

Erie County Medical Center looks to expanded psych program opportunities

By [Tracey Drury](#) – Reporter, Buffalo Business First
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Erie County Medical Center has long been recognized as the region's largest provider of inpatient mental health services. But that distinction extends statewide: Among hundreds of hospitals, ECMC comes in second only to New York City's Bellevue Hospital for total beds licensed for psychiatric use.

ECMC has nearly 600 beds, 160 of which are licensed for psychiatric use, compared to Bellevue's 339. But when it comes to overall psych services, the two hospitals frequently swap the No. 1 and No. 2 spots for the busiest psychiatric ICU divisions. Last year's expansion of ECMC's trauma and emergency department should allow for even more visits, including expanding access to its comprehensive psychiatric emergency program.

More expansion is planned for this year for the hospital's partial hospitalization program, and possibly a new intensive outpatient program.

"Our goal is to continue to focus on our inpatient services, but grow some of our outpatient services," said [Thomas Quatroche Jr.](#), CEO. "The goal is for people to manage their mental health and not end up in crisis."

The hospital has been growing its off-campus offerings for psychiatric services and behavioral health, including [consolidating outpatient programs](#) at a larger site downtown on Main Street; and a [move for its outpatient](#) chemical dependency program in a larger, more modern leased space on Sheridan Drive to replace a site it owned on Elmwood.

In early January, ECMC filed plans to establish an in-house [specialty pharmacy](#) and is now hiring for an assistant VP of behavioral health and community services to help manage growth in the department. Next up, the hospital hopes to establish a new intensive outpatient program, the region's first, to supplement its inpatient program and existing outpatient programs offered by community behavioral health providers.

An intensive outpatient programs (IOP) is generally used to target psychiatric mental health issues such as addiction or depression. The State Office of Mental Health has been working for more than three years to expand IOP access across the state, but programming remains limited.

Quatroche said ECMC's existing partial hospitalization program treats about 300 patients per year, while the IOP would treat another 80-90. That's small compared to the 5,000 individual patients seen annually in the psychiatric ED and the 2,500 who come through the inpatient psych program. But Quatroche said it's an important piece of the treatment puzzle.

The partial hospitalization program works like a day program, providing patients a treatment option for six hours a day. The IOP would provide additional options for patients who need a bit more help to avoid crisis situations, and potentially prevent a more costly inpatient hospital stay.

“Many times people will leave programs here but will have to wait for a period of time to get care, or they need frequent visits. They’re not in crisis, but in need of help,” he said.

Some community providers say the IOP program may be unnecessary. [Bruce Nisbet](#) is president & CEO at Spectrum Health & Human Services, a \$35 million nonprofit that runs one of three federally funded Certified Community Behavioral Health Clinics in the region. It also staffs a team through the state’s assertive community treatment program. Both programs, he said, provide high-level outpatient services, including home visits for clients in-need and 24-7 emergency support services.

“Hospitals are seeking desperately to find ways in which to expand the range of services they offer outside the walls of the hospital, and so this may be one of the areas they’re looking to explore. But if you’re looking at it from a need basis, I’m not sure this is the best place for them to put their resources,” Nisbet said.

On the other hand, Nesbit said, there’s plenty of need in the community, with an estimated 20% of the population who could benefit from mental health or chemical dependency services overall.

“That need has only increased with the pandemic, so I’m not anticipating that there will be any shortage of need all the way around, unfortunately,” he said.

In fiscal 2020, ECMC saw revenue drop to \$701 million from \$713 million the year prior, with losses tied primarily to the pause in elective surgery. The IOP program is not expected to be a money-maker, since reimbursement doesn’t cover the cost of services, Quatroche said. The hospital is seeking philanthropic support to help make it happen.

“We want to make sure we have people managing their behavioral health and they have the resources when they need them,” he said.