

Kenyani Davis, Community Health Center of Buffalo, INC. - Buffalo

It is with great honor that I submit this oral presentation regarding accessing mental health in Western New York (WNY) to the Attorney General.

As a primary care physician in WNY I am met with the following challenges regarding getting adequate services for my patients in mental health crisis:

- Linkage/access for acute care or to mitigate the need for hospitalization
- Coordinated medical care
- Complete medical records upon release from criminal justice system

Access:

- Most patients linked to primary care have some type of early warning signs. We are unable to report and link patients to treatment if they are not a harm to themselves or others
- Unable to get them to immediate access to psychiatric level medications without the system wanting them to go through counsellor first. This is an undue burden that negatively and mostly disproportionately effects people of color
- Primary Care lacks the financial resources to diagnosis and treat many of the mental health conditions that present to us. When financial funding comes down it is reserved for Article 31 or 32 sites however, we see majority of these patient before they need elevated services.
- Most patients are in need of brief inpatient recovery stents to prevent a full-blown mental breakdown however these do not exist. Most treatment is outpatient however my community lacks the social support to be successful in this task
- We recently had an inpatient psychiatric facility close which has now left us with 1 inpatient psychiatric facility. This can be a traumatic experience for some of our patients which causes

most of them to never seek help again thrusting them into a vicious cycle

#### Coordinated medical care:

- Due to strict mental health protection laws as primary care provider it is not uncommon for me to be treating a patient for years and never know their true diagnosis
- There is no coordinated system in WNY that allows us to share information bi-directionally between mental health facilities and primary care sites in a meaningful way.
- There is no communication between psychiatrist and primary care physician which often times leads to medication safety concerns.

#### Medical Records upon release from criminal Justice system:

- Often times we do not receive the completed medical record from the prison system. This results in delay of treatment and sometimes lifesaving work ups. There is even more of a delay when it comes to mental health diagnosis and treatment while in prison. Without knowing what medications or compliance of medications it is difficult to do proper follow up on side effects related to medications.