



**Eastern Region Behavioral Health Steering Committee  
Principles Regarding the Privatization of a State-Operated Mental Health Facility**

1. Patient care cannot be compromised. Patients should be treated with the appropriate amount of care, at the right time, in the least restrictive clinical setting, so as to provide optimal care with the available resources.
2. Services must be culturally competent and sensitive and should respect the dignity of each patient and his/her family.
3. Privatization is not the goal; rather it is a means to achieve the goal of increasing access and capacity to high quality and cost effective services for patients. Services for each patient should be delivered in the most appropriate clinical setting for that particular patient.
4. To the extent the private sector is able and willing to provide appropriate services to persons who otherwise would receive them in the public sector, it is a cost-effective alternative that encourages creative use of scarce resources, and offers more clinical options from which patients and families can choose.
5. Current financial resources committed to delivering services in a state-operated facility must be reserved for services used by these patients, albeit in different settings. The state must demonstrate its commitment to preserving and enhancing resources for patients, not shifting the financial responsibility onto providers or families.
6. The Missouri Department of Mental Health retains the ultimate responsibility to establish performance standards and to monitor performance, a responsibility that is not diminished under a privatized system. These functions, however, should involve collaboration between government, families, consumers, advocates, and providers.
7. Outcomes must be measured against these performance measures, by an objective party. A process must be in place to monitor progress and guide improvement if performance measures are not achieved.
8. The private partner must not reduce access to acute psychiatric hospitalization.
9. Involvement of traditional and non-traditional family is critical to the success of therapy and the patient's long-term health. The services provided must include families.
10. A continuum of services should be available to patients to allow for an appropriate match of needs and services. Providers, must therefore, be able to offer a range of clinical services, including, but not limited to inpatient, partial, outpatient, and support services.

Where a single provider entity is unable to offer the spectrum of services a patient needs, providers should collaborate to insure such access is available.

11. The state should remove existing barriers to collaboration or those which prevent flexibility in programming or training.