Portion of Testimony from a former CAU patient as presented by Brooke Coulter, RN

Dear Cambridge Health Alliance,

I understand you are considering closing the CAU down. I am writing on behalf of everyone at the CAU. I was a former patient there and trust me when I say this; this is indeed no hospital or random pysch unit. It is more than that. In a special way it is a family.

Kids go there for many reasons. It is a safe haven for the kids in danger and in pain. I walked through those doors as a suicidal mess and left with my head held high along with dignity ... dignity that I had never had. But I left with more than that: I left with tears in my eyes. The CAU brought me in when the world didn't seem to want me. I grew a relationship with every staff that to this day I miss terribly but treasure. It's the memory of the CAU that keeps me here, fighting this battle.

If you shut down this unit it would be a tragedy, because there are truly some awful places out there. The CAU brought kids in with no family, love or happiness and showed them what all of those three things meant. I was there for two months. And in that process I met some of the most amazing people on earth. The way they care for the mentally wounded left me in awe every time I closed my eyes to go to sleep. They made me smile when I was crying; they made me stand up when I was knocked down. They showed me what the world out there really had to offer.

I entered that unit with a certainty life had no meaning. How did I leave? I left knowing how big of a gift life is. I left knowing how to live each day to my fullest. I left loving my life. I left with hope for a better future. They guided me on my path to healing.

The CAU literally saves lives, like they saved mine. I can't imagine how many more lives they can save in the future. Please keep the CAU open.

Portion of Testimony from Gina Galarza, RN

The children in the CAU, as you know, come to us with some of the most challenging and difficult diagnoses that a child could ever face. These little ones – children as young as three years old – suffer from severe mental illnesses; autistic spectrum disorders; mood disorders; anxiety disorders; and bipolar disorder. And many of them are dealing with homicidal/suicidal thoughts, trauma, and abuse. So imagine, if you can, what it must be like for a patient — a patient like the one whose message I just read — to find a safe, caring, progressive place to receive care, likely on more than one occasion, only to be told that those services and the caregivers who provide them will soon disappear.

The only thing MORE terrifying is probably being the parent or guardian of a child who has found peace, compassion and best-in-class care at the CAU. Because now, without access to the CAU's services and specialized in-patient beds, their child will likely languish in an ER somewhere ... waiting for a bed to open up in an hospital that offers age-appropriate, quality mental health care.

But at the rate at which metal health services are being cut in the commonwealth, it is unlikely that a bed in a comparable environment will EVER open up for such a child.

The CAU is as exceptional as it is essential. It offers children age appropriate services in an age-specific environment. It lets parents and guardians stay on site with their children during their hospitalizations, a unique practice that pays dividends in terms of patient progress. And its use of the "collaborative problem solving" method has earned it a stellar reputation, with DMH referring other inpatient clinicians to the CAU's leadership over the years for guidance in applying the program to other units.

With this information in mind, and with the words of one CAU patient still with you, I'm asking CHA to reconsider this proposed closure and to NOT put profits ahead of their youngest patients.

Portion of Testimony from Kerrie McAllsiter, RN

I have been blessed to work here for as long as I have and, likewise, I have been blessed to have the chance to help so many children and families over the years. Some of them I have only interacted with for one stay; others, well, we see them with some regularity.

This has given me a unique perspective on what it means to be a child in crisis, as well as the family of a child in crisis. For some, coming to the CAU represents their first experience with the mental health system, while others may have had experiences already with other treatments and services. Either way, our patients generally cannot make it through a day at home or school without experiencing a significant amount of stress and trauma, and are in desperate need of services and support

The dedicated and skilled professionals who I work with on the CAU are entirely committed to making the lives of these children and families better, which is what I believe differentiates us from the masses. It is our *mission* to make sure they have a positive experience on the CAU. It is our *goal* to help them understand that acute treatment it is not so scary. And it is our *hope* that we can help them to realize that a diagnosis of a mental illness does not mean that all hope is lost.

My colleagues and I can attest that the beds on the CAU are nearly always full and that, often times, there are patients waiting to be admitted for care. If that isn't proof of the lack of services and beds available for children in crisis, then I don't know what is.

And now you – members of the DPH – need to decide if the state's already fragile mental health system can sustain yet another blow in the form of a 40 percent cut in beds and services here. If you believe the answer is yes, I have 19 years worth of families and a floor full of young patients who would beg to differ. Please do the right thing: Maintain the CAU here at Cambridge Hospital.

Portion of Testimony from Paula Robicheau, RN

One of the things I recall from my early years on the CAU is that we truly believed part of our role as staff was to effectively convey the mission of the hospital. We did this by translating it into everyday quality for the children and families who needed our help so they understood that everyone — counselors, nurses, doctors, clinicians, EVERYONE in the hospital— was dedicated to giving the highest quality of care possible to the most vulnerable children in the state. However, I feel that if the proposed reduction and subsequent closure move forward, the message to our very youngest patients will instead be this: "Sorry, someone else will have to take care of you, we can't."

For many of these young children, that is a message they have heard too many times already in their young lives: from families ... from foster families ... from schools ... and from various placement programs. By decreasing the overall services and beds available to these children — children who truly *are* in crisis — CHA is saying that these stressed and troubled children and their families are not our priority. As a result, these children, teens and their families will struggle MORE in order to get LESS.

I contend that closing almost half of the inpatient beds does not support a value-based mission. I believe it will harm everyone involved: children, their families, and the communities and schools that depend on the CAU's services. It will also harm children and families who are not yet in need but who next week, next month, or next year will find that they are. Under this plan we will never identify those children early on, we will not guide, support or treat them if they cannot get in our doors. So perhaps our existing patients and those future ones unknown to us right now will not even choose to engage in "struggling more for less." Perhaps, with or without their families, they will remain alone, probably unnoticed and certainly underserved.