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The Psychological Association of Western New York (PAWNY) is a regional professional association, representing psychologists employed in a variety of roles including clinicians, researchers, and academicians. Our members believe that access to timely, effective, and safe psychiatric emergency treatment is critical and life saving for patients experiencing acute mental health symptoms such as suicidality, homicidality, and psychosis. Many PAWNY psychologists rely on referring patients to these services when mental health symptoms, and the potential risks to patients or the public, are so acute that patients cannot be treated in the lower-level care settings in which many of us work (i.e., outpatient mental health). In Western New York mental health patients and their families consistently report difficulty obtaining emergency psychiatric treatment. Patients accessing services at Erie County Medical Center's Comprehensive Psychiatric and Emergency Program (ECMC - CPEP), the main access point for emergency psychiatric treatment in Erie County, have reported extreme wait times, unsanitary conditions, inadequate facilities, a lack of privacy, low client-staff ratios, and a lack of effective interventions. This deficit of emergency psychiatric treatment has impacted psychologists who fear that sending patients with acute symptoms to CPEP may cause them to further decompensate. PAWNY is concerned about recent revelations of patients' adverse experiences with emergency psychiatric services, and we are committed to advocating for improvements.

Poor emergency psychiatric care at CPEP has been reported to numerous PAWNY psychologists by child and adult clients who have accessed CPEP services, has been documented by local news media, and reported on social media. Client and news article complaints have alleged conditions that would be in direct violation of The Rights of Inpatients in New York State Office of Mental Health Psychiatric Centers. For example, complaints have included reports that CPEP patients have been made to wait for days or even weeks in a mixed gender waiting room with insufficient beds and no private area to sleep. If accurate, this would violate patients' rights to reasonable privacy in sleeping, bathing and toileting areas. Additionally, although the law also gives patients the right to privacy and confidentiality when talking with those who examine or treat them, patients have reported being interviewed about their

psychiatric history in the CPEP waiting room in front of other patients. Patients have also described not receiving prescribed medications for multiple days and not having access to water to drink. Such conditions would clearly violate patients' rights to a balanced and nutritious diet and appropriate medical and dental care. Further, CPEP staff themselves have also raised serious concerns about limited staffing levels and safety.

PAWNY psychologists' ability to provide outpatient services in the community to patients who experience acute mental health symptoms has been adversely impacted by the lack of emergency psychiatric treatment. Some of our psychologists have treated patients who were a risk of harm to themselves or others and were discharged from CPEP without receiving intervention to establish safety. Psychologists have also reported treating patients who, after receiving emergency psychiatric treatment, experienced worsening symptoms. These experiences make patients who have a history of acute symptoms, and who are thus at risk for acute symptoms in the future, hesitant to disclose acute symptoms to their psychologists and resistant about seeking emergency psychiatric treatment when needed. This current state of affairs leaves patients, their families, and psychologists at risk, when patients are being cared for by loved ones and professionals who do not have the appropriate resources to treat acute symptoms.

PAWNY psychologists have formulated specific recommendations and believe that improvements in the availability and quality of psychiatric emergency treatment options in WNY is critical for patient outcomes, as well as public health and welfare. Patients deserve timely evaluation for admission. While patients are awaiting evaluation and when they are in treatment, ensuring conditions adhere to The Rights of Inpatients in New York State Office of Mental Health Psychiatric Centers is paramount. Once admitted, patients should not be discharged without necessary treatment and discharge planning. We believe that the current conditions are not a result of incompetence or lack of compassion among treatment providers at CPEP. Rather, these problems stem largely from a lack of funding and resources. To improve psychiatric emergency treatment in WNY the number of beds in psychiatric units for the area must increase. Staffing must increase both in inpatient units and CPEP to allow for safe and therapeutic treatment of patients admitted and waiting for evaluation. Resources must be allocated so that staff working in inpatient and CPEP units are properly trained to work with minors,

individuals with developmental disabilities, and trauma survivors who are particularly vulnerable in psychiatric settings.