

MEMO

TO: Honorable Members of the Boston City Council and interested parties
FROM: City of Boston's Coordinated Response Team
DATE: April 13, 2026
RE: Update on Ongoing Efforts to End Outdoor Substance Use in Boston and Connect Individuals to Treatment and Recovery Programs

As Boston enters the warm weather season of 2026, residents, businesses, health providers, and partners in government continue to work with the City to address the serious impacts on public safety, public health, quality of life, and business sustainability stemming from outdoor substance use and addiction. The City takes this opportunity to update the Council, community stakeholders, and the public on **initiatives to end outdoor substance use in neighborhoods of Boston and connect individuals with treatment and recovery programs**. This memo on the City of Boston's Coordinated Response activities and goals is provided to the Boston City Council under Section 1, City of Boston Code, Ordinances, § 16-65.10 (the Unlawful Encampment Ordinance).

Background: Just over a year ago, on February 26, 2025, [the City outlined its updated plan to end congregate outdoor substance use](#). The City plan focused on a set of strategies, including 1) enhanced proactive co-response and diversion, 2) active enforcement of drug laws, 3) enhanced street cleaning and needle pickup, 4) a shift indoors of delivery of harm reduction and away from outdoor use, and 5) collaboration with neighbors to continuously assess our progress and adapt our strategies. At the time, the City wrote that it “considers this an adaptable point-in-time update, and NOT a plan set in stone, and will continue to work closely with leaders in impacted neighborhoods to iterate and respond to changing circumstances on the ground.

In a June 30, 2025, [letter](#) to the Worcester Square Area Neighborhood Association (WSANA), Mayor Wu wrote that “open substance use in any part of Boston is illegal and unacceptable.” At that time, the City announced an [expanded collaboration with the Gavin Foundation](#) to provide transportation and immediate recovery services to individuals.

In the City's [last update to the Council on September 3, 2025](#), the City reported several further iterations on the February plan, expanding CRT staffing to seven days per week, enhancing the Boston Police presence in impacted neighborhoods, standing up a new BPD NEST initiative to enhance diversion and co-response efforts on the ground, and launching a convening with community health providers, known as the Table, to support individuals with complex needs.

In March of 2026, the City takes this opportunity to report on current initiatives and detail further adaptations on the plan as we prepare for the return of warm weather in 2026 and continue to advance our shared goals for safety, health, and quality of life. Our goal is to use all levers of City authority—public health, public safety, and public works—in partnership with the community, providers, and the State, to end outdoor substance use, enhance quality of life, and connect individuals with a continuum of needed care. As in 2025, measures and metrics will be reviewed and revised in response to neighborhood feedback and changing circumstances.

Strategic Updates led by the Coordinated Response Team:

Starting in the fall of 2025, CRT has implemented a field-based diversion model in close partnership with the Boston Police Department's Neighborhood Engagement Safety Team (NEST), the Gavin Foundation, with the support of city departments and government agencies. Since that time, more than 600 individuals have been placed into inpatient substance use treatment, while over 889 cases have been proactively addressed through coordinated field outreach alongside law enforcement. Individuals are assessed in real time, rapidly connected to appropriate care, and safely transported directly to inpatient substance use treatment. For those not entering treatment, CRT ensures a safe return to their place of origin or connection to stable shelter. CRT liaisons—supported by Gavin Foundation recovery coaches, law enforcement and provider partnerships across Massachusetts—rapidly re-engage individuals who relapse or leave treatment against medical advice, reducing harm and supporting their return to recovery.

To further strengthen diversion efforts, the Coordinated Response Team has integrated a mobile command station to support real-time field coordination, substance use treatment placement, and multi-agency response. The command station serves as a central operational hub across Boston, enabling real time decision-making, coordination with partner agencies, and efficient delivery of support and services in the field. To continue progress, CRT will:

1. *The CRT/NEST-led diversion model will be the primary frontline engagement strategy*

In the warm weather season of 2026, the CRT/NEST diversion model will lead on-the-ground proactive outreach, ensuring that individuals engaged in unlawful conduct are not permitted to remain in the area and are directed into treatment pathways.

Beginning on Monday, March 30, CRT and NEST commenced a Warm Weather Initiative. This initiative aligned additional BPD resources under NEST's leadership, alongside coordinated support from State Police and Transit Police partners from the MBTA. This cross-sector initiative works across two 2 shifts, alongside CRT recovery specialists, and is

producing measurable improvements on our city streets. Since March 30, CRT has engaged with over 200 individuals in the area with 125 being placed into a recovery pathway. CRT will continue to develop the growing partnership with the Gavin Foundation as the primary diversion partner. CRT will also continue to deepen its engagement with providers of Acute Treatment Services (ATS), Clinical Support Services (CSS), and Transitional Support Services (TSS), aligned with the recommendations of the Community Working Group. For complex clinical cases, CRT will work closely with BPHC and other clinical providers.

2. The City will develop updated protocols for diversion and deflection, and enhanced data collection

Drawing on guidance from addiction and recovery experts locally and nationally, CRT will work over the course of 2026 to draft, seek feedback, and update best practices/Standard Operation Procedures (SOPs) for diversion, deflection and data collection, drawing on the wealth of lived experience in the recovery community and health care sector, BPHC will support these efforts.

3. The City will enhance partnerships with the Gavin Foundation and other inpatient substance use treatment partners.

When CRT and partners from BPD encounter an individual engaged in unlawful activities, that individual is presented with options to divert out of the criminal justice system and receive substance use treatment when appropriate. Since the fall of 2025, CRT has developed a partnership with the Gavin Foundation, active on a daily basis, which places individuals in inpatient substance use treatment, identifies open beds, reconnects with family, and frees up law enforcement to return to community policing while CRT liaisons ensure that individuals are receiving the focused treatment they need to stabilize. In 2026, CRT will leverage [multi-year grant funding](#) to deepen the relationship with the Gavin Foundation and strengthen BPD/CRT's diversion program supporting neighborhood safety and the process of connecting individuals with long term recovery treatment programs. The community Working Group has also encouraged expanded CSS/TSS provider partnerships and is advocating for additional financial support.

4. Continue ongoing dialogue with community partners

CRT will continue to represent the City in community forums and cross-sector working groups across Boston and build new relationships with community leaders across all impacted neighborhoods to ensure open lines of communication and a responsiveness to the specific concerns of diverse neighborhoods. Engagement with residents, businesses,

neighborhood organizations, social services providers, and local leadership remains a central pillar of CRT's approach and an essential measure of how the team advances its impactful work.

Building on the success of the existing community Working Group, CRT will continue to maintain a framework for neighborhood partnership and collaboration. These forums provide a consistent mechanism to gather community input, monitor evolving neighborhood conditions, and refine response strategies in alignment with community-identified priorities. In addition, CRT will continue to convene a daily situation meeting with Boston EMS, the Boston Police and other pertinent city departments to review narcotic-related incidents, coordinate timely responses, and ensure information sharing across agencies.

CRT's efforts will remain responsive, transparent, and grounded in the lived realities of Boston's neighborhoods. By maintaining strong lines of communication with residents and local stakeholders, CRT is able to identify emerging concerns early, facilitate meaningful interventions, and align public safety, public health, and neighborhood stabilization efforts. Proactive community engagement will remain a core priority as CRT expands its network and advances coordinated solutions that strengthen neighborhood conditions and support residents across Boston.

Strategic Updates led by the Boston Police Department:

The Boston Police Department leads the City's work to ensure public safety and address quality of life concerns. In September of 2025, BPD launched the Neighborhood Engagement Safety Team (NEST) within the Street Outreach Unit (SOU) to further support CRT's diversion model. Since the fall of 2025, the team has operated alongside CRT from a mobile operations center based in the Mass & Cass area. To advance progress in 2026, BPD will:

5. BPD will expand the NEST strategy

BPD will continue to invest in the Street Outreach Unit (SOU) and deploy the NEST strategy city-wide to support CRT-led diversion, enhance quality-of-life, strengthen community-focused policing, and respond to community feedback. Since the start of the Warm Weather Initiative, which began on Monday, March 30, NEST has supported CRT in engaging more than 160 individuals and directing 90 individuals into recovery. SOU now provides 7-day coverage over the day and first-half shifts, providing ongoing coverage from early morning until late in the evening. The SOU team is also being supplemented by officers from the surrounding districts.

A more expansive deployment of the NEST strategy in designated impact zones will continue to be enforcement and engagement focused. The BPD will supplement dedicated SOU deployments by expanding training in the NEST strategy for officers in districts throughout Boston, ensuring more consistent, neighborhood-based application of NEST/CRT practices across the city, fostering sustained community engagement, trust, and improved public safety and quality of life outcomes.

6. *BPD will ensure that policing is nimble, responsive to emerging areas of concern and neighborhood feedback, recognizing that needs may shift over time in reaction to policing and diversion.*

CRT/NEST are mobile and citywide. To ensure that active policing and enforcement is responsive to shifts in patterns of congregation and active drug use, BPD/SOU/NEST will maintain communication with the Bureau of Field Services and impacted districts. Residents and business owners regularly report areas of concern to BPD/CRT and these reports will be continuously reviewed to ensure that the City's diversion strategy is deployed consistently and based on community feedback across all neighborhoods.

Strategic Updates led by the Boston Public Health Commission:

The [Boston Public Health Commission](#) plays a key role addressing public health and quality of life across the City by providing low-threshold shelter and housing pathways, harm reduction services, and recovery services. The BPHC PAATHS program places an average of 33 individuals per week on treatment pathways (and provides transportation). BPHC Outreach and AHOPE refer hundreds of individuals to treatment pathways each year. These pathways will continue. In 2025, nearly 400 people stayed in BPHC-run or funded low-threshold sites, with nearly 30% moving to permanent housing. BPHC also operates the city's two largest shelters taking in about 500 adults per night, providing triage services for all guests, and clinical and stabilizing services to guests indoors. BPHC Homeless Services Bureau placed 112 people with substance use disorder (SUD) in permanent housing and connected 111 guests with recovery services.. The BPHC Homeless Services Bureau reunited 288 people with family and friends or community of origin in 2025.

Through these and other activities, including 7 days-per-week syringe clean-up and 311 response, described below, BPHC actively supports the City's goals to end outdoor substance use, advance quality of life in all Boston neighborhoods, and navigate individuals into stabilizing pathways, including recovery programs, and housing. In addition to continuing this work in 2026, the following activities highlight BPHC's role related to new recovery pathways, capacity building related to post deflection and syringe clean-up:

7. *Support CRT in drafting post-diversion/deflection practices*

BPHC will provide support to CRT in drafting policies for a post-diversion, post-deflection strategy based on engagement with providers to address communication needs when an individual enters the deflection process. The goal of written policies and practices will be to enhance CRT's diversion model with BPD to ensure best outcomes for individuals and the community.

8. *BPHC will support development of a post deflection system aligned with CRT's Diversion co-response model*

Recognizing that individuals engaged in substance use have a broad range of behavioral health, medical, and service needs, BPHC will work to enhance the CRT-led diversion strategy by partnering with clinical providers to develop a system that will expand the treatment and stabilization services offered to individuals. This post deflection system will advance the city goals of ending outdoor substance use in City neighborhoods while embracing the full continuum of care, including medication for addiction treatment.

9. *BPHC will assume management the provider High Utilizer Table to engage providers in serving individuals*

Starting in the fall of 2025, City leaders convened a new weekly Table, modeled on successful BPD Hub tables, which brought together substance use, housing, and healthcare providers, as well as state officials, to work through by-name lists and connect individuals with treatment and clinical support. Over the past seven months, the Table has successfully engaged with 27 individuals, with 15 of those cases successfully closed. The Table served as a means of reconnecting individuals in need of complex clinical case management to our provider partners.

Moving forward, BPHC will manage the High Utilizer Table to both support stabilization pathways and be a resource for the post-diversion/deflection system. BPHC will continue to draw on BPD's expertise and facilitation support with Hubs.

10. *BPHC will formalize expanded syringe removal and 311 response*

BPHC is formalizing the pilot schedule, launched in September 2025, which expanded the BPHC mobile outreach and syringe clean-up to 5:00 am-11:00 pm weekdays (18 hours per day), as well as 13-hour shifts on weekends, to respond to 311 requests including sharps pick-ups, and proactive syringe sweeps, and transports to services and shelter. BPHC will continue to support Back2Work, a 25-person team of people in early recovery employed by the Newmarket Business Improvement District, who pick up syringes throughout Newmarket, South End, Andrew Square, and Nubian Square neighborhoods.