Chairperson: Dennise Lavrenz Research Analyst: Kate Flynn Post, (414) 391-7845 Committee Coordinator: Jessica Iggens, (414) 257-7606

MILWAUKEE COUNTY MENTAL HEALTH BOARD QUALITY COMMITTEE

Wednesday, June 4, 2025 - 10:00 A.M. Microsoft Teams Meeting

MINUTES

PRESENT: Mary Neubauer, Dennise Lavrenz, Staci O'Dell **EXCUSED:** Ken Ginlack, Shirley Drake

SCHEDULED ITEMS:

NOTE: All Informational Items are Informational Only Unless Otherwise Directed by the Committee.

1. Welcome.

Chairwoman Lavrenz welcomed everyone to the June 4, 2025 virtual Quality Committee Meeting.

2. Minutes from the March 3, 2025, Committee Meeting.

No questions, discussion, or corrections.

Minutes approved.

3. Granite Hills Hospital Q1 2024 - Q4 2024 Quality Reports.

Jennifer Houben, Granite Hills Hospital Director of Risk Management & Performance Improvement & Facility Compliance Officer presented the 2024 Q1-Q4 Granite Hills Hospital Quality Reports. She highlighted patient satisfaction results, referrals, admissions, length of stay, and zip codes served within the community. She clarified that there were 60 beds open in Q4.

This Item was Informational.

4. MHEC Update.

Dr. Matt Drymalski, Clinical Program Director of Quality and Compliance shared the publicly available MHEC data. He noted that this report is released by Dr. Owen and this dashboard may potentially start to include 30-day readmission rates. Chairwoman of the Milwaukee County Mental Health Board, Mary Neubauer, noted that Dr. Owen will be at the June 12th Board Meeting.

SCHEDULED ITEMS (CONTINUED):

This Item was Informational.

5. **Policy and Procedure Quarterly Report.**

Luci Reyes-Agron, Quality Improvement Coordinator presented the PolicyStat updates for the last three months. She highlighted the data from the month of May, monthly trends, and past due policies. She also highlighted the number of polices coming due and noted that as of June, more progress has been made regarding past due policies.

Questions and discussion ensued regarding why policies may be late. Administrator Lappen provided historical context related to PolicyStat. Luci Reyes-Agron noted that as an organization, our current goal is 96%.

This Item was Informational.

6. **Community Report and Dashboards.**

a) BHS Clients' Rights Dashboard 2024 - Q1 2025

Jenn Pyles, Clients' Rights Advocate presented the 2024-Q1 2025 BHS Clients' Rights Dashboard. She highlighted the unique cases opened each month, total number of contacts, time spent on cases, and Q1 demographics. She also indicated that wrapround is now using this system so they will be able to present on more cases.

b) **2024 Q4 BHS Wide Adult Services Dashboard** (*This item was taken out of order and heard after Item #4)

Dr. Matt Drymalski, Clinical Program Director of Quality and Compliance updated the committee as to the Adult Services Dashboard. He spoke about the Familiar Faces Analysis, highlighted child opportunity statistics, demographics of clients served, and client experiences. He also spoke about the social determinants of health (SDOH) and quality of life (QOL) change from initial to last assessment outcomes. Dr. Drymalski spoke about future dashboards which could include value outcomes focusing on costs, metrics related to staff turnover, and a preliminary risk dashboard.

c) 2024 Q4 BHS KPI Report – Wraparound Milwaukee

Savannah Olsen, Program Evaluator presented the 2024 Q4 BHS KPI Report for Wraparound Milwaukee. She highlighted the connections made, demographic information, the 2024 outreach heat-map, Owens Place highlights, and discharge outcomes.

d) 2024 Q4 CARS Quarterly Report

Gary Kraft, Integrated Services Manager presented the Q4 CARS Report. He highlighted data that showed when services are getting to people, the people are getting better. He also indicated that they intend to streamline this report for future meetings. He highlighted

SCHEDULED ITEMS (CONTINUED):

	additional data that showed CARS is serving more people through different services and	
	programs. He also spoke about the NOMS Measures by Quarter.	
	e) 2024 Q4 BHS Outpatient Treatment (Items 6e and 6f were heard together)	
	f) 2024 Q4 Community Crisis Services Dashboard Updates	
	Ed Warzonek, Quality Assurance Coordinator presented on both the 2024 Q4 BHS	
	Outpatient Treatment dashboard and the 2024 Q4 Community Crisis Services	
	Dashboard. On the Outpatient Treatment Dashboard, he highlighted the clients served	
	and percentage change. He also spoke about the client demographics, treatment	
	programs CSSRS initial and follow up data. He also presented the Community Crisis	
	Dashboard which included unique clients served demographic data, clients served by zip	
	code, experience and readmission, and initial and follow up data.	
	g) 2025 Q1 BHS CARS Prevention Services Dashboard	
	Adriana Smith, Public Health Data Analyst presented the Prevention Services	
	Dashboard. She highlighted different events within the community and where these	
	events took place. She also provided a summary of the harm reduction vending	
	machines.	
	This Item was Informational.	
7.	 Community Contract Vendor Quality Updates: Sanctions, Holds, and Service Suspensions. Lolita Williams, Director of Contract Compliance / Informational) a) Lolita Williams, Director of Contract Compliance, updated the committee on Broadstep Belwood and outlined the timeline of audit actions that have taken place. b) Lolita Williams, Director of Contract Compliance, updated the committee on City Outreach and the audit actions that have taken place. 	
	This Item was Informational.	
8.	Quality Improvement / NIATX Participation 2024 / 2025.	
	Rick Kastenmeier, Program Evaluator presented the Quality Improvement / NIATX Participation information for 2024 / 2025. He highlighted the 2024 statistics which are being used as the baseline statistics and reviewed the 2025 goals. He provided examples of different NIATx requirements and options for providers to utilize. He highlighted how BHS is communicating to the providers regarding presentation requirements. He also encouraged attendance at the October 22, 2025 Storyboard Marketplace.	
	This Item was Informational.	
9.	FEP Fidelity Report.	
	Savannah Olsen, Program Evaluator presented the FEB Fidelity Report. She provided an	
	overview of the assessment, the scoring components, and the scores. She also highlighted the]

SCHEDULED ITEMS (CONTINUED):

high scoring components and indicated areas for improvement. She noted the next steps for the CORE teams included review and feedback.

This Item was Informational.

10. Grants Department Update.

Jennifer Alfredson, Grants Director updated the Committee on the Grants Department. She spoke about the four program areas of BHS and indicated that all four service areas have had at least one grant. She also spoke about process improvement through strategic collaboration and highlighted the key contributions. She spoke about ongoing projects which included DHHS grant manual development and drug-free workplace act compliance. She highlighted budget, fiscal oversight, and compliance and highlighted the many successes that have been implemented utilizing Smartsheet.

This Item was Informational.

11. Adjournment.

Chairwoman Lavrenz thanked everyone for their attendance and adjourned the meeting at 12:19 pm.

This meeting was recorded. The official copy of these minutes and subject reports, along with the audio recording of this meeting, are available on Milwaukee County's Legislative Information Center website, which can be accessed by clicking the link below. Length of meeting: 10:00 a.m. to 12:19 p.m.

Adjourned,

Jessica Iggens Jessica Iggens Committee Coordinator Milwaukee County Mental Health Board

> The next meeting for the Milwaukee County Mental Health Board Quality Committee is scheduled for September 8, 2025 at 10:00 a.m.

To View All Associated Meeting Materials, Visit the Milwaukee County Legislative Information Center at: <u>Milwaukee County - Calendar (legistar.com)</u>

Visit the Milwaukee County Mental Health Board Web Page at: <u>https://county.milwaukee.gov/EN/DHHS/About/Governance</u>

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