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Owner: Jennifer Bergersen:
11005001-Chief Operations
Officer
Policy Area: Mental Health Board
References:

Mental Health Board Code of Ethics

Approved by the Mental Health Board on 10/26/17

APPLICATION

This Code of Ethics applies to all Milwaukee County Behavioral Health Division (BHD) employees, inclusive of medical, professional, and administrative staff.

POLICY

The purpose of this Ethics Code is to establish standards of conduct to assist BHD employees in furthering actions consistent with the best interest of government and the citizens of Milwaukee County. High moral and ethical standards by public officials¹ and employees are essential to good government. A code of ethics for the guidance of BHD employees will help avoid conflict between personal interests and public responsibilities, will improve standards of public service, and will promote and strengthen faith and confidence in the BHD.

¹ MHB members are subject to the Code of Ethics for Local Government Officials. See attached. MHB members are subject to removal for cause and for engaging in any activity that disqualifies an individual from board membership pursuant to Wis Stat §51.41(1d)(i)

MISSION

BHD, through early assessment and intervention, promotes hope for individuals and their families through innovative recovery programs in behavioral health, wellness, recovery, research and education.

CORE VALUES

BHD and its employees shall support and follow these core values:

- Person-Centered
- Culturally Intelligent
- Trauma-Informed
- Stage Matched Recovery Planning
- Systems and Services Integration
- Recovery-Oriented
- Accessible
- Welcoming

- Co-occurring Capable

RESPONSIBILITY TO CONSUMERS

BHD and its employees shall:

- Properly administer the mental health affairs of Milwaukee County.
- Promote decisions that benefit the public interest.
- Provide citizens with access to quality care that is appropriate for individual conditions and needs.
- Treat citizens with dignity and respect in all aspects of patient care. This includes involving patients, to the extent possible, in decisions regarding their own treatment.
- Uphold standards of professionalism and honesty in all interactions.
- Make every reasonable effort to assure that the relief of human suffering and safety of the people served are sustained or enhanced by the BHD services.
- Assure that the spiritual needs and cultural beliefs and practices of citizens served are respected and accommodated.
- Protect the confidentiality and privacy of the citizens served within the constraints of the law..
- Promote principles of recovery for the citizens served throughout the mental health delivery system.
- Utilize the BHD Ethics Committee, the Milwaukee County Ethics Board, and the Office of Corporation Counsel to address ethical dilemmas.
- Ensure patients/clients with longer length of stays have a right to perform or refuse to perform tasks in the hospital or community without prejudice to their care.

RESPONSIBILITY TO COLLEAGUES

BHD and its employees shall:

- Recognize and respect boundaries of colleagues.
- Accommodate the religious beliefs of employees to the extent possible.
- Maintain a respectful attitude towards all.

RESPONSIBILITY TO THE COMMUNITY

BHD and its employees shall:

- Promote the overall mental health status of the community.
- Accept a leadership role in enhancing public mental health and continuity of care by communicating and collaborating with other health care and social service agencies to improve availability and provision of mental health services.
- Participate in activities contributing to improvement of the community and the betterment of public health.

ADMISSION TRANSFER AND DISCHARGE PRACTICES

Each person obtaining services has the right to participate, consistent with the law, in transfer, admission, and discharge decisions, which will be based upon sound clinical evaluations.

BHD and its employees shall:

- Complete a clinically competent assessment for all persons seeking services.
- Treat individuals needing services regardless of ability to pay.
- Provide a coordinated admission process designed to meet the needs of persons seeking mental health services.

- Assure that all transfers within the BHD are clinically indicated and aimed at assuring treatment in the least restrictive, most therapeutic setting,
- Provide for safe, well-coordinated transfer or discharge following confirmation that the patient has been fully informed of the basis for the decision(s) and any alternative(s).

EDUCATIONAL OPPORTUNITIES

BHD and its employees shall:

Ensure that educational activities for consumers, families, students and employees will focus on the treatment of illness and the advancement of knowledge and the promotion of health, well-being and recovery.

BILLING PRACTICES²

BHD and its employees shall:

- Bill citizens served and third-party payors only for services actually provided and efficiently answer questions related to any matter, particularly cost of care.
- Strive to increase the utilization of women, minorities, and disabled persons, and other protected groups in all divisions of the BHD, including in the issuance of contracts.
- Evaluate decisions so that the best service or product is obtained at minimal cost without sacrificing quality and to ensure preservation and protection of county funds and property.

² See attached BHD Purchasing and Procurement Policy. In particular, see page 3 of that policy concerning employees responsible for submission of *Statements of Economic Interest* (those persons authorized to make purchases on behalf of BHD). See also attached related policy: *Procurement-Legal and Contractual Remedies*.

PROTECTION OF THE INTEGRITY OF CLINICAL DECISIONS OF THE LICENSED INDEPENDENT PRACTITIONER

BHD and its employees shall:

- Protect the integrity of clinical decision making regardless of how the organization compensates staff or shares financial risk.
- Ensure that clinical decisions are based on patient health care needs following well-designed standards of care.
- Provide services to meet the identified needs of patients and seek continuous improvement.
- Provide services to patients for whom the organization can safely care for within the facility and otherwise ensure proper . If we referral to a provider or facility that can meet those needs.
- Never turn away patients in need based on ability to pay or any other factor substantially unrelated to patient care.
- Evaluate business practices by the BHD administrative leadership and the Medical Staff's Medical Executive Committee to ensure that service delivery is based upon patient need, not financial incentives.
- Refer ethical conflicts related to patient care decisions to the BHD Ethics Committee,

CONFLICT OF INTEREST³

Generally, a conflict of interest exists when professionals are called upon to serve competing interests. Some apparent conflicts, such as transactions with a former employer or dealings with past business associates,

may be acceptable as long as disclosure of the conflict is made to all involved parties.

BHD and its employees shall:

- Be honest and exercise good faith in transactions.
- Act always for the benefit of the employer or patient and avoid any interest or activities, which appear to conflict with those interests.
- Avoid accepting gifts from consumers, their families and vendors except for nominal tokens of appreciation or unsolicited promotional items of nominal value for use at the work site.
- Address issues of conflict of interest with the treatment team when a BHD employee serves as a guardian or client advocate.

³ This section supplements the existing, separate Conflict of Interest policy. See attached BHD Conflict of Interest Policy, adopted by the MHB on December 15, 2015.

PRIVATE PRACTICE

- The BHD reaffirms the right of its professional staff to engage in the private practice of professional services, subject to the rules, conditions and definitions stated in Medical Staff Policy #3.1.9 "Private Practice."

PERSONAL INTEGRITY

BHD and its employees shall:

- Communicating honestly.
- Be compassionate and caring in all interactions.
- Perform work with competence and maintain competency through continuing education following County, State and Federal laws as well as relevant, discipline-specific ethical codes of conduct⁴.
- Respect the rights of all persons seeking mental health services.
- Maintain patient confidentiality within the limits of the law.
- Providing the same quality level of service for all.
- Report fraud, deception, abuse, or neglect.
- Never allow personal interests to impact conduct, judgment, or decisions.
- Never allow the interests of third-parties or family, friends, or other personal relationships to influence conduct, judgment, or decisions.

⁴ See attached Code of Conduct policy, adopted by the MHB on November 25, 2015.

Attachments:

[Attachment 1: Code of Ethics for Local Government Officials](#)

[Attachment 2A: BHD Purchasing and Procurement Policy](#)

[Attachment 2B: Procurement - Legal and Contractual Remedies](#)

[Attachment 2C: Statement of Economic Interest](#)

[Attachment 4: Code of Conduct](#)

Approval Signatures

Step Description	Approver	Date
Mental Health Board	Michael Lappen: 11008000-BHD Administrator	2/20/2018
	Michael Lappen: 11008000-BHD Administrator	2/20/2018
	Jennifer Bergersen: 11005001-Chief Operations Officer	2/6/2018

COPY

ATTACHMENT NO. 1

Milwaukee County Mental Health Board CODE OF ETHICS FOR LOCAL GOVERNMENT OFFICIALS

A MENTAL HEALTH BOARD (MHB) MEMBER SHOULD NOT:

ACT OFFICIALLY IN A MATTER IN WHICH PRIVATELY INTERESTED OR FOR AN ORGANIZATION WITH WHICH ASSOCIATED. Use his or her public position or office to obtain financial gain or anything of substantial value for the private benefit of himself or herself or his or her immediate family, or for an organization with which he or she is associated. [§ 19.59(1)(a), *Wisconsin Statutes*]

SOLICIT OR ACCEPT ANYTHING OF VALUE LIKELY TO INFLUENCE. Solicit or accept from any person, directly or indirectly, anything of value if it could reasonably be expected to influence the local public official's vote, official actions or judgment, or could reasonably be considered as a reward for any official action or inaction on the part of the local public official. (This does not prohibit a local public official from engaging in outside employment.) [§ 19.59(1)(b)]

USE PUBLIC POSITION TO OBTAIN UNLAWFUL BENEFITS. Directly, or by means of an agent, give, or offer or promise to give, or withhold, or offer or promise to withhold, his or her vote or influence, or promise to take or refrain from taking official action with respect to any proposed or pending matter in consideration of, or upon condition that, any other person make or refrain from making a political contribution, or provide or refrain from providing any service or other thing of value, to or for the benefit of a candidate, a political party, a person who is subject to a registration requirement under s.11.05 (registration of political groups, committees, and individuals), or any person making a communication that contains a reference to a clearly identified local public official holding an elective office or to a candidate for local public office. [§ 19.59(1)(br)]

USE PUBLIC POSITION FOR SUBSTANTIAL FINANCIAL INTEREST. Take any official action substantially affecting a matter in which the official, a member of his or her immediate family, or an organization with which the official is associated has a substantial financial interest. [§ 19.59(1)(c)1]

USE PUBLIC POSITION FOR SUBSTANTIAL BENEFIT. Use his or her office or position in a way that produces or assists in the production of a substantial benefit, direct or indirect, for the official, one or more members of the official's immediate family either separately or together, or an organization with which the official is associated. [§ 19.59(1)(c)2]

ACCEPT TRANSPORTATION, LODGING, FOOD, OR BEVERAGE EXCEPT AS SPECIFICALLY AUTHORIZED. Accept or retain transportation, lodging, meals, food or beverage except items and services offered for reasons unrelated to public office, as long as not furnished by a lobbyist or by a lobbyist's employer, or items provided by or to the MHB and primarily for the MHB's benefit. [§§ 19.59(3)(a) and 19.44(h)]

PENALTY FOR VIOLATION OF ETHICS CODE. Any person who violates this Ethics Code may be required to forfeit not more than \$1,000 for each violation, and additional penalties equal to the amount or value of any political contribution, service, or other thing of value wrongfully obtained, after commencement of an action by the district attorney or attorney general's office. [§§ 19.59(7) and (8)]

Current Status: *Active*

PolicyStat ID: 3994316



MILWAUKEE COUNTY
Behavioral
Health
Division

Date Issued: 2/6/2017
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Next Review: 11/12/2020
Owner: *Dennis Buesing; Contract Administrator, DHHS*
Policy Area: *Mental Health Board*
References:

BHD Purchasing and Procurement

Approved by the Mental Health Board on 8/24/17

Purpose:

The Milwaukee County Behavioral Health Division (BHD) is required to purchase various materials, services, and equipment to fulfill its mission of enhancing the quality of life for individuals who need support living healthy, independent and safe lives within our community.

Scope:

This Policy applies to all MCBHD Managers, directors, officers, administrators and purchasing coordinators..

Policy:

This procurement policy will ensure:

- that procurement transactions obtain in a cost-effective, responsible and responsive manner the acquisition of quality materials, services, and equipment required by the BHD;
- the prudent use of resources; BHD will avoid acquisition of unnecessary or duplicative items;
- that before a service is purchased or outsourced, an evaluation is made of in-house capabilities, and if it is determined that services need to be procured from outside, this policy will be used to guide such procurements;
- compliance with applicable federal law, OMB Uniform Guidance Standards, and any state regulations governing procurement;
- that contracts are only awarded to responsible contractors possessing the ability to perform successfully. Consideration will be given to contractor integrity, compliance with public policy, past performance and financial and technical resources;
- that the policy delineate guidelines for source selection, purchasing methodology, and approval of purchases and contracts at BHD;
- that quality and affordability are to be balanced during the decision making process. Quality will have a higher percentage weight with all procurement efforts.

Definitions:

Bid bond is issued as part of a supply bidding process by the contractor to the project owner, to attempt to guarantee that the winning bidder will undertake the contract under the terms at which they bid.

Conflict of Interest: A conflict of interest would arise when an employee, officer, or agent, any member of his or her immediate family, his or her partner, or an organization which employs or is about to employ any of the parties indicated herein, has a financial or other interest in or a tangible personal benefit from a firm considered for an award of contract.

BHD Directors: Are any staff member that is responsible for a program area, section or service area of MCBHD.

Fee for Service (FFS) Network: A network or group of preapproved providers providing services to certain populations of clients or program. Examples: Wraparound Milwaukee, Community Access to Recovery Services (CARS).

Ineligible Vendor or Contractor: is a vendor on the federal, state or county barred list.

Officer: A staff member in an executive level position within MCBHD, (Chief Clinical Officer, Chief Nursing Officer, Chief Financial Officer, etc)

Performance bond, also known as a contract bond, is a surety bond issued by an insurance company or a bank to guarantee satisfactory completion of a project by a contractor.

The Director: The Director of the Milwaukee County Department of Health and Human Services.

Procurement by noncompetitive proposal:

Sole Source Purchases: A sole source purchase is one wherein a needed item can only be purchased from a single source because there is only one source available. This situation makes it impossible to obtain competitive bids.

Single Source: Even though two or more suppliers can provide the required goods or services, the Administrator, or designee awards the contract to one supplier over the other(s) when public exigency or emergency will not permit a delay required for competition, or the Milwaukee County Mental Health Board (MHB) has expressly authorized a noncompetitive process, or after solicitation of a number of sources competition is deemed inadequate.

Group Purchasing Organizations (GPO): A group purchasing organization (GPO) is an entity that helps healthcare providers-such as hospitals, nursing homes and home health agencies-realize savings and efficiencies by aggregating purchasing volume and using that leverage to negotiate discounts with manufacturers, distributors and other vendors.

Micro-purchases: \$3,000 or less, do not require competition or a cost/price analysis, but must be distributed equably among qualified suppliers to the extent practicable). \$2,000 for construction awards subject to the Davis-Bacon Act.

Small purchase: \$3000-149,999, price and rate quotes must be obtained from an adequate number of qualified sources. Note: no cost/price analysis is required.

Formal Procurements may include the following:

Sealed bids; Using firm fixed price contract, require formal advertising, two or more bidders are willing and able to respond, and there is public opening of the bids.

Request for Information (RFI): An RFI process may be used to obtain information from potential suppliers or service providers to aid in the development of a request for bid/proposal. The document should be clearly

marked "Request for Information". A request for information is used to obtain information only. It is not a substitute for the request for bid/proposal process, but responsiveness to an RFI may be a condition to being allowed to bid, renew an existing contract, or submit a proposal when an RFP is released.

Competitive Proposals - Request for Proposal (RFP): Is used when sealed bids are not appropriate. A request for proposal is used to submit a solicitation in the form of a proposal for some type of commodity, service, asset, or property. It is typically used to get information about the proposed asset or service. This can include a history of the asset's ownership, financial information, information about the seller, or the product's availability. Request for proposals will follow the process rules set forth in the 2000 American Bar Association (ABA) Model Procurement Code and the August 2002 Regulations for State and Local Governments as approved by the MCMHB in 2014 and the Standards found in § 2 CFR 200.317-326, Uniform Guidance Procurement Standards. The RFP process will be used when: the total costs of services will exceed \$150,000 on an annual basis, the need for the service is anticipated four to six months in advance, there are federal mandates requiring a RFP process (e.g., § 2 CFR 200), or there is a need for a new service to be provided which MCBHD had not offered previously. The solicitation must include a clear and accurate description of the technical requirements for material, product or services, identify all of the requirements that offerors must fulfill and all other factors to be used in evaluating bids or proposals. Standard terms and conditions will be developed and attached to every RFP to include compliance with relevant federal, state and county procurement laws.

Ethics and Conflict of Interest:

Policy: It is declared that high moral and ethical standards among county public officials and county employees are essential to the conduct of free government; that the county believes that a code of ethics for the guidance of county public officials and county employees will help them avoid conflicts between their personal interests and their public responsibilities, will improve standards of public service and will promote and strengthen the faith and confidence of the people on this county in their county public officials and county employees. It is the intent of the county that in its operations the board shall protect to the fullest extent possible the rights of individuals affected. §9.01, Milwaukee County Code of General Ordinances (MCCGO)

Conflict of Interest:

Persons authorized to make purchases on behalf of MCBHD will be required to disclose any conflict of interests annually via the Statement of Economic Interest Form and Affidavit submitted to the Milwaukee county Ethics board pursuant to provisions of Chapter 9, Code of Ethics, MCCGO.

A conflict of interest would arise when an employee, officer, or agent, any member of his or her immediate family, his or her partner, or an organization which employs or is about to employ any of the parties indicated herein, has a financial or other interest in or a tangible personal benefit from a firm considered for an award of contract.

Contractual Personnel Services:

An exception would be retired of former BHD employees under contract for services related to their former job duties. When deemed in the best interest of BHD, it may contract with former employees immediately upon their separation from employment.

Additionally, pursuant to the provisions of Wis Stat. §59.79(8), the director may enter into a contract for a period not to exceed 2 years for the services of retired county employees, provided such services shall not replace or duplicate an existing office or position in the classified or unclassified service nor be considered an office or position under § 63.03 Wis. Stats. Former Milwaukee County employees may be hired as contractual employees by BHD subject to the requirements of said statute. If payment under the term of the contract will

equal or exceed \$100,000, MC MHB approval is required.

Prohibited Practices:

BHD may not enter into a contract with vendors or contractors that are on a federal, state or county list of ineligible entities.

In order to improve transparency and ensure objective contractor performance and eliminate unfair competitive advantage, providers/contractors who help draft or develop a grant application, contract specifications, requirement, statements of work, invitation for bids and/or requests for proposals, shall be excluded from competing for such procurement unless written reasoning is provided for allowing them to compete.

Gratuities: Officers, employees, and agents of BHD must neither solicit nor accept gratuities, favors, or anything of monetary value from contractors or parties to subcontracts, However, Milwaukee County may set standards for situations in which the financial interest is not substantial or the gift is an unsolicited item of nominal value. The standards of conduct must provide for disciplinary actions to be applied for violations of such standards by officers, employees, or agents of BHD.

Authority:

- A. Authority to make or approve purchases is granted to specific managerial or officer level staff only.
 - 1. This authority is determined by the MCBHD Administrator and the Milwaukee County Mental Health Board.
 - 2. An Authorized Signature Card (Attachment) will remain on file in the MCBHD Fiscal Department and forwarded to the Office of the Milwaukee County Comptroller
 - 3. No person is authorized to obligate MCBHD without verifying, in advance, sufficient funds to meet the purchase obligation.
- B. Before a contract or agreement may be executed:
 - 1. The department may not approve contracts for amounts in excess of available revenues.
 - 2. Funding must be verified by BHD Chief Financial Officer or designee, or encumbered through the Milwaukee County Comptroller's Office.
 - 3. Actual expenditure of BHD funds shall be reported in compliance with procedures developed by the department, and shall comply with standards guaranteeing quality of care.
 - 4. All approvals must be granted either electronically or in writing.
 - 5. Should BHD reimbursement from state or federal sources not be obtained or continued at a level sufficient to allow for payment for the quantity of services under contract, the obligations of each party shall be terminated. Reduction in reimbursement or payment from state or federal sources shall be sufficient basis for BHD to reduce the amount of payment to contractor.
- C. The Milwaukee County Board of Supervisors may not exercise approval or disapproval power over any contract relating to mental health or mental health institutions, programs, or services. This paragraph does not preclude The County Board of Supervisors from creating a central purchasing department for all county purchases that are not related to mental health.
- D. Pursuant to §52.42(10) Wis. Stats., any contract related to mental health with a value of at least \$100,000, to which Milwaukee County is a party may take effect only if the Milwaukee County Mental Health Board votes to approve, or does not vote to reject, the contract within 28 days after the contract is

signed or countersigned by The County Executive.

- E. The Milwaukee County Mental Health Board may exercise approval or disapproval power over contracts and purchases of the director that are for \$100,000 or more, except that the Milwaukee County Mental Health Board will not exercise approval or disapproval power over any contract or purchase of The Director that relates to community living arrangements, adult family homes, or foster homes and that was entered into pursuant to a contract under §46.031 (2g) Wis. Stats. However, any contract or agreement for community living arrangements with expenditures of \$100,000 or more will be brought before the Mental Health Board within ninety (90) days as an informational report only.
- F. Contracts that exceed the originally approved amount or fee-for-service agreements that exceed the originally estimated expenditure by twenty-five (25) percent or more will be brought before the Mental Health Board within ninety (90) days as informational reports only.
- G. The Milwaukee County Mental Health Board may appoint the BHD Administrator or his/her designee as agent to approve addenda or amendments to any contract after the contract's initial approval.
- H. Oversight of procurement for clinical services such as pharmaceuticals, diagnostics, treatment and procedures occurs by the Milwaukee County BHD Chief Medical Officer. Clinical based contracts; pharmacy food services, laboratory, and radiology must also receive approval from the MCBHD Medical Executive Committee.
- I. The table below outlines who may approve requisitions or purchases and sign contracts, legally binding agreements, business ventures and other agreements with external parties that obligate MCBHD. (including Memoranda of Understanding)
- J. Oversight of procurement for clinical services such as pharmaceuticals, diagnostics and procedures occurs by MCBHD Chief Medical Officer. Clinical based contracts; pharmacy, food services, laboratory, and radiology must also receive approval from the MCBHD Medical Executive Committee.

BHD Contract Spending Authority

Title level of Purchase Initiator	Spending Authority (budgeted)	County Approvals *
Manager	Not to exceed \$5000	x
BHD Directors	Not to exceed \$10,000	x
Officers	Not to exceed \$100,000	x
Administrator	Not to exceed \$100,000	x
BHD Mental Health Board	Over \$100,000	x

* Required County approvals include: BHD Administrator, Director of DHHS, Risk Manager, Corporation Counsel, Office of MC Comptroller, Community Business Development Program, and Milwaukee County Executive.

Purchasing Methods:

- A. Purchasing of products and services is accomplished through a variety of processes, which are designed to address the differences in complexity, value, risk and transaction volumes associated with MCBHD

purchasing needs.

1. **Milwaukee County Procurement Division:** This method is used for purchases where a County wide contract exists or when a standard bidding process is desired. This includes:
 - a. Price agreements for a set cost for a specific time-frame
 - b. Purchase Orders for one time purchases under \$2000
 - c. Purchase Requisitions for one time purchases greater than \$2000
 - i. Follow Milwaukee County Procurement Department process for competitive bidding
 - ii. Require an additional electronic approval from the Office of the MComptroller
2. **Purchasing Card:** Used for non contract, local and online spending.
 - a. Includes travel
 - b. Maximum transaction value of \$2000 to \$3000 depending on BHD department
 - c. Transaction limits vary by department and individual card holder.
 - d. Purchases are reviewed and approved monthly by the manager of the department and Purchasing Card Coordinator.
3. **Milwaukee County Time and Materials (T & M) Contractors**
 - a. Milwaukee County Facilities Management (MCFM) vets and authorizes specific companies to be used for construction and repair projects by category without an additional formal RFP or Bidding process. MCBHD may utilize these companies as long as the quality and cost meets MCBHD standards. MCBHD may request Bids and formal RFP for construction and repair projects when MCBHD funds are used to finance these projects.
 - b. Contract periods are determined by MCFM.
 - c. BHD can purchase services from any authorized T & M contractor if the project price is less than \$25,000.
 - d. BHD obtains price quotes from multiple authorized T & M contractors for projects above \$25,000.
 - e. If there are no authorized T & M Contractors for the type of work needed, or when MCBHD will finance the project directly a competitive sourcing process using a minimum of 3 bids/quotes will be utilized when practical.
 - i. Any contractor may participate in this process, irrespective of current T & M status.
 - ii. Proposals submitted by contractors who have lost T & M status prior to the end of the contract period for cause may be rejected at MCBHD's discretion.

Competitive Sourcing

- A. **Informal Proposals or Quotes - Small Purchase:** A competitive Small Purchase Sourcing Process may be used where the value and or nature of the product or service is between \$3,000 - \$149,999, and the product or service can be obtained from more than one source.
 1. MCBHD encourages participation in the competitive sourcing process by as many qualified suppliers as possible.
 2. Efforts are made to obtain a minimum of three (3) proposals or price quotes verbally, by email or by

letter.

3. Less than three proposals may be acceptable given the following limitations:
 - a. time constraints,
 - b. availability of qualified suppliers able to meet the specifications and
 - c. the opportunity for significant cost savings.
 4. All proposals or quotations received will be evaluated on the basis of quality, service, compliance to specifications and price.
 5. Awards will be made in the best interest of MCBHD.
 6. Any or all proposals or quotations received may be rejected at MCBHD's discretion.
- B. **Formal Sealed Bids** are used where the value of the product or service is equal to, or greater than, \$150,000.
1. MCBHD will request three (3) written bids when practical.
 2. All proposals and quotations will be evaluated on the basis of quality, service, compliance to specifications and price.
 3. Awards will be made in the best interest of MCBHD.
 4. Approval by the Mental Health Board is required.
- C. **Formal written Requests For Proposal (RFP)** are used when sealed bids are not appropriate for sourcing projects over \$150,000 where a value determination is necessary and clear specifications are available for comparative products or services.
1. Each RFP clearly defines a set of criteria to be used to evaluate the proposals.
 - a. The form and function of what will be provided is an essential part of the evaluation.
 - b. A weighted value is assigned to each criteria.
 2. Proposals must be submitted in such form and content as required by the RFP.
 - a. Items identified as proprietary information will be considered confidential. Pricing will remain confidential during the evaluation period and will become a matter of public record once an award recommendation is made;
 - b. MCBHD does reserve the right to benchmark all pricing through contracted 3rd party resources
 - c. Pricing may be used for analysis of specific endpoints.
 3. After proposals are received and evaluated, the contract(s) is/are awarded to the supplier(s) presenting the best combination of quality of service, price, delivery, compliance to specifications, capacity to perform.
 4. The Evaluation Panel will consist of a minimum of 3 members if more than one proposal is received.
 - a. Panel members can be employees of MCBHD
 - b. Outside panel members may be selected from various sources such as
 - i. Community or Professional expert in the field or subject of the RFP
 - ii. Representatives of community councils and/or advocacy organizations.
 - c. Identification of the panel members will be kept confidential throughout the RFP process.

- d. Results of the evaluation may be disclosed in aggregate and will not identify the specific scoring by any panel member.
- D. **Group Purchasing Organizations (GPO) - and Purchasing Consortiums-**BHD uses GPO pricing and supplies when deemed appropriate.
- E. **Municipal Contracts and Purchases** - BHD may utilize existing municipal and/or state contracts on the [State of Wisconsin VendorNet](#) list without any additional competitive process. Contracts negotiated or entered into by other county departments on behalf of BHD, (e.g., Procurement Division purchases under Chapter 32, MCCMO, Information Management Services Division, etc.) will be presented to the MC MHB as informational only reports.

Exceptions to Competitive Sourcing

There are circumstances when competitive sourcing is not required or practical. Examples of these situations are;

- A. Emergency situations endangering the health and safety of patients, staff and/or visitors
- B. Purchases that meet Non-Competitive- Sole Source requirements
- C. Requisitions for products or services less than \$3,000
- D. **Fee for Service Provider Networks:** FFS networks have been successfully deployed within BHD and DHHS overall for many years. Networks were created to address the need to allow for client choice in the selection of providers by employing service agreements that cover multiple years to maintain continuity of treatment. A service delivery model called Provider Services Networks evolved and matured within the healthcare industry which balance service demand, adequate client choice and optimal network size. Expansion of such networks may occur at any time to accommodate service demand increases, address the need for new services, or accommodate changes in client choice and allows new service providers to be brought in quickly to respond to shifting needs. Other benefits are the ability to leverage network volume to negotiate competitive service rates and implement a prior authorization framework which provides better control of projected spending by networks. In some cases, providers are state licensed residential service providers for whom demand can change quickly and capacity needs to remain flexible due to court ordered placements and other external forces. Because of fluctuating demand, the need to respond quickly to changing conditions and the inability to guaranty referrals, fixed amount contracts are not practical and a competitive RFP process is not normally used. FFS agreements as opposed to fixed-amount contracts work best when there exists large amounts of historical data on which to base service rates per unit of service. New providers are added when service demand necessitates additional capacity. Some services may be let for competitive proposal when a large population of providers exists, but total volume of service authorizations may limit the number of providers to be included in a network. When networks are opened to new providers, additions to networks are based on eligibility criteria set forth by the program administering the network and open and transparent outreach efforts are made to solicit applications from prospective providers for a particular service based on the capacity needs of the respective BHD programs.

Non-Competitive (Sole Source or Single Source) Procurement:

- A. Instances when Sole Source or Single Source purchasing may be applicable include the following:
 - 1. Property or services can be obtained only from a specific supplier (ie., real estate; one of a kind items, warranties or support agreements, etc)

2. Competitive sourcing is precluded because of the existence of patents, copyrights, secret processes, control of raw materials by suppliers or similar circumstances
3. Procurement of electric power or energy, gas, water or other utility services where it would not be practical or feasible to allow other suppliers to provide such services
4. Procurement of support services in connection with the assembly, installation or servicing of equipment or software of a highly technical or specialized nature.
5. Procurement of parts or components to be used as replacements in support of equipment manufactured by a particular supplier
6. Procurement involving construction where a contractor is already at work on the site and it would not be practical to engage another contractor.
7. Procurement where only a single supplier in a market is licensed or authorized to service or sell a specific product line.
8. Procurement of compatible additions to existing equipment where a different manufacturer's equipment would be impractical for the specific need.
9. The supplier or products are specified and required by a funding agency of a grant, or State/Federal contract.
10. Sole Source agreements with Physicians, Prescribers, Psychiatrists, Affiliation and Residency agreement and contracts for temporary medical providers and nurses in connection with the Behavioral Health Hospital.

B. Documentation;

1. Justification explaining the exceptional circumstances of the purchase must show that an equitable evaluation has been made and that rejection of alternative suppliers or solutions is based on objective and relevant criteria.
2. Special Review and Signature approvals are required for all Sole Source and Single Source purchases. If a purchase contract is in excess of \$99,999, justification of the sole source procurement must be presented to the MCMHB for review and approval.

Contracting Process:

- A. The MCBHD Contract Management Department is responsible for the contracting process, which includes contract execution, compliance monitoring, coordination of sourcing, payment, retention and closeout of all contracts. Contract rates will be determined in collaboration with the fiscal department.
- B. In coordination with Contract Management, program directors under the direction of the MCBHD Administrator and its Chief Medical Officer is responsible for network development.
- C. All contractors, vendors and providers will be encouraged to hire minorities, individuals with disabilities and use Disadvantage Business Enterprises (DBE) or other Targeted Business Enterprises (TBE).
- D. Standardized RFP templates and processes are utilized where possible.
- E. Standardized contract templates approved by MC Corporation Counsel and standardized contracting processes and approvals are utilized for all contracts where possible.

Protest Resolution process

Refer to Procurement Procedure, Milwaukee County BHD, Article No. 1, BHD Legal and Contractual

Emergency Purchases:

- A. In case of an emergency due to an accident or other unforeseen incident or condition which affects property or other interests of MCBHD, or threatens the life, health or safety of persons and requires immediate action.
 - 1. The Administrator or his or her designee may authorize the procurement on other than a competitive basis.
 - 2. Known suppliers and/or MOU's in place will be considered.
- B. The basis for concluding that there was an emergency and the methods used to identify the selected contractor will be documented.

Court Ordered or Emergency Placements:

In case of an emergency or court ordered placement due to an urgent or unforeseen condition which affects the health, safety or wellbeing of service recipients or youth that requires immediate action.

- A. The administrator or his or her designee may authorize the procurement on other than a competitive basis.
- B. Known providers or court ordered placements, or MOU's in lieu of contracts will be considered.

Document Retention

- A. Purchasing documentation will be kept on file for 7 years after the contract ends or last payment, whichever is later.

Bonds Insurance Guarantees

- A. Bonding Requirements: Bonding may be required for construction/facility improvement contracts/ subcontracts exceeding the Simplified Acquisition Threshold or other contracts where appropriate to ensure that the funding agency's interest in the procurement is adequately protected.
- B. Insurance requirements for each contract will be determined by Milwaukee County Risk Management

Modification of Contracts

- A. Contracts that are modified or expanded to greater than the next highest value level listed in the MCBHD Spending Authority Table will be evaluated to determine if an additional competitive process is warranted.
- B. MCBHD purchasing agents will not create a contract at a lower level, with the intent of expanding at a later point to avoid compliance with the required competitive process for the aggregate value of the contract.

Authority to Resolve Disputes, Grievances and Breach of Contract:

Disputes between the MCBHD and a contractor/Provider which arise under or by virtue of a contract between

them for example; breach of contract, mistake, misrepresentation, poor quality, or other cause for contract modification or rescission.

- A. **Authority to Resolve Disputes.**- The BHD Contract Management Section in collaboration with operations and Quality Services have the authority to work to resolve Disputes.
- B. The processes for resolution of Disputes are outlined in the Compliance Audit, Performance Measures and Grievance procedures attached to all MCBHD Provider contracts.
- C. **Decision-** If the Disputes or grievance is not resolved by mutual agreement between Contract Management and provider, the provider can submit an appeal to the MCBHD Administrator who will follow the grievance procedure process and time line
- D. **Finality of Decision-** The decision rendered shall be final and conclusive, unless fraudulent, or the contractor commences to an action in court.
- E. **If Breach of Contract** results in termination of contract, appeal process as outlined in Article No. 1 BHD Legal and Contractual Remedies, will be followed by Contractor/Provider.

References:

1. The 2000 American Bar Association *Model Procurement Code for State and Local Governments*.
2. *2002 Model Procurement Regulations by State and Local Governments*
3. 2 Code of Federal Regulations (CFR) 200, *Uniform Guidance Procurement Standards*, § 200.317-326
4. Procurement Procedure, Milwaukee County BHD, Article No. 1, *BHD Legal and Contractual Remedies*
5. Chapter 9, Code of Ethics, Milwaukee County Code of General Ordinances.

Monitors:

Purchases are reviewed prior to approval by those listed in the MCBHD Contract Spending Authority Table. Additional reviews and/or audits may be conducted by BHD Contract Management as deemed appropriate. Annual independent audit reports by CPA firms licensed in the State of Wisconsin must be submitted to DHHS Contract Administration if mandated by federal or state regulations.

Attachments:

[Authorized Signature Card](#)

Approval Signatures

Step Description	Approver	Date
Mental Health Board	Michael Lappen: 11008000-BHD Administrator	11/13/2017
	Michael Lappen: 11008000-BHD Administrator	11/13/2017
	Dennis Buesing: Contract Administrator, DHHS	11/13/2017

STATEMENT OF ECONOMIC INTEREST

Milwaukee County Mental Health Board
c/o Behavioral Health Division
9455 W. Watertown Plank Road
Wauwatosa, WI 53226
Telephone: (414) 257-5202 * Fax: (414) 257-8018

CURRENT INFORMATION: All information given below must be current; that is, not prior to the 15th day of the month preceding the month this statement is prepared.

TYPE OR PRINT: Additional directions, definitions and other pertinent information are contained in the Instruction Sheet (yellow insert). Please read it carefully BEFORE completing the Statement. If more space is needed, please use additional sheets.

DATE PREPARED: _____
(Month) (Day) (Year)

NAME: _____
(Last) (First) (Middle Initial)

SPOUSE'S NAME:

(Last) (First) (Middle Initial)

POSITION SOUGHT/HELD w/ the MILWAUKEE COUNTY MENTAL HEALTH BOARD:

NAME AND ADDRESS OF PRESENT EMPLOYER AND POSITION HELD FOR WHICH YOU RECEIVE \$1,000 OR MORE OF INCOME:

NAME AND ADDRESS OF PRESENT EMPLOYER AND POSITION HELD FOR WHICH YOUR SPOUSE RECEIVES \$1,000 OR MORE OF INCOME:

ADDITIONAL SOURCE OF INCOME: LIST OTHER SOURCES OF INCOME FROM WHICH YOU OR YOUR FAMILY RECEIVED \$1,000 OR MORE OF INCOME:

1. OFFICES, DIRECTORSHIPS & POSITIONS

* In this section, "Organization" means any corporation, partnership, proprietorship, firm, enterprise, franchise, association trust, Board, Commission or other legal entity other than an individual or body politic.

IA: As of the date cited above, were you or your spouse an officer, partner, sole proprietor, director or trustee of any business or other organization? Yes No

IB: As of the date cited above, were you or your spouse an officer of or did you or your spouse hold a position with any organization doing business with Milwaukee County or receiving funds from Milwaukee County?
 Yes No

If you have answered no to both above items, please check here: **Proceed to Item #2**

If you have answered yes to either 1A or 1B above, identify each business or organization and position held:

Name of Business or Corporation	City & State	Position Held

2. SIGNIFICANT FIDUCIARY RELATIONSHIP

As of the date cited on the first page, did you or your spouse own or control any of the following directly or indirectly:

- A. At least ten (10) percent of outstanding stock of any business corporation; or
- B. Stock having a value of at least \$5,000; or
- C. An interest of at least ten (10) percent or \$5,000 of any business?

If no to all of the above items, please check here: Proceed to Item #3

If yes to any of the above items, please identify the business and the type of ownership:

**Note: You need not report the actual dollar values or number of shares, etc.

Business Entity	City & State of its principal office	Type of Ownership (e.g. Common Stock, Limited Partnership)

3. BOND, DEBENTURES & DEBT OBLIGATIONS

As of the date cited on the first page, did you or your spouse hold any bonds, debentures or debt obligations of a municipal corporation or other corporation in excess of \$5,000?

If no to all of the above items, please check here: Proceed to Item #4

If yes, please identify each issue and place a checkmark in the proper column below to indicate the value.

Issuer Name, City & State	Value Under \$50,000	Value Over \$50,000

4. CREDITORS

As of the date cited on the first page, did you or your spouse owe, separately or together with another person, to any creditor \$5,000 or more?

If no to all of the above items, please check here: Proceed to Item #5

If yes, please identify each issue and place a checkmark in the proper column below to indicate the value owed.

Creditor's Name, City & State	Value Under \$50,000	Value Over \$50,000

--	--	--

5. REAL PROPERTY

As of the date cited on the first page, did you or your spouse hold an interest valued at \$5,000 or more in real property other than your principal residence or other than property in which the pro rata share held is less than 10% of the outstanding shares?

**Report only on properties located in the counties of: Milwaukee, Ozaukee, Washington, Waukesha, and Racine.*

If not to all of the above items, please check here: Proceed to Item #6
 If yes, please identify the property and nature of interest held.

Location of Real Property (street/rural route address, fire number & municipality)	Value Under \$50,000	Value Over \$50,000

6. TRANSFER

As of two calendar years preceding the filing of this statement, have you or your spouse transferred to any member of your immediate family any significant fiduciary relationship (as defined in the instruction sheet) or any real property or any bonds, debentures or debt obligations of municipal corporation or other corporation which is in excess of \$5,000?

Business, Issuer, Real Property, Creditor	Address	Description of Interest

- **INCUMBENTS** now in elective public office and current County employees are to *SKIP* Item #8.
- **CANDIDATES** for elective public office are to *SKIP* Item #7.

7. GIFTS, HONORARIA, FEES, EXPENSES

List each individual and organization from which you and your spouse received a GIFT, HONORARIUM, FEE and EXPENSES during the preceding taxable year. For a full understanding of this reporting requirement, it is important that you read in its entirety.

7A: GIFTS including ENTERTAINMENT. A "gift" is the receipt of anything of value, which is furnished without valuable consideration. Do not include anything received which was made for a purpose unrelated to duties or responsibilities of the position of the official or employee. List all individuals and organization from which you received in the past year entertainment or gifts having a total value of \$50 or more, not including the value of food or beverage offered coincidentally with a talk or meeting related to the business of the Milwaukee County Mental

Health Board. Include tickets to sporting or theatrical events, golfing fees, prizes, samples of promotional items from sales representatives or as part of business promotions and similar items.

7B: HONORARIA, FEES AND EXPENSES FOR TALKS AND PUBLICATIONS RELATED TO PUBLIC OFFICE. List each individual or organization from which you or your spouse received, in the past year, lodging, transportation, money or other things having a total of \$50 or more, not including the value of food or beverage offered coincidentally with a talk or meeting where the subject matter of which was related to your duties or responsibilities as a member of the Milwaukee County Mental Health Board. You do not have to list information about a payment: (1) if you returned it within 30 days; (2) if you received it from the Milwaukee County Mental Health Board.

If you or your spouse has no reporting(s), please check here: Proceed to signature section.

If you or your spouse has reporting(s) for Item #7, please use the enclosed form titled for this purpose and submit with your Statement.

8. CANDIDATES ONLY for elective public office are to furnish the following information:

Name of present employer and position you hold:

(Employer)

(Position)

By signing this form, I certify that the information contained in this Statement of Economic Interests is true, correct and complete to the best of my knowledge, information and belief.

X

Signature of person filing Statement

Date of Signature

APPENDIX A

AFFIDAVIT

Please check the appropriate boxes below and sign this form in front of a valid Wisconsin Notary Public.

STATE OF WISCONSIN)
) SS.
MILWAUKEE COUNTY)

The undersigned, being duly sworn on oath, deposes and says that *he* / / *she* is a public official by membership on the Milwaukee County Mental Health Board; that *he* / *she* has read and understands and to the best of *his* / *her* knowledge and belief, *he* / *she* has complied with the provisions of Wis. Stat. §§ 19.59 and 19.44 relating to a Code of Ethics.

Signature of Affiant

Title of Affiant

Subscribed and sworn to before me
This _____ day of _____, 2015

Signature of Notary

My commission expires on _____

ATTACHMENT NO. 3

**MILWAUKEE COUNTY BEHAVIORAL HEALTH DIVISION
CONFLICT OF INTEREST POLICY**

Policy

- I. **Purpose:** The purpose of this policy is to safeguard the integrity of the Milwaukee County Behavioral Health Division (BHD) and its organized medical staff by fostering the proper and unbiased conduct of all business operations and medical staff activities. This policy also defines conflicts of interest that could affect the safety and quality of patient care, treatment, and services and how such conflicts of interest will be addressed.
- II. **Application of Policy:**
This policy is applicable to all members of the organized medical staff, and all persons employed by BHD¹. Medical staff members, and employees shall conduct their relationships in compliance with this policy to ensure that decisions are made for the best interests of the BHD.
- III. **Conflict of Interest:**
A conflict of interest exists when an individual to whom this policy applies, or any friend, relative, or business associates of such individual might directly or indirectly profit or benefit or reduce some detriment through the application of the position or knowledge of the individual. A conflict of interest also exists when there is a divergence between an individual's private interests and his/her professional obligations to the BHD, fellow medical staff members, patients, and employees, such that an independent observer might reasonably question whether the individual's actions or decisions are determined by potential or actual personal gain, financial, or otherwise. Medical staff members, and employees shall not enter into any transaction or utilize any position with the BHD to make a decision when a conflict of interest exists with respect to the transaction or decision.
- IV. **Disclosure:**
Any medical staff member, or employee shall promptly report in writing to the Administrator of the BHD any actual or contemplated transaction which appears to violate this policy. In addition, each member of the administrative staff, and Unit Manager shall annually complete a conflict of interest disclosure statement relating to this policy.
- V. **Consequences:**
Upon full disclosure of any real or potential conflict situation, if the Administrator of the BHD decides that the conflict will not adversely affect those interests, the situation may

¹ Milwaukee County Mental Health Board (MHB) members are subject to the Code of Ethics for Public Officials, Employees and Local Government Officials as stated in the Wisconsin Statutes, Chapter 19, as applicable. Effective, January 1, 2015, all MHB members became subject to the provisions of Wis. Stat. §19.59(3)(a) and (e) and §19.59(3) in particular, which require submission of statements of economic interest, disclosure of conflicts, and authority for the soliciting of advisory opinions, public and private, on ethics matters. MHB members are subject to removal for cause and for engaging in any activity that disqualifies an individual from board membership per Wis. Stat. §1.41(1d)(i).

continue. If the Administrator of the BHD decides there is adverse affect or the potential for such adverse affect exists, or if there is a failure to comply with this policy either through failure to disclose or otherwise, the Administrator of BHD may direct that the situation be discontinued or institute other appropriate action.

VI. Guidelines:

This statement is a broad policy on conflicts of interest. The Administrator of the BHD may, from time to time, promulgate additional policies and guidelines to be utilized in interpreting questions arising under this policy. Any additional policies and guidelines shall be available in the Administrator's office.

CONFLICT OF INTEREST GUIDELINES

This document contains guidelines for compliance with the Conflict of Interest Policy of the BHD.

I. Disclosure:

Each medical staff member, and employee of the BHD must promptly disclose in writing to the Administrator of the BHD any situation which poses a possible conflict of interest. The report shall contain a statement of all material facts as to the relationship or interest which creates the possible conflict of interest.

II. Determination:

The disclosure of any actual or potential conflict of interest will be considered by the BHD Administrator through a committee of 3 the BHD Administrator selects, which will determine whether the actual or potential conflict of interest will have an adverse effect on the BHD. The committee will cause notice to be given to the disclosing person, in writing, of the determination and whether the situation may be allowed to continue or should be terminated, and of any other action that will be taken by the committee or should be taken by the medical staff member, or employee. Approval of a transaction or decision will not be granted by the committee if the transaction or decision is not in the best interest of the BHD.

III. Conflicts of Interest:

A. Actual: Actual conflicts of interest exist when the following directives are violated.

1. Political Contributions - No BHD funds or assets shall be used, directly or indirectly, for political contributions. Likewise, nothing of value shall be given, offered, or promised to any government official by an individual acting as a representative of the BHD to enhance relations with that official or the government.
2. Questionable Payments - No bribe, payoff, kickback, or other payment for any purpose shall be made by or on behalf of the BHD, directly or indirectly, nor shall any such payment be accepted by any person to whom this policy applies. Social amenities, reasonable entertainment, and other courtesies within BHD policies

may be extended and accepted when the value of the item received or extended does not exceed \$50.00.

3. Sales and Purchases - All sales by the BHD shall be billed directly to the purchaser and no patient or customer shall be billed for any amount in excess of the actual selling prices of the goods or services. No part of any purchase price shall be rebated to a patient or customer. All payments made by the BHD shall be made by BHD check, draft, or other document transfer. No purchase of equipment, instruments, materials, or services for the BHD shall be made (or such decisions influenced) from private firms in which a medical staff member, employee, or immediate family member has a financial interest.
 4. The negotiation of any contract between the BHD and a private organization with which a medical staff member or employee, or immediate family member has a consulting or other significant relationship or stands to receive favorable treatment as a result of such influence shall not be entered.
 5. Accounts and Deposits - Unless otherwise approved by the MHB, all money paid to the BHD or paid by the BHD shall be deposited in or paid through accounts established by the BHD, in its name and for its use.
 6. Medical staff members' consulting or commercialization of technologies derived from research - While it is appropriate for medical staff members to be compensated for such activities, the individual's actions and/or decisions made in the course of his/her BHD activities shall not be determined or influenced by considerations of personal financial gain.
 7. Use of Position - No person to whom this policy is applicable shall use a position with the BHD for personal gain nor shall any such person disclose or misuse privileged information or utilize such information for personal gain.
 8. Personal Business - An employee shall not conduct personal business for gain on BHD time.
- B. Potential: Potential conflicts of interest exist when any person to whom the policy applies, or any friend, relative, or business associate of such person:
1. External Interests - Renders directive, managerial, or consultative services, or holds, directly or indirectly, a position in any outside concern from which the individual has reason to believe the BHD secures goods or services, or that provides goods or services competitive with the BHD.
 2. Investments - Holds directly or indirectly substantial investment (in excess of 5% ownership) in any outside concern from which the individual has reason to believe the BHD secures goods or services, or that provides goods or services competitive with the BHD.

3. Gifts, Gratuities, and Entertainment - Accepts gifts, entertainment, or other favors from any outside concern that does, or is seeking to do business with, or is a competitor of the BHD, under circumstances from which it might be inferred that such action was intended to influence or possibly would influence the individual in the performance of his/her duties. This does not include the acceptance of items or benefits of nominal or minor value that clearly result from respect or friendship and are not related to any particular transaction or activity of the BHD.

C. Not Applicable to this Policy:

Joint Employment with Company in Competition – Joint appointment to the BHD and another local hospital and/or private practice must be negotiated and approved at the time of employment and is not considered a conflict of interest under this policy.

CONFLICT OF INTEREST DISCLOSURE STATEMENT

Please answer this questionnaire by checking the appropriate box by each question. Have you, or any relative, friend, or business associate of yours directly or indirectly:

- 1. **Interests and Investments:** Acquired any interest in or received any type of payment or remuneration from any business that does business with or competes with the BHD? Yes No
- 2. **Gifts and Entertainment:** Received any gifts, entertainment or other thing of value from any business that does business with or competes with the BHD? Yes No
- 3. **Improper Activities:** Engaged in any activity or have any interest or arrangement that might appear to involve a conflict of interest with the BHD? Yes No
- 4. **Others:** Know of any person who is or gives the appearance of being in a position of conflict of interest with the BHD? Yes No

If any "Yes" box is checked, please explain in the space provided. Use additional sheets if necessary.

I have read the BHD's Conflict of Interest policy and Guidelines and agree to report, in writing, to the Administrator of the BHD, any situation which poses a possible conflict of interest.

Name

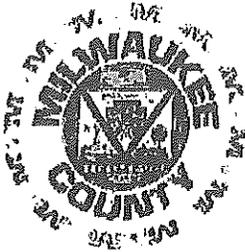
Date.

Position/Title

ATTACHMENT NO. 4

Current Status: Active

PolicyStat ID: 1989674



Behavioral Health Division

Date Issued: 11/25/2015
Last Approved Date: 11/25/2015
Last Revised Date: 11/25/2015
Next Review: 11/24/2018
Owner: Lynn Gram: 80043-Safety Officer
Policy Area: Division Administration
References:

Code of Conduct

Purpose:

This Code of Conduct ("Code") is a statement of the ideals and principles which govern personal and professional behaviors at the Milwaukee County Behavioral Health Division ("BHD"). Adherence to the ideals and principles stated in this Code advances the mission of the BHD and its commitment to the core values of respect, integrity, stewardship and excellence. All Covered Persons are expected to, at all times, adhere to the BHD's Core Values of:

- **Respect:** To respect the dignity of every person.
- **Integrity:** To be honest, fair and trustworthy.
- **Stewardship:** To manage resources responsibly.
- **Excellence:** To work at the highest level of performance, with a commitment to continuous improvement.

Consistent with these values, this policy sets forth the standards for acceptable, non-disruptive, and appropriate behaviors and communication, professionalism, and interpersonal relationships within the BHD. This policy is intended to supplement other BHD policies which outline responses to and management of unacceptable personal and professional conduct by Covered Persons.

Scope:

This Code applies to all "Covered Persons", which includes but is not limited to, Administrators, Hospital Staff, Medical Staff (psychiatrists, psychologists, nurses, certified nursing assistants, social workers, etc.), and members of the Milwaukee County Mental Health Board, and persons providing patient care or other services within or for the benefit of the BHD (such as students, contractors, and individuals with temporary clinic privileges), regardless of employer ("other Covered Persons").

Policy:

DECORUM AT MILWAUKEE COUNTY MENTAL HEALTH BOARD MEETINGS: Covered Persons, other Covered Persons and all others who may attend and/or participate at Governing Body meetings are entitled to the greatest measure of respect and courtesy. All Covered Persons and other Covered Persons must be ever mindful of the obligation to be temperate, courteous, attentive and patient so as to advance these ideals of conduct and to avoid offensive or discourteous remarks or verbal chastisement which are offensive in nature and detract from the dignity and decorum expected while conducting the public's business, and thereby

eventually degrade the atmosphere within the public meeting. All Covered Persons and other Covered Persons should bear in mind the need for scrupulous adherence to the rules of fair play and the necessity of being considerate and courteous to each other and to all others in attendance.

Definitions:

"Acceptable Behavior" means any reasonable conduct to advocate for patients, to recommend improvements in patient care, to participate in the operations, leadership or activities of the organization. Examples of acceptable behavior include, but are not limited to, the following:

- Criticism communicated in a reasonable manner and offered in good faith with the aim of improving patient care and safety;
- Encouraging clear communication;
- Actively upholding public confidence in County government;
- Maintaining a respectful attitude toward Covered Persons and other Covered Persons;
- Expressions of concern about a patient's care and safety;
- Expressions of dissatisfaction with policies through appropriate grievance channels or other civil non-personal means of communication;
- Use of cooperative approach to problem resolution;
- Constructive criticism conveyed in a respectful and professional manner, without blame or shame for adverse outcomes;
- Professional comments to any Covered Persons and other Covered Persons about patient care or safety provided by others;
- Active participation in the BHD and Organizational meetings (i.e., comments made during or resulting from such meetings will not be used as the basis for a complaint under this Code);
- Membership on other medical staffs; and
- Seeking legal advice or the initiation of legal action for cause.

Acceptable behavior is not subject to corrective action or discipline under this policy.

"Behaviors that Undermine a Culture of Safety" means any abusive conduct including sexual or other forms of harassment, or other forms of verbal or non-verbal conduct that harms or intimidates others to the extent that quality of care or patient safety could be compromised. Examples of such behavior include, but are not limited to, the following:

- Physically threatening language directed at anyone in the BHD including Covered Persons or other Covered Persons;
- Physical contact with another individual that is threatening or intimidating;
- Throwing instruments, charts or other things;
- Threats of violence or retribution;
- Sexual harassment; and,
- Other forms of harassment including, but not limited to, persistent inappropriate behavior and repeated threats of litigation.

Behaviors that undermine a culture of safety by a Covered Person is prohibited.

"Inappropriate Behavior" means conduct that is unwarranted and is reasonably interpreted to be demeaning or offensive. Persistent, repeated inappropriate behavior can become a form of harassment and thereby become disruptive, and subject to treatment as "Behaviors that Undermine a Culture of Safety." Examples of Inappropriate Behavior include, but are not limited to, the following:

- Belittling or berating statements;
- Name calling;
- Use of profanity or disrespectful language;
- Inappropriate comments written in the medical record;
- Eminent failure to respond to patient care needs or Staff requests;
- Personal sarcasm or cynicism;
- Deliberate lack of cooperation without good cause;
- Deliberate refusal to return phone calls, pages, or other messages concerning patient care or safety;
- Intentionally condescending language; and
- Intentionally degrading or demeaning comments regarding patients and their families, Covered Persons or other Covered Persons and/or the BHD, whether occurring within the BHD or in the community.

Inappropriate behavior by a Covered Person is strongly discouraged.

"Harassment" means conduct toward others based on their race, color, religion, creed, age, sex, gender, gender identity, sexual orientation, nationality or ethnicity, physical or mental disability, veteran status, genetic information, or any other basis protected by federal, state or local laws, which has the purpose or direct effect of unreasonably interfering with a person's work performance or which creates an offensive, intimidating or otherwise hostile work environment.

"Sexual harassment" means unwelcome sexual advances, requests for sexual favors, or verbal or physical activity through which submission to sexual advances is made an explicit or implicit condition of employment or future employment-related decisions; unwelcome conduct of a sexual nature which has the purpose or effect of unreasonably interfering with a person's work performance or which creates an offensive intimidating or otherwise hostile work environment.

Also refer to the BHD's Sexual Harassment Policy at <http://county.milwaukee.gov/SexualHarassmentPoll17546.htm>

Procedure:

Interventions should initially be non-adversarial in nature, if possible, with the focus on restoring trust, placing accountability on and rehabilitating the offending Covered Person and protecting patient care and safety. The BHD supports tiered, non-confrontational intervention strategies, starting with informal discussion of the matter with the appropriate supervisor. Further interventions can include an apology directly addressing the problem, a letter of admonition, addressing the issue through the human resource process or corrective action if the behavior is or becomes disruptive. [1]

[1] Members of the Milwaukee County Mental Health Board/Governing Body are subject to removal pursuant to Article III of its By-Laws and state statutes.

The use of summary suspension should be considered only where the Covered Person's Behavior Undermines a Culture of Safety and presents an imminent danger to the health of any individual. At any time rehabilitation may be recommended. If there is reason to believe a Behavior that Undermines a Culture of Safety is due to illness or impairment, the matter may be evaluated and managed confidentially according to established procedures of the BHD.

A. Covered Persons:

Complaints about a Covered Person regarding alleged inappropriate or Behaviors that Undermine a Culture of Safety should be in writing, signed and directed to the BHD Administrator or Medical Director ("Senior Leader(s)"), and include to the extent feasible:

1. The date(s), time(s) and location of the Inappropriate or Behaviors that Undermine a Culture of Safety;
2. A factual description of the Inappropriate or Behaviors that Undermine a Culture of Safety;
3. The circumstances which precipitated the incident;
4. The name and medical record number of any patient or patient's family member who was involved in or witnessed the incident;
5. The names of other witnesses to the incident;
6. The consequences, if any, of the Inappropriate or Behaviors that Undermine a Culture of Safety as it relates to patient care or safety, or the BHD personnel or operations; and
7. Any action taken to intervene in, or remedy, the incident, including the names of those intervening.

At the discretion of the Senior Leader(s), the duties here assigned to the Senior Leader(s) can, from time to time, be delegated to another elected member of the Covered Persons ("designee"). The complainant will be provided a written acknowledgement of the complaint. In all cases, the subject of the complaint shall be provided a copy of this Code of Conduct and a copy of the complaint in a timely fashion, as determined by the Senior Leader(s), but in no case more than 30 days from receipt of the complaint by the Senior Leader(s). The subject of the complaint will be notified that attempts to confront, intimidate, or otherwise retaliate against the complainant is a violation of this Code of Conduct and may result in corrective action. An ad hoc committee consisting of three (3) individuals selected by the Senior Leader(s) shall make such investigation as appropriate. In the circumstances which may include speaking to interview the complainant, any witnesses and the subject of the complaint. The subject of the complaint shall be provided an opportunity to respond in writing to the complaint.

The ad hoc committee will make a determination of the authenticity and severity of the complaint. The ad hoc committee shall dismiss any unfounded complaint and may dismiss any complaint if it is not possible to confirm its authenticity or severity, and will notify both the complainant and the subject of the complaint of the decision reached. If the ad hoc committee determines the complaint is well founded, the complainant and the subject of the complaint will be informed of the decision, and the complaint will be addressed as follows:

1. If this is the first incident of inappropriate behavior, the Senior Leader(s), shall discuss the matter with the offending Covered Person, and emphasize that the behavior is inappropriate and must cease. The offending Covered Person may be asked to apologize to the complainant. The approach during this initial intervention should be collegial and helpful.
2. Further isolated incidents that do not constitute persistent, repeated inappropriate behavior will be handled by providing the offending Covered Person with notification of each incident, and a reminder of the expectation the individual comply with this Code.
3. If the ad hoc committee determines the offending Covered Person has demonstrated persistent, repeated inappropriate behavior, constituting harassment (a form of Behavior that Undermines a Culture of Safety), or has engaged in Behaviors that Undermine a Culture of Safety on the first offense, a letter of admonition will be sent to the offending Covered Person, and, as appropriate, a rehabilitation action plan developed by the ad hoc committee, with the advice and counsel of the Senior Leader(s).
4. If, in spite of this admonition and intervention, Behaviors that Undermine a Culture of Safety recurs, the ad

hoc committee shall meet with and advise the offending Covered Person such behavior must immediately cease or corrective action will be initiated. (As noted previously in footnote 1, such procedures do not apply to the Governing Body.) This "final warning" shall be sent to the offending Covered Person in writing.

5. If after the "final warning" the Behaviors that Undermine a Culture of Safety recurs, corrective action (including suspension or termination of privileges) shall be initiated pursuant to the Senior Leader(s).

6. If a single incident of Behaviors that Undermine a Culture of Safety or repeated incidents of Behaviors that Undermine a Culture of Safety constitute an imminent danger to the health of an individual or individuals, the offending Covered Person may be summarily suspended as provided in the Milwaukee County BHD Employee Handbook.

7. If no corrective action is taken, a confidential memorandum summarizing the disposition of the complaint, along with copies of any written warnings, letters of apology, and written responses from the offending Covered Person, shall be retained in the Covered Person's file for two (2) years, and then must be expunged if no related action is taken or pending. Informal rehabilitation, a written apology, issuance of a warning, or a referral to the Health and Wellbeing Committee (or equivalent committee) will not constitute corrective action.

8. At any time during this procedure the Covered Person has a right to personally retain and be represented by legal counsel.

B. Other Covered Persons (e.g., persons providing patient care or other services within or for the benefit of the BHD such as Contractors:
Complaints about other Covered Persons regarding allegedly inappropriate or Behaviors that Undermine a Culture of Safety should be in writing, signed and directed to the Senior Leader(s) and include to the extent feasible:

- A. 1. The date(s), time(s) and location of the Inappropriate or Behaviors that Undermine a Culture of Safety;
2. A factual description of the Inappropriate or Behaviors that Undermine a Culture of Safety;
3. The circumstances which precipitated the incident;
4. The name and medical record number of any patient or patient's family member who was involved in or witnessed the incident;
5. The names of other witnesses to the incident;
6. The consequences, if any, of the Inappropriate or Behaviors that Undermine a Culture of Safety as it relates to patient care or safety, or the BHD personnel or operations; and
7. Any action taken to intervene in, or remedy, the incident, including the names of those intervening.

The complainant will be provided a written acknowledgement of the complaint. The individual who is the subject of the complaint will be notified that attempts to confront, intimidate, or otherwise retaliate against the complainant is a violation of this Code and may result in termination of their services (or the contract under which they function) from the BHD.

The Senior Leader(s) will lead a thorough investigation of the complaint to determine its authenticity and validity, and the severity of the complaint. The Senior Leader(s) will dismiss any unfounded complaint and may dismiss any complaint if it is not possible to confirm its authenticity or severity, and will notify both the

complainant and the subject of the complaint (other Covered Person) and the Contractor, as applicable, of the decision reached. If the Senior Leader(s) determines the complaint is well founded, the complainant and other Covered Person (the subject of the complaint) will be informed of the decision, and, as appropriate to the other Covered Person's behavior, either be officially counseled in writing or their services terminated. Should the services of the other Covered Person be covered under a contract with a Contractor, the Contractor will either be officially counseled in writing or their services will be terminated.

ABUSE OF PROCESS

Consistent with the Code requirements stated above, the BHD strives to maintain an environment that is free from Inappropriate Behavior and Behaviors that Undermine a Culture of Safety, whether implicit or explicit, which is used to adversely control, influence or affect the well-being of any Covered Person or other Covered Person, BHD's patients or their families. Such behavior compromises performance and threatens patient safety by disrupting teamwork, communication, and collaboration.

Threats or actions directed against the complainant by the subject of the complaint will not be tolerated under any circumstance. Retaliation or attempted retaliation by Covered Persons against complainants will be addressed through the progressive disciplinary process. Retaliation or attempted retaliation by Covered Persons against complainants will give rise to corrective action. Retaliation or attempted retaliation by other Covered Persons (e.g., Contractors) against complainants will result in immediate termination of the contract. Individuals who falsely submit a complaint shall be subject to corrective action per the BHD's policies.

PROMOTING AWARENESS OF CODE OF CONDUCT

The BHD shall promote continuing awareness of this Code among the Covered Persons by:

1. Sponsoring or supporting educational programs on Inappropriate Behavior and Behaviors that Undermine a Culture of Safety;
2. Disseminating this Code to all Covered Persons, and other Covered Persons (e.g., Contractors) upon its adoption; and
3. To all new BHD employees and Governing Body members during initial orientation.

References:

N/A

Monitors:

N/A

Attachments:

No Attachments

Committee	Approver	Date
	Alicia B Modjeska: 800101-Deputy Administrator Outpatient	11/25/2015
	Patricia S Schroeder: 80048-Executive Director 3 - Mental Health Admins	11/25/2015