in crisis, and review protocols to improve the feedback loop and response.](#)

Summary

Meeting Introduction and Updates

The meeting began with informal greetings and conversation with Co-Chair Alice Forrester informing the group that the third agenda item about CHW would not be covered due to Captain Mike Fumiatti's availability to answer questions.

Mental Health Crisis Services Overview

Dana Begin from DMHAS presented on mental health crisis services in Connecticut, focusing on the 988 suicide and crisis line and adult mobile crisis teams. She explained that 988 handles approximately 10,000 calls monthly, with 94% resolved telephonically, 5% requiring mobile crisis team responses, and less than 1% resulting in active rescues requiring 911. Dana emphasized that 988 is designed for mental health and substance use crises, while 911 should be used for dangerous situations requiring police, fire, or ambulance response, and noted that most police departments in Connecticut have CIT-trained officers available.

Mobile Crisis-Law Enforcement Collaboration

The discussion focused on collaboration between mobile crisis teams and law enforcement regarding mental health crises. Dana confirmed that family members can call 988 about concerns for others, and while there are no formal MOUs, mobile crisis teams and law enforcement work closely together with calls flowing both ways. Dana explained that when law enforcement identifies a behavioral health situation, they often call mobile crisis teams to provide clinical support, though she couldn't speak to specific police department protocols and noted that demographic data on this collaboration was limited.

Mobile Crisis Services Discussion

The committee discussed mobile crisis services and CIT (Crisis Intervention Team) support. Co-Chair Brenetta Henry requested demographic data on where CIT services are being utilized to ensure equity across different areas. Dana confirmed that mobile crisis teams can conduct wellness checks, though they cannot enter homes. The discussion also covered the challenges of collecting demographic data during crisis calls, as individuals in distress may not be willing to share this information. The conversation ended with an introduction of Captain Mike Fumiatti, co-director of CABLE, who was scheduled to discuss CIT training and the organization's work.

Crisis Intervention and Police Integration

Mike shared his extensive background in law enforcement, including his role as a captain overseeing various departments at the New Haven Police Department and his leadership with the Connecticut Alliance to Benefit Law Enforcement (CABLE). He discussed CABLE's mission to provide crisis intervention team (CIT) training to approximately 500 officers annually across Connecticut, covering topics like officer wellness, de-escalation techniques, and legal considerations. Mike also highlighted New Haven's efforts to integrate clinicians with police officers through programs like Compass and the addition of a full-time clinician, while noting the challenges of time delays in mobile crisis response.

Police Mental Health Training Discussion

The meeting focused on discussions about police training in mental health crisis response and equity issues in law enforcement. Mike Fumiatti, a police manager from New Haven, shared his experience with Crisis Intervention Team (CIT) training and emphasized the importance of quality training over quantity. The group discussed the challenges of implementing involuntary outpatient commitment laws in Connecticut, with Kelly Phenix expressing support for such legislation. The meeting also addressed questions about family members advocating for loved ones in mental health crises and the use of 988 as a mental health support line. The participants agreed to explore ways to better inform the community about CIT training and mental health resources, with potential follow-up presentations to the larger council body.

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