

Chairperson: Duncan Shrout
Chairperson: Thomas Lutzow
Secretary: Dr. Robert Chayer
Senior Executive Assistant: Jodi Mapp, 257-5202

**JOINT MEETING
TASK FORCES ON LOCAL PUBLIC/PRIVATE PARTNERSHIP
AND NATIONAL ENTITY PARTNERSHIP**

December 7, 2017 - 11:30 A.M.
Milwaukee County Mental Health Complex
9455 West Watertown Plank Road

MINUTES

PRESENT: Duncan Shrout (LPPP), Jon Lehrmann (LPPP), Brenda Wesley (LPPP), Thomas Lutzow (NEP), Robert Chayer (NEP), Mary Neubauer (NEP), Michael Lappen, John Schneider, Jennifer Bergersen, Rose Kleman (Ad Hoc), and Alicia Modjeska (Ad Hoc)

EXCUSED: Kelly Davis (Ad Hoc)

SCHEDULED ITEMS:

1. **Welcome.**

Chairman Shrout opened the meeting by greeting members of the Joint Task Force and the audience.

2. **United Health Services/Buzzfeed Article.**

There was a recent Buzzfeed article published in early November regarding video of an altercation between United Health Services (UHS) staff and a youth at their Hillcrest facility in Birmingham, Alabama. Corporation Counsel reached out to UHS counsel, had a very detailed discussion, and informed them of the community concern surrounding the video. Corporation Counsel recommended representatives from UHS appear to address the article, video, and the community's concerns.

Karen Johnson, Senior Vice-President of Clinical Services for UHS conceded the events depicted in the video are disturbing. She stated the incident happened over two years ago and was handled by employee discipline and/or termination. The video was released to the media by a disgruntled employee. Ms. Johnson indicated UHS has a zero tolerance policy for inappropriate interactions between staff and patients. When the events were brought to their attention and because of the internal process in place, the matter was addressed immediately. She stated UHS' hiring and training practices are stellar. Employees are trained on very specific techniques. A failure to utilize this training correctly, requires coach and counsel and then the appropriate action is taken. An episode of restraint is considered a failure of the treatment program.

SCHEDULED ITEMS (CONTINUED):

	<p>Questions, comments, and discussion ensued at length.</p> <p>Ms. Johnson concluded by stating UHS is excited about being in Milwaukee. They continue to be focused on patient care and treating patients with the dignity and respect they deserve. These attributes are at the center of what UHS does. Creating a physical environment of staff, engagement, and including the patients' families, guardians, and other community care providers as part of the treatment team is critical. Their hope is to have the opportunity to immerse themselves into the community and to be seen as a local player.</p>
3.	<p>Behavioral Health Division's Communication Plan.</p> <p>Kane Communications conducted an employee survey in June to understand what employees are interested in learning and how they would like to hear about the Joint Task Force's decision making process. Since that time, employee specific communications have been sent out on a monthly basis. The plan is to continue to share information with employees about these highly anticipated decisions. Because of the importance of this process, key members of the media have been invited to listen to the conversation to share with the public as well. The goal is to continue the transparency by sharing information with both employees and the public.</p>
4.	<p>Psychiatric Crisis Services (PCS)/Observation Unit (OBS) Planning Update.</p> <p>BHD is in the process of evaluating the future state of Crisis Services as a whole. The goal is to redevelop crisis services that will provide a broader continuum and works in collaboration with all community partners to adequately address crisis. It is important that the service is appropriate, resourced, and is part of a broader continuum of crisis. BHD plays a significant role in serving individuals in crisis from mental health and/or substance abuse challenges in the community, but there are also opportunities for private sector hospitals to be stakeholders. The future model will be proactive and collaborative.</p> <p>The Joint Task Force took a break after Item 4 at 12:25 p.m. and reconvened at approximately 12:39 p.m. The roll was taken, and all Joint Task Force Members were present.</p>
5.	<p>Proposal Review Update.</p> <p>The final phase of the due diligence process was to request a written proposal from Universal Health Services (UHS). The Joint Task Force put together a Clinical Review Committee to review the proposal. The reason for the proposal was to make sure their intent was in writing in terms of the model and the services they would be providing. It was also to ensure UHS understood what was expected and had the deliverables documented. If this goes forward, the proposal document will be part of the contract's</p>

SCHEDULED ITEMS (CONTINUED):

	<p>scope of services. UHS was provided with approximately 133 questions to respond to, which they did. The Review Committee has scored each question using a pass/fail/need more information process. The next steps were reviewed. Future meetings of this group have been scheduled.</p>
6.	<p>Potential Negotiation Strategies for Acute Services Vendor.</p> <p>MOTION BY: (Schneider) Lay this Item Over to the Full Board Meeting on December 14, 2017. 9-0</p> <p>MOTION 2ND BY: (Lutzow)</p> <p>AYES: Shrout, Lehrmann, Wesley, Lutzow, Chayer, Neubauer, Lappen, Schneider, and Bergersen - 9</p> <p>NOES: 0</p>
7.	<p>2018 Joint Taskforce Meeting Dates.</p> <p>The next meeting of the Joint Task Force was announced as January 4, 2018. Chairman Shrout reminded Joint Task Force Members their charter will end once a recommendation is put forth to the full Board.</p>
8.	<p>Adjournment.</p> <p>MOTION BY: (Schneider) Adjourn. 9-0</p> <p>MOTION 2ND BY: (Lappen)</p> <p>AYES: Shrout, Lehrmann, Wesley, Lutzow, Chayer, Neubauer, Lappen, Schneider, and Bergersen - 9</p> <p>NOES: 0</p>
<p>This meeting was recorded. The aforementioned agenda items were not necessarily considered in agenda order. The official copy of these minutes, along with the audio recording of this meeting, is available on the Milwaukee County Behavioral Health Division/Mental Health Board web page.</p> <p>Length of meeting: 11:35 a.m. to 12:52 p.m.</p> <p>Adjourned,</p> <p>Jodi Mapp Senior Executive Assistant Milwaukee County Mental Health Board</p>	

SCHEDULED ITEMS (CONTINUED):

**The next meeting of the Milwaukee County Mental Health Board
Joint Task Force is Thursday, January 4, 2018, at 8:30 a.m., at the
Mental Health Complex
9455 West Watertown Plank Road
Conference Room 1045**

The December 7, 2017, meeting minutes of the Milwaukee County Mental Health Board
Joint Task Force on Local Public/Private Partnership and National Entity Partnership
are hereby approved.



Dr. Robert Chayer, Secretary
Milwaukee County Mental Health Board
Joint Task Force on Local/Private Partnership
and National Entity Partnership