

**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**

**Monday, September 8, 2025 - 10:00 A.M.**  
**Microsoft Teams Meeting**

**MINUTES**

**PRESENT:** *Mary Neubauer, Dennise Lavrenz, Staci O'Dell, Ken Ginlack*  
**EXCUSED:** *Shirley Drake*  
**ALSO PRESENT:** *Joy Tapper (Appeared for item #10)*

**SCHEDULED ITEMS:**

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

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| 1. | <b>Welcome.</b><br><br>Chairwoman Lavrenz welcomed everyone to the September 8, 2025 virtual Quality Committee Meeting.  |
| 2. | <b>Minutes from the June 4, 2025, Committee Meeting.</b><br><br>No questions, discussion, or corrections.<br><br>Minutes approved.   |
| 3. | <b>Granite Hills Hospital Q1 2023 - Q1 2025 Quality Reports.</b><br><br>Stacey Gates, Quality Specialist Granite Hills Hospital, presented the Granite Hills Hospital Quality Reports. She highlighted patient satisfaction scores, data regarding patients admitted, healthcare personnel vaccination rates, unplanned readmissions, MHEC referrals, and the zip code admissions summary. Daniel Gell, the new CEO of Granite Hills, introduced himself to the committee and provided his contact information. Board Member O'Dell emphasized the need for communication between Granite Hills and the community and noted that discharge procedures could be improved. BHS Administrator, Michael Lappen, informed the committee that Linda Oczus, Chief Risk Officer, has recently had some follow up visits with Granite Hills and has been pleased with her document review and noted that significant progress as been made.<br><br>This Item was Informational. |

**SCHEDULED ITEMS (CONTINUED):**

4.	<p><b>MHEC Update.</b></p> <p>Dr. Matt Drymalski, Clinical Program Director of Quality and Compliance, provided the MHEC data that Dr. Owen compiles and shares to the public. He noted that MHEC is now reporting on readmission rates.</p> <p>This Item was informational.</p>
5.	<p><b>Policy and Procedure Quarterly Report.</b></p> <p>Luci Reyes-Agron, Quality Improvement Coordinator, presented the Quarterly Policy and Procedure Report. She indicated that lots of work has been done to make sure policies are up to date.</p> <p>This Item was Informational.</p>
6.	<p><b>Community Report and Dashboards.</b></p> <ul style="list-style-type: none"><li>a) <b>BHS Clients' Rights Dashboard 2025 Q2</b> Dr. Matt Drymalski, Clinical Program Director of Quality and Compliance, presented the Q2 BHS Client's Rights Dashboard. He indicated that there were some case management issues that were cleaned up and the number of cases should go down. In addition, youth services started documenting their client rights issues in the same system as adult services.</li><li>b) <b>2025 Q1 BHS Wide Adult Services Dashboard</b> Dr. Matt Drymalski, Clinical Program Director of Quality and Compliance, presented the Q1 BHS Wide Adult Services Dashboard. He indicated that in the future there will be a CCS Dashboard, anticipated to be presented in December. He indicated that client experience scores tend to be very high. He also indicated that across the board, data is showing that people are generally getting better, regardless of demographic strata. Future iterations of the BHS Wide Adult Services Dashboard will include insurance status.</li><li>c) <b>2025 Q1 Youth KPI Report</b> Dana James, Integrated Services Manager, presented the Q1 Youth KPI Report. She indicated the program receives around 1500 calls on the resource referral line per quarter. These phone calls can range from people seeking services to wanting to get resources to community questions. She also noted that this dashboard will include outreach activities in the future.</li><li>d) <b>2025 Q1 CARS Quarterly Report</b> Gary Kraft, Integrated Services Manager, presented the Q1 CARS Quarterly Report. He highlighted new data that is being presented including looking at clients with their first admissions and insurance status.</li></ul>

**SCHEDULED ITEMS (CONTINUED):**

	<p>e) <b>2025 Q1 BHS Outpatient Treatment (Item 6e and Item 6f were heard together)</b> f) <b>2025 Q1 Community Crisis Services Dashboard Updates. (Item 6e and Item 6f were heard together)</b> Ed Warzonek, Quality Assurance Coordinator, presented the Q1 BHS Outpatient Treatment and the Community Crisis Services Dashboards. He indicated that this quarter's results are very consistent with previous data and noted they will continue to revise dashboards to include new and requested information.</p> <p>g) <b>2025 Q2 BHS CARS Prevention Services Dashboard</b> Adriana Smith, Public Health Data Analyst, presented the Q2 BHS CARS Prevention Services Dashboard. She summarized the CARS events and activities, harm reduction vending machine data, suicide prevention events, and Better Ways to Cope events (BWTC).</p> <p>This Item was Informational.</p>
7.	<p><b>Community Contract Vendor Quality Updates: Sanctions, Holds, and Service Suspensions.</b></p> <p>Lolita Williams, Director of Contract Compliance, updated the committee as to Broadstep. She noted that BHS lifted the suspension for new referrals to Bellwood in June.</p> <p>This Item was Informational.</p>
8.	<p><b>2024 MHSIP Survey Respondents.</b></p> <p>Rick Kastenmeier, Program Evaluator, presented the 2024 MHSIP Survey results for adult services. This is the annual client survey for CCS consumers. He presented the response rates and sample sizes and indicated in most cases they did meet the sample size. He noted that the results are separated into seven different domains and noted the questions are listed in the packet. Compared to the state results, Milwaukee County is right in line with the state numbers. He presented the results by race/ethnicity and gender.</p> <p>Dana James, Integrated Services Manager, presented the 2024 MHSIP Survey results for youth services. She noted that the family survey is completed by the parent/guardian if the client is 12 or younger, and the youth survey is completed by the youth if they are 13-17. She spoke about response rates compared to amounts that were distributed. She highlighted the different domains and questions that were included in the survey. She presented the results compared to the state and presented the results by race/ethnicity and gender.</p> <p>This Item was Informational.</p>
9.	<p><b>Assertive Community Treatment.</b></p>

**SCHEDULED ITEMS (CONTINUED):**

	<p>Kaelin Deprez, Integrated Service Manager, provided the Assertive Community Treatment presentation. She provided an overview of assertive community treatment (ACT) including examples of services and supports, clinic treatment, crisis response and community engagement areas. She also spoke about ACT Fidelity reviews and historical scores. She presented self-reported quality life-change over time and other outcome data. She spoke about different challenges that the ACT team faces, different achievements and milestones, and future goals.</p> <p>This Item was Informational.</p>
<p style="text-align: center;"><b>CLOSED SESSION:</b> <b><i>Pursuant to Wisconsin Statutes Section 19.85(1)(f), the Board may adjourn into Closed Session for the purpose of considering financial, medical, social or personal histories or disciplinary data of specific persons, preliminary consideration of specific personnel problems or the investigation of charges against specific persons except where par. (b) applies which, if discussed in public, would be likely to have a substantial adverse effect upon the reputation of any person referred to in such histories or data, or involved in such problems or investigations.</i></b></p>	
10.	<p><b>Audit Findings of BHS Responsibilities under Wis. Stats. 971.14(6)(c).</b></p> <p>Michael Lappen, BHS Administrator, presented the Audit Findings of BHS Responsibilities under Wis. Stats. 971.14(6)(c). He noted that a closed session will be needed to discuss PHI. He provided the notice requirements under 971.14(6)(c) and spoke to Behavioral Health Services' processes regarding these cases. He presented the data around commitments in general and data specific to 971.14.(6)(c) cases.</p> <p>He included the policies that have been put in place regarding conversion cases and updated the committee on different procedures that have been put in place regarding these cases including updates to the electronic systems and the re-commitment packets. He spoke about the levels of care and inpatient venues that are available. He also updated the committee as to a recent conversion case and the procedures that BHS utilized for the case.</p> <p>Chairperson Lavrenz acknowledged Administrator Lappen and his team for the comprehensive review and commended the thoroughness of the review.</p> <p>The Quality Committee agreed to adjourn in to closed session pursuant to Wisconsin Statutes Section 19.85(1)(f) and adjourned to closed session from 12:07pm until 12:39pm.</p> <p>Following the closed session, the committee reconvened into open session and made the following motion: That the Quality Committee present a statement that indicates support of the audit that was presented by Administrator Lappen and that this statement be put in writing and presented to the mental health board.</p>

**SCHEDULED ITEMS (CONTINUED):**

	The Quality Committee recommended approval of a statement of support of the audit presented by Administrator Lappen and included in Item #10 of this Agenda.
<p><b><i>At the conclusion of the closed session, the Board may reconvene in open session to take whatever action(s) it may deem necessary on the aforesaid matter(s).</i></b></p> <p>* * * * *</p>	
11.	<b>Adjournment.</b>  Chairwoman Lavrenz thanked everyone for their participation and adjourned the meeting.
<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 12:41 p.m.</p> <p>Adjourned,</p> <p><i>Jessica Iggens</i> <b>Jessica Iggens</b> Committee Coordinator Milwaukee County Mental Health Board</p> <p><b>The next meeting for the Milwaukee County Mental Health Board Quality Committee is scheduled for December 1, 2025 at 10:00 a.m.</b></p> <p><b>To View All Associated Meeting Materials, Visit the Milwaukee County Legislative Information Center at: <a href="https://legistar.com">Milwaukee County - Calendar (legistar.com)</a></b></p> <p><b>Visit the Milwaukee County Mental Health Board Web Page at: <a href="https://county.milwaukee.gov/EN/DHHS/About/Governance">https://county.milwaukee.gov/EN/DHHS/About/Governance</a></b></p>	
<p><b><i>ADA accommodation requests should be filed with the Milwaukee County Office for Persons with Disabilities, 278-3932 (voice) or 711 (TRS), upon receipt of this notice.</i></b></p>	