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Contact:

Press@legal-aid.org

*****FOR IMMEDIATE RELEASE*****

Statement on the Death of Legal Aid Client Vincent Thoms in NYPD Custody

(NEW YORK, NY) — The Legal Aid Society issued the following statement on the death of Vincent Thoms, who died yesterday while in New York City Police Department (NYPD) custody at Manhattan Central Booking while waiting to be arraigned on a petty larceny charge:

“We are heartbroken to learn of the death of Vincent Thoms, who died yesterday in NYPD custody while waiting to be arraigned on allegations that he stole [incense](#) from a CVS — a low-level shoplifting charge. He spent his final moments languishing in a jail cell. Mr. Thoms joins at least nine New Yorkers who died in NYPD custody last year, including [Christopher Nieves](#), [Musa Cetin](#), [Saniyah Cheatham](#), [Soso Ramishvili](#), and others.

“The Legal Aid Society calls on the Mamdani Administration, the City Council, prosecutors, and all actors within the criminal legal system to adopt the reforms outlined in our 10-point plan unveiled last year — from ending broken-windows policing to ensuring independent oversight and access to lifesaving medical care. No one should lose their life while they are detained in NYPD custody.”

Background

Last September, The Legal Aid Society, Brooklyn Defender Services, The Bronx Defenders, New York County Defender Services, the Neighborhood Defender Service of Harlem, elected officials, local community groups, and impacted New Yorkers rallied on the steps of City Hall to announce a 10-point plan to address the recent deaths in NYPD custody.

[At least nine people](#) lost their lives in NYPD custody last year alone — deaths that are currently being [probed](#) by the New York City Department of Investigation. THE CITY [reported](#) last September that a combined 40 New Yorkers died in NYPD custody in 2023 and 2024.

DEMANDS TO ADDRESS CRISIS OF IN-CUSTODY NYPD DEATHS

1. Recognize the crisis of in-custody deaths and end broken windows policing

The plan calls for ending “quality of life/broken windows” policing, which the NYPD has expanded through [“Q-Teams.”](#) This approach targets poverty and untreated behavioral health needs, undermining both safety and public health. Instead, the City must eliminate waitlists and backlogs for mental health, substance use, housing, and food support services. The budget should continue investing in the [“Crisis to Care”](#) platform advanced by the Progressive Caucus. The City Council should use its oversight power to question Commissioner Tisch on the escalation of low-level arrests, which have led to unnecessary New Yorker deaths in the past six months.

2. Demand NYPD cease the illegal in-custody arrests of low-level offenses

The City Council must question the NYPD's overuse of custodial arrests instead of issuing appearance tickets, as required by law. In 2025 alone, [at least nine New Yorkers have died](#) in NYPD custody — three while awaiting arraignment on low-level charges. The NYPD routinely violates CPL §150.20, which mandates appearance tickets for most minor offenses. These unlawful arrests are increasing, pushing people with medical and mental health needs into jails unequipped to provide proper care.

3. Request City Council inspections of NYPD central booking

City Council members must use their oversight powers to visit NYPD central booking locations to experience, first hand, the squalid and unsafe conditions that New Yorkers are detained in 24 hours a day and the lack of coordination between medical staff in central booking and requests for medical attention.

4. Create independent EMS staffing in courthouses

The City should station independent EMS workers — not under NYPD authority — in every arraignment courtroom and courthouse during all open hours (9 a.m.–1 a.m.), with emergency personnel also available for people brought from Rikers. This would supplement the 24/7 [Enhanced Pre-Arrestment Screening Unit](#) (EPASU) staff in central booking, whose screenings depend on the NYPD bringing people to them and have not prevented deaths in custody. EMS must be readily available in central booking and arraignments, and the City Council should expand EPASU duties to include evaluating all people in custody and responding to medical needs — whether self-reported, attorney-requested, or officer-observed.

5. Engage in oversight on suicide prevention and mental health standards

Serious inquiry is needed into the NYPD's failure to implement measures to prevent suicides in its precincts. This should include whether officers are trained in, and consistently applying, [mental health minimum standards](#). The review must also examine whether existing patrol guide standards for people in custody who require immediate medical or psychiatric care are being ignored — or are simply inadequate to prevent crises from escalating into death.

6. Empower automatic CCRB investigations of in-custody deaths

The City Council should require the Civilian Complaint Review Board (CCRB) to automatically initiate independent investigations into every NYPD in-custody death. CCRB must be granted direct access to NYPD records and databases, alongside the Force Investigation Division (FID), to ensure timely and effective investigations. The City Council should also guarantee that CCRB is adequately staffed and resourced to meet this mandate.

FID investigations lack transparency and, in public defenders' experience, are neither thorough nor timely. For example, in the case of [Allan Feliz](#), FID kept its investigation open for more than two years, delaying CCRB's review past the 18-month deadline for most disciplinary charges. FID should not be the primary investigative body for the public or for families of people who die in custody.

7. Demand DOI-OIG systemic investigation

The plan calls on the City Council to issue a formal “must-investigate” directive to the Office of the Inspector General for the NYPD (DOI-OIG), requiring an investigation into fatal deficiencies in NYPD policies, practices, and procedures, including FID investigations of in-custody deaths. DOI-OIG should publish its findings and recommendations to prevent future deaths.

This inquiry must also address NYPD's failure to implement suicide-prevention measures in its precincts and assess whether officers are trained on, and following, minimum mental health standards. For example, patrol guide provision PG 210-04 requires immediate medical or psychiatric care for people in custody — standards that should always be applied.

The City Council must ensure DOI-OIG is adequately staffed and resourced to fulfill its mandate as an independent oversight body of NYPD patterns and practices.

8. Amend the NYPD Disciplinary Matrix

The NYPD must amend its Disciplinary Matrix to eliminate the separate category of “negligent failure to provide medical assistance.” Any failure to provide medical care to someone in custody — who is entirely under NYPD control — should be treated as serious misconduct, with severe presumptive penalties, including termination. Negligence can already be considered a mitigating factor within the Matrix; creating a separate category only weakens accountability. Just as NYPD action that causes death can trigger suspension and discipline, inaction that results in death must also lead to immediate suspension and full disciplinary proceedings.

9. Demand Changes from Prosecutors

The plan calls on all criminal legal system actors to take immediate steps to address their role in the crisis of in-custody deaths. Prosecutors’ disparate handling of violation and misdemeanor complaints, coupled with an excessive reliance on pre-arraignment detention instead of issuing appearance tickets as required by CPL 150.20, must be examined by the City Council. These practices contribute directly to the deadly conditions of pre-arraignment incarceration.

The policy of denying appearance tickets in petit larceny cases solely because of a potential order of protection should also be reformed. Prosecutors, working with the courts, should establish amnesty days to allow people to clear old bench warrants without fear, and should dismiss outstanding warrants.

10. Support emergency stop-gap medical request process

As an emergency stop-gap measure to address the City’s failure to care for people in its custody, NYC defenders will implement a formal written request form for medical attention, to be completed alongside any oral request to NYPD for emergency assistance. The defense attorney will sign the form and record the date and time of the request, the name and badge number of the officer receiving it, and the officer overseeing the holding area. Copies will be provided to the NYPD sergeant on duty, who must record receipt in the digital duty logs.

NYPD should then immediately investigate and report on the condition of the person in custody and determine what action will be taken. As required by the Patrol Guide, NYPD must also maintain records of these determinations and actions. This stop-gap measure does not replace the City’s obligation to provide adequate care for those it detains.

Read the full ten-point plan [here](#).

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