

**Joint Legislative Hearing on 2017-2018  
Executive Budget Proposal  
Mental Health & Hygiene  
February 6, 2017**

**Testimony for the  
Save Our Western New York Children's  
Psychiatric Center (WNYCPC)  
Coalition\***

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LLC on behalf of the Save our WNYCPC Coalition

Thank you for taking the time to hold this hearing today and review critical elements of the New York State Budget as it pertains to the provision of mental health and hygiene services.

Thank you Senator Young, Senator Ortt, and Assemblymember Gunther. My name is Lisa Wickens-Alteri, I am a nurse by background and the President of Capital Health Consulting here in Albany. I've worked with many of you in the WNY Delegation looking to come up with solutions to keep the children's psychiatric center separate from the Adult Buffalo Psychiatric Facility. The Save Our Western New York Children's Psychiatric Center (WNYCPC) Advocates have been working against the consolidation since 2013 when the Regional Centers of Excellence Plan was raised and they have successfully worked to secure a one-year stay for the last two budget seasons. We are thankful and appreciate the time you've spent on this issue, listening to parents, self-advocates, coalitions, mental health professionals and your constituents.

For those that may be unfamiliar, there has been a plan on the books for several years to consolidate the Western New York Children's Psychiatric Center (WNYCPC) with the adult Buffalo Psychiatric Center (BPC). BPC is a long-term inpatient facility for adults being treated for psychiatric illnesses on the Richardson Olmstead Complex in the City of Buffalo. This complex is flanked on the one side by a college campus of over 12,000 students, and on the other side by a dense mix of attendant bars, restaurants, shops and stores that are found next to urban colleges. By contrast, the children's facility is located on 72 acres of an idyllic suburban campus in West Seneca.

We have yet to encounter any educators or mental health professionals that believe this plan will improve the quality of care for children. While we understand the state of New York is under increasing pressure to save precious Medicaid dollars, we feel the potential consequences of this consolidation outweigh any alleged financial benefits that have been cited by OMH in years past. We have worked to come up with other solutions like public-private partnerships, specialized services for children & young adults, as well as hub and spoke models to offer alternative solutions to consolidating children with adults while remaining cost conscious.

The BPC campus has been carving out more space on the campus tailored to serve adults. In addition to the long-term inpatient adult psychiatric patients, many adult psychiatric patients living in the community come onto the grounds for outpatient counseling and treatment. The campus is home to the Stutzman Addiction Treatment Center, and just last month the Governor announced that the campus would now also treat adults with gambling addictions. While we agree these are important and necessary services, it reinforces the narrative that this is an adult-focused campus both clinically and otherwise.

More economic development is taking place on this campus as we speak. Currently an 88-room hotel, the *Hotel Henry Urban Resort and Conference Center*, has been announced for this campus, which will also include a 3,000 square foot Buffalo Architectural Center. This is subject to demolition permits, environmental reviews, etc that have yet to take place yet. 12 buildings will be demolished as part of the current plan

for the property which the children would be on the same campus during the time when this would take place.

The arguments associated with this consolidation continue to be based on specious cost-savings and not on quality of care or improved access for children. Children treated at WNYCPC are facing a litany of issues, including dealing with abuse at the hands of adults. Children must feel supported and safe, treated in a trauma-informed therapeutic environment of care that doesn't include interacting with or seeing adult. Talk of basic physical safety – which should be a given – misses the point. Traumatized children need to feel safe and secure. Every graduate from CPC we've spoken to and every family member has pointed to the warm, nurturing, therapeutic environment of the CPC campus itself, as being a key ingredient in recovery on this campus.

While OMH has argued the new facility will be state-of-the-art, the children will still be in the building where adults reside, on an adult campus, with a recreation building that must be shared in shifts with adults. The recreation building is a couple hundred yards away, which would necessitate the kids being walked under staff supervision or walked to the building surrounded by a fence– to keep them from eloping from the campus or wandering off. At no point has the state addressed all the additional staffing, security, and measures that will be in place to try to prevent co-mingling between patient populations. The plan that has been laid out for the facility is still a treatment center for children placed on an adult campus.

In every other disease space children are treated distinctly, because they have unique needs and are not just “little adults”. In a recent and apt example, on January 10<sup>th</sup> Albany Medical Center had their groundbreaking for a pediatric emergency department and their CEO James Barba was quoted, "it's just not possible to keep them completely isolated. This facility will not have adults in it. It will only be for kids and that is very, very special."

Additionally the chair of their Emergency Medicine Department, Dr. Christopher King was quoted: "Once this building is built, we'll have more and more people who specialize only in terms of taking care of children and so my belief is that the outcomes will be better," says Dr. Christopher King, Chairman of Albany Medical Center's Emergency Medicine Department.

That environment where the facility currently resides for children is a healing environment that the youth feel engenders hope. Hope, that they can heal and return home to their families, their friends, their neighborhoods, their schools – hope that they can go on to live the best possible life.

We've heard from members in our community that the outpatient services intended to stem the flow of inpatient visits are inadequately prepared and inflexible to meet the needs of this population. The Mobile Integration Team (MIT) is a primary example of this. Children are still ending up in the hospital, then CPC. Last week alone CPC had 7 new admissions. If there is a growing need for more and more effective community

supports – and there is – then the funds need to be allocated to meet that growing need. But not by taking away and closing the highest rated psychiatric facility in the state; not at the expense of the most severely traumatized, needy children.

We implore the legislature to continue to push back on this plan that we believe will save relatively few Medicaid dollars and put children at risk. WNYCPC currently serves 19 counties, and children haven't been served on the BPC campus in well over 40 years. While OMH may argue they have engaged in a lengthy stakeholder engagement process to take into account our concerns, OMH has yet to respond to any of the questions regarding safety, adequacy of staffing, cross-training, and risk management for the move.

Please stop this plan and work with us to find a more sustainable solution for children's mental health services in Western New York. Please work with the Governor for a permanent solution to insure that CPC stays where it is and where it serves these kids the best possible environment.