Mental Health Task Force

Mental Health Emergency Center Update

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Joint Venture Emergency Mental Health Center

- 1. Mental Health Emergency Center SBAR (Situation, Background, Assessment, Recommendation)
- 2. Membership and Historical Perspective
- 3. Update to Current Status



Mental Health Emergency Center

Situation: Milwaukee County Behavioral Health Division (BHD) made the decision to close the inpatient psychiatric hospital and the psychiatric emergency room, the Psychiatric Crisis Services Center known as (PCS)

Background: After 70+ years of providing both psychiatric inpatient and emergency services, BHD made a strategic decision to close these financially troubled programs

Assessment: The four major health systems determined it made more sense from a provider shortage and financial point of view to form a joint venture and share the financial losses

Recommendation: Establish the Joint Venture

Members of the Milwaukee Health Care Partnership **Organizational Structure**

4 Health Systems

- Ascension WI
- Advocate Aurora Health
- Children's Wisconsin
- Froedtert Health

5 Federally Qualified Health Centers (FQHCs)

- Gerald Ignace Indian Health Center Milwaukee Health Services, Inc.
- Outreach Community Health Centers Progressive Community Health Centers
- Sixteenth Street Community Health Centers

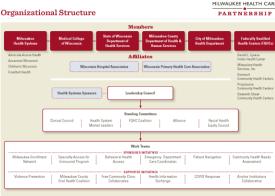
Government Health Agencies

- City of Milwaukee Health Department (MHD) Milwaukee County Department of Health & Human Services (DHHS)
- State of WI Department of Health Services (DHS)

Academic

Medical College of Wisconsin

Affiliates: Wisconsin Hospital Association, Wisconsin Primary Health Care Association, Medical Society of Milwaukee County, Wisconsin Statewide Health Information Network (WISHIN), Free Community Clinic Collaborative (FC3), Others



MHCP Behavioral Health Leaders Committee

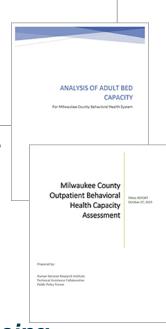
Launched in 2007 at request of County Executive Walker

· Established transfer agreements in 2008 eliminating wait-listing

Engaged in multi-stakeholder planning, networking and process improvement

- Milwaukee County BH Redesign Study * 2010
- IP Capacity Analysis * 2014
- OP Capacity Analysis * 2015
- Psychiatric Crisis Redesign Fall 2018

Essential forum for identifying issues, tracking changes, overseeing collaborative initiatives, monitoring outcomes



Transforming the Adult Mental Health Care Delivery System in Milwaukee County

Psychiatric Crisis Delivery System Redesign

1. Service Enhancements

- Crisis Resource Center Expansion and Enhancements
- Mobile Crisis Functionality (Mobile & CART Teams)
- "Team Connect"/Transition Care Management & Discharge Follow Up
- Private Hospital ED Capabilities

2. New Services

- BHD- FQHC Access Centers
- Crisis Telehealth
- Air Traffic Control/HIE
- Transportation
- 3. Psychiatric Emergency Services
- 4. Child/Adolescent Delivery Model











Mental Health Emergency Center (MHEC) Concept Comes to Life

- 24/7 ER / licensed as psychiatric hospital
- Serving voluntary and involuntary adults and children
- Providing intake, assessment, stabilization, emergency treatment, observation and transition care management services
- Structured as a joint venture non-profit corporation
 - Members: 4 health systems & Milwaukee County on behalf of BHD and Mental Health Board
 - \$18 million start up capital, estimated \$12 million annual operating loss to be under written w/ Milwaukee County covering 50% and health systems assuming 50% of capital and operating expense.
- Advocate Aurora Health will operate the facility under Management Services Agreement (MSA)
- Projected opening Q2 CY2022

Key Drivers for this Unique Collaborative Joint Venture

- Shared Mission to Serve Patients with Emergency Behavioral Health Needs
- Shared Responsibility
 - County statutorily responsible for Chapter 51
 - Health systems serving 3x as many patients with primary behavioral health diagnosis, variation in coverage and capabilities
- Coordinating Infrastructure MHCP
- Executive Sponsorship, Senior Most Level
- Enduring, Trusting Relationships Over 14 years
- Ultimately More Cost-Effective
 - Shortage of psychiatrists and specialty providers
 - Unable to replicate this level of care in all 10 MKE hospital ERs