

Chairperson: Staci O'Dell
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Committee Coordinator: Jessica Iggens, (414) 257-7606

**MILWAUKEE COUNTY MENTAL HEALTH BOARD
QUALITY COMMITTEE**

Monday, March 2, 2026 - 10:00 A.M.
Microsoft Teams Meeting

MINUTES

PRESENT: *Staci O'Dell, Mary Neubauer*
EXCUSED: *Shirley Drake, Ken Ginlack*
ALSO PRESENT: *Desilynn Smith, Kweku Amoasi*

SCHEDULED ITEMS:

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

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| 1. | <p>Welcome.</p> <p>Committee Member Mary Neubauer made statements to the committee and introduced the new chair of the Milwaukee County Mental Health Board Quality Committee: Staci O'Dell. Chairwoman O'Dell welcomed everyone to the Quality Committee Meeting.</p> |
| 2. | <p>Minutes from December 1, 2025, Committee Meeting.</p> <p>No questions, discussion, or corrections.</p> <p>Minutes approved.</p> |
| 3. | <p>Granite Hills Hospital Quality Reports Q1 2023-Q3 2025.</p> <p>Stacey Gates, Quality Specialist Granite Hills Hospital, presented the Granite Hills Quality Reports. She highlighted new processes that were put in place to continue the upward trend of the patient satisfaction surveys. She presented the admissions, referrals and demographic trends for 2023 Q1 through 2025 Q3. She spoke about the unplanned readmission rates, MHEC referrals, and zip codes of clients served. Chairperson O'Dell inquired about surveys switching from paper to iPads. Quality Specialist Gates noted that they did make the switch, however there is still some troubleshooting with collecting the surveys. She also noted that Granite Hills will be switching to Cerner in the next few days. She confirmed that switching to Cerner should make information sharing with others a smoother process.</p> <p>This item was informational.</p> |

SCHEDULED ITEMS (CONTINUED):

4.	<p>MHEC Update.</p> <p>Dr. Matt Drymalski, Clinical Program Director of Quality and Compliance, presented the publicly available MHEC reports. He noted if there are any questions or additional data elements that this committee would like to see, please reach out to Dr. Drymalski and he will relay the information to Dr. Owen. No comments or questions.</p> <p>This item was informational.</p>
5.	<p>Policy and Procedure Quarterly Report.</p> <p>Linda Oczus, Chief Compliance Officer, presented the Policy and Procedure Quarterly Reports. She noted there are 3 months of dated provided, and she will focus on the most recent month of February. She noted that BHS as well as DHHS continue to work within PolicyStat to ensure policies are up to date and necessary. She also highlighted the new information included in this report indicating that the policy is in the approval process. No comments or questions.</p> <p>This item was informational.</p>
6.	<p>Community Reports and Dashboards</p> <p>a) Q3 2025 BHS Clients' Rights Dashboard</p> <p>Dr. Matt Drymalski, Clinical Program Director of Quality and Compliance, presented the Q3 BHS Clients' Rights Dashboard. He highlighted the new format of this dashboard and welcomed any feedback. He noted that the state changed how BHS needs to track and process clients' rights. He also highlighted the Non-Grievances: Number of Contacts where calls came in that didn't rise to the level of a grievance. He spoke about the most common concerns and the amount of time spent on the cases. Committee Member Neubauer noted that the color scheme that was used was hard to see on the printed copy of the dashboard.</p> <p>b) Q3 2025 BHS Wide Adult Services Dashboard</p> <p>Dr. Matt Drymalski, Clinical Program Director of Quality and Compliance, announced that his team has hired a new staff member that will be developing a new CCS Services Dashboard which is anticipated to be presented at the June Quality Committee Meeting. He also noted that in June, there will be metrics related to workforce turnover and a more formal analysis on the relationship of Quality of Life to other data elements. Gary Kraft, Integrated Services Manager presented the Q3 2025 BHS Wide Adult Services Dashboard. He highlighted the BHS client enrollment data which included metrics related to the child opportunity index and entry points. It was clarified that while Milwaukee County BHS does not fund Matt Talbot's detox program, and going forward BHS will not</p>

SCHEDULED ITEMS (CONTINUED):

receive data, they are still in operation. Gary Kraft noted that the data continues to show that the clients get better when they are in services.

c) Q3 2025 BHS Youth KPI Report

Dr. Matt Drymalski, Clinical Program Director of Quality and Compliance, presented the Q3 2025 BHS Youth KPI report. He highlighted the connects made, youth crisis stabilization facility data, and the value of being able to share existing data.

d) Q3 2025 CARS Quarterly Report

Gary Kraft, Integrated Services Manager, presented the Q3 2025 CARS Quarterly Report. He highlighted the admissions measures and clients served. Chairperson O'Dell inquired about data specific to people of Hispanic heritage. Gary Kraft noted 13% of the clients that were served reported Hispanic heritage, however, indicated there are oddities when reporting this information. He continued with the dashboard and spoke about the cost of care measures, satisfaction surveys, and client outcome measures.

e) Q3 2025 BHS Outpatient Treatment

Gary Kraft, Integrated Services Manager, presented the Q3 2025 BHS Outpatient Treatment Dashboard. He noted that this data includes both youth and adult. He noted that the increase in clients served is likely due to the additional programs that are being tracked through this dashboard and the use of avatar to track data. He spoke about the quarterly costs measures, enrollment by month, and client experience scores.

f) Q3 2025 Community Crisis Services Dashboard Updates

Gary Kraft, Integrated Services Manager, presented the Q3 2025 Community Crisis Services Dashboard. He spoke about the clients served and highlighted that this dashboard contains data relating to Hispanic clients served. He also spoke about the readmission measures and highlighted the admissions, discharges, and clients served by level of care.

g) Q1 2025-Q4 2025 BHS CARS Prevention Services Dashboard

Adriana Smith, Public Health Data Analyst, presented the Q1 2025 – Q4 2025 BHS CARS Prevention Services Dashboard. She reviewed the team members, the project and goals, and spoke about the prevention events as well as the zip codes where the events were held. She also spoke about the suicide prevention trainings, harm reduction vending machine restock data, and Better Ways to Cope data. Question and discussion ensued regarding increase in usage of harm reduction supplies. Grant Manager, Jennifer Alfredson, noted that the machines were re-arranged around this time and this data reflects restock of the gun locks.

This item was informational.

SCHEDULED ITEMS (CONTINUED):

7.	<p>Community Contract Vendor Quality Updates: Sanctions, Holds, and Service Suspensions.</p> <p>Lolita Williams, Director of Contract Compliance, provided the community contract vendor quality updates. She reviewed the letter that was included in the packet that was sent to Broadstep, which included the final assessed damages and a reduction in the amount owed. She noted the reduction in fines was due to corrected information being submitted. She also spoke about the contract termination notification sent to Human Development Center based on noncompliance. She clarified that clients were transferred prior to this termination.</p> <p>This item was informational.</p>
8.	<p>Featured Presentation: Collaborate Auditing Process.</p> <p>Bekki Ross, Utilization Review Case Manager, provided a presentation on the Collaborate Auditing Process. She spoke about the utilization review team, audit collaboration, planning an audit, responsible parties, next steps, and provided contact information for her and her team. Chairperson O'Dell noted that at a future meeting she would like to see the results of some of the audits that were discussed.</p> <p>This item was informational.</p>
9.	<p>Adjournment.</p> <p>Chairwoman O'Dell thanked everyone for appearing and adjourned the meeting.</p>
<p>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 12:04 p.m.</p> <p>Adjourned,</p> <p><i>Jessica Iggens</i> Jessica Iggens Committee Coordinator Milwaukee County Mental Health Board</p> <p>The next meeting for the Milwaukee County Mental Health Board Quality Committee is scheduled for June 1, 2026 at 10:00 a.m.</p> <p>To View All Associated Meeting Materials, Visit the Milwaukee County Legislative Information Center at:</p>	

SCHEDULED ITEMS (CONTINUED):

[Milwaukee County - Calendar \(legistar.com\)](#)

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<https://county.milwaukee.gov/EN/DHHS/About/Governance>**

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