

Status of Implementation of the 18 Open Recommendations from Creative Corrections Final Report dated 5/20/25			
		Open Recommendations	
Actionable Area of Concern	Section/Page	Summary of CAP Response	Comments as of November 2025
Security – Restraint Benches Routine use of restraint benches for suicide-watch occupants in booking and special units (dangerous practice).	Security (Sec. 5.1, p.5–6)	Practice discontinued; intake procedures revised to ensure suicidal individuals are evaluated and moved to suicide-watch cells within 1 hour. MCJ is working with county officials to remove bench restraints and add holding cells , pending funding. <i>No instances of bench restraints were observed during the follow-up visit .</i>	Office of the Sheriff: 2026 Capital Projects submitted for safe rooms # WC030401 and holding cells retrofit # WC030701. Once safe rooms and holding cells are retrofitted, the restraint benches will be removed. Audit Services Division: Capital projects are funded in 2026 Adopted Capital Budget but not yet started.
Security – Tool Control Deficient tool security by maintenance staff (no risk categorization or inventory tracking by officers).	Security (Sec. 5.1, p.6–7)	An enhanced tool control policy is underway. MCJ created a tool accountability protocol (roll-call training with officer sign-offs) and identified a secure tool storage area. A digital tracking system (Jail Management System dropdown) is being implemented with go-live on May 12, 2025. <i>Full resolution awaits assembly of specialized toolkits by County Maintenance .</i>	Office of the Sheriff: MCJ's Leadership spoke with Mechanical Service Manager at the Department of Administrative Services on Monday, November 3, 2025, regarding a more cost-effective process. MCJ Leadership requested that all of the trades create an inventory list of their current tool carts. We have a follow-up meeting scheduled for Thursday, November 13, 2025, at 10 a.m. DAS-Facilities Management: After reviewing potential cost and logistical barriers an alternative plan would be for Facilities to remove any extraneous items from their tool carts to include only what would be needed for work in CJF. Take a high resolution picture of "standard" tool carts that are accepted into CJF, process those pictures into a laminated form for distribution amongst CJF CO staff. Upon entering CJF to perform maintenance work CJF CO staff would reference the picture and compare to what is actually in the tool cart before Facilities staff can proceed. Upon completion of maintenance duties a CJF CO would perform the same review before Facilities personnel exit the CJF.
Security – Armory Management Armory inspection revealed missing inventory records and outdated protective gear (safety risk).	Security (Sec. 5.1, p.8)	Armory inventory system established: Daily equipment issuance and regular supervisory inspections are in place, with sign-in sheets for trained staff . All less-lethal munitions are inventoried and expired gear removed. <i>However, new protective gear and munitions need County funding , so the item remains only partially resolved.</i>	Office of the Sheriff - Fiscal Administrator: CERT equipment in the amount of \$76,000 requested for the jail was not included in the Office of the Sheriff's 2026 budget request due to funding constraints.
Security – Suicide Watch Observation One-on-one suicide watch observation procedures not ensuring clear, unobstructed view of occupants.	Security (Sec. 5.1, p.12)	Physical improvements to watch cells: MCJ replaced scratched plexiglass in several suicide-watch cell doors to restore clear visibility. Lighting is being enhanced and electrical fixtures (outlets, switches) removed or relocated to prevent tampering. <i>Substantial progress made; full completion requires additional funding for remaining cell upgrades .</i>	Office of the Sheriff: 2026 Capital Project submitted for light controls renovation. Project # WC030601 and 2026 Capital Project submitted for mental health doors and glass replacement. Project # WC030401 Audit Services Division: Capital project # WC030401 was funded in the 2026 Adopted Capital Budget but not yet started.
MCJ Maintenance – Suicide-Watch Cell Visibility Scratched cell-door glass in suicide-watch cells impedes observation of occupants.	MCJ Maintenance (Sec. 5.5, p.18)	Plexiglass replacements begun: MCJ replaced most scratched plexiglass panels in suicide-watch cell doors (e.g. in the Mental Health Unit), restoring clear visibility. Cells were observed to be clean, well-lit, and suitable for 1:1 monitoring after these fixes. <i>Full completion requires additional funding to replace all remaining panels .</i>	Office of the Sheriff: 2026 Capital Project submitted for mental health doors and glass replacement. Project # WC030401 Audit Services Division: Capital project is funded in 2026 Adopted Capital Budget but not yet started.
MCJ Maintenance – Light Switches Light switches located inside suicide-watch cells (allowing inmates to control lighting).	MCJ Maintenance (Sec. 5.5, p.18–19)	Planned infrastructure change: MCJ developed a proposal to relocate all suicide-cell light switches to outside the cells. A quote for the work was submitted to the County's Capital Improvement Committee (as of March 28, 2025). <i>This project is awaiting approval and funding; switches have not yet been moved , so the safety risk is acknowledged but not fully eliminated at this time.</i>	Office of the Sheriff: 2026 Capital Project submitted for light controls renovation. Project # WC030601 Audit Services Division: Capital project was requested but not included in the 2026 Adopted Capital Budget.
MCJ Maintenance – Graffiti Removal Cells defaced with extensive graffiti (creates distressing environment).	MCJ Maintenance (Sec. 5.5, p.19)	Graffiti abatement efforts ongoing: Maintenance staff have been actively removing graffiti in affected housing units (e.g. Unit 4D) during the follow-up period. Documentation shows a "pod rehabilitation" initiative for graffiti cleanup in multiple units. To prevent future damage, MCJ switched from pencils to easily washable ink pens for inmates. <i>Continued monitoring is recommended to ensure this issue remains under control .</i>	Office of the Sheriff: During the tour of the Annex on Friday, October 10, 2025, with MCJ, CRC Leadership, and the State Jail Inspector, the Jail Inspector stated that a third toilet must be installed in each housing unit to meet the required occupant-to-toilet ratio. We are waiting for an update on when the toilets will be installed. MCJ Leadership met with Mechanical Service Manager at the Department of Administrative Services on Monday, October 27th, 2025. We are working on narrowing down a date in January that works for MCSO and Facilities Management. A project manager will be assigned to manage and oversee the plan. On Friday, October 31, 2025, MCJ received an email from ICS Solutions Account Manager confirming that the phones, tablets, and video visit stations are all operational and ready for use by occupants. MCJ Leadership submitted a Memorandum of Understanding (MOU) to CRC Leadership in June 2024. CRC's Leadership returned the MOU with some edits. Line #12 on the MOU requires the same classification as the current transfer process. On Friday, November 7, 2025, Deputy Sheriff Director emailed CRC's Assistant Superintendent and Security Director requesting an update on the status of the MOU. He did not receive a response until he followed up again on Wednesday, November 12, 2025. CRC's Security Director responded and stated they would provide an update in a few days. Sheriff Director reached out to CRC's Superintendent via phone and left a message, but has not received a call back. At this time, without a signed MOU, we are unable to move forward with the use of the Annex to begin the Graffiti Abatement Project. Community Reintegration Center: On 10-11-2025 the CRC met with the Jail Supervisory team and the DOC jail inspector regarding opening the Annex. Maintenance had three units with 30 beds each that were available for opening. So currently the Milwaukee County CRC has currently 90 beds available for use in the Annex. The only issue that needed to be completed was the ICS vendor needed to continue work on the tablets, video visiting, and the phones to be fully functioning. On 10/16/2025 the CJF stated they would be ready to use the Annex in January. (Update from ICS on 10/30/2025 they stated the phones and tablets are currently ready for use in the Annex.) The CRC has been working diligently to prepare the Annex for occupancy by the MCJ. This has included ensuring that it has met all requirements per Administrative Code 350, working with the jail inspector, ensuring communication access through ICS Solutions, working with healthcare vendors and consultants and working with jail leadership. We've been told on multiple occasions that the jail was unable to staff the Annex due to their own staffing shortages. This was communicated by Sheriff Director on 11/3 and reiterated again at a stakeholders meeting by Deputy Sheriff Director on 11/4. Additionally, the CRC has requested a short term variance from the jail inspector to add an additional 60 beds to CRC to assist the jail while they are having staffing shortages. The Annex was noted it was able to be used by the CJF on 10/31/2025. The MOU is a two party agreement which needs to be updated by both parties with who can be housed here and for how long with new dates as the old dates expired in 2024. By assisting the CJF with the 60 new beds in the interim both parties should have a MOU in place before the CJF is ready to use the space before the January date that the CJF has requested the use to help with thier staffing shortages. DAS-Facilities Management: FM has an older plan that was developed over a year ago that would have to be updated with current costs and timelines to get an accurate account of resources needed for total pod rehabilitation & maintenance. O&M plans to assign a project manager to oversee and manage the plan once it's fully developed.
Medical – Bulk Stock Medications Nurses administering medications from bulk stock bottles (meds not labeled by pharmacy).	Medical (Sec. 5.7, p.22–23)	Practice under review: MCJ is reassessing the practice of using bulk stock meds. The HSA has been in discussions with the pharmacy vendor to transition to blister-pack medications (which are safer and labeled). However, formal guidance from the state nursing board is still pending and the policy has not yet been revised. Until a decision is reached and policy updated, the original issue is only partially addressed.	Office of the Sheriff: The initial response was from Wellpath's legal department. MCJ supports this decision as this is not a violation. Wellpath: Bulk stock medications are administered by licensed nursing staff only pursuant to the lawful orders of a provider with prescriptive authority. No Wisconsin Board of Nursing rule, nor any provision of the Wisconsin Nurse Practice Act, prohibits this or requires the prior approval of the Board in order to engage in this practice. Bulk stock medications are delivered to the Milwaukee County jail facilities by Clinical Solutions, in accordance with Board of Pharmacy Rule 13.02(e), which permits the distribution of bulk drugs to practitioners for general dispensing to the practitioner's patients. While Wellpath is willing to modify its operational practices based on the recommendations of Creative Corrections, the company will not seek an unnecessary regulatory approval for an established, customary, and lawful method of medication administration. NCCHC-NRI: Based upon consultation with the contracted pharmacy, review of the Nursing Practice Act and Pharmacy Practice Act, pharmaceutical operations on site in quarter three, and observation of the medication administration, the NCCHC Resources team finds no concerns in compliance with state guidelines or accreditation standards. During the fourth quarter visit, the team will review documentation that Wellpath has completed their responsibilities to consult to confirm full CAP compliance.

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Medical – Sharps/Needle Counts Inaccuracies in sharps and needle count logs (pharmacy, clinic, booking, med carts).	Medical (Sec. 5.7, p.23)	Inventory verification and ongoing audits: A physical inventory on March 23, 2025, of all bulk and unit-level sharps/needles found no missing items , confirming 100% accuracy in physical counts. However, documentation logs for sub-stock carts were only about 80% complete in April (improving from 14% in March). MCJ has instituted weekly audits of 10% of log entries and will continue until 60 consecutive days of perfect documentation are achieved.	Office of the Sheriff: After speaking with Wellpath's Health Services Administrator, regarding a target date and steps to obtain and sustain compliance in this area. A target date of December 31, 2025, and the steps to be taken include communication to staff through emails, staff meetings, and rounding. Additionally, weekly auditing with individual staff follow-up for non-compliance. Wellpath: From May 2025 to September 2025, all bulk and unit-level sharps/needles count documentation was performed at 100%. Documentation for sub-stock carts is currently at 90% compliance. Sustained compliance is not yet proven, continued audits and training to continue. NCCHC-NRI: From observation of count conducted during the August visit, review of the inventory log books NCCHC Resources finds the practices to be fully compliant. The fourth quarter visit will confirm Wellpath documentation of audits, anticipating full compliance.
Medical – Language Access Inadequate communication for non-English or special-needs inmates (interpreter use not documented; Spanish forms not used).	Medical (Sec. 5.7, p.24)	Improved LEP communication tracking: MCJ added a dedicated field in the Electronic Health Record to record interpreter usage, achieving 100% documentation compliance for intake screenings of limited-English and hearing-impaired inmates. For other clinical encounters, compliance improved from 14% (Mar 2025) to 100% in Apr 2025 with staff training and EHR updates. <i>Facility-wide sustained compliance is not yet proven, so audits and training continue .</i>	Office of the Sheriff: After speaking with Wellpath's Health Services Administrator, regarding a target date and steps to obtain and sustain compliance in this area. A target date of December 31, 2025, and the steps to be taken include communication to staff through emails, staff meetings, and rounding. Additionally, weekly auditing with individual staff follow-up for non-compliance. Wellpath: From May 2025 to September 2025 documentation compliance for intake screenings of limited English and hearing impaired occupants was 77%. For other clinical encounters, compliance is at 78%. Sustained compliance is not yet proven, continued audits and training to continue. NCCHC-NRI: NCCHC Resources has conducted an objective study to determine compliance with clinical documentation of services for patients with Limited English Proficiency. Findings conclude compliance remains partial.
Communication w/ External – Transfer to CRC MCJ should coordinate with Community Reintegration Center (CRC) to move 70 female inmates to the CRC Annex (to relieve crowding at MCJ).	Communication w/ External (Sec. 5.9, p.27)	Opened dialogue with CRC: MCSO leadership initiated communication with the CRC Superintendent to discuss transferring 70 female inmates to the CRC annex. While no transfer has occurred yet, the CRC agreed to reconsider the request in July 2025. <i>Thus far, this item remains in progress (contingent on CRC approval) .</i>	Office of the Sheriff: During the tour of the Annex on Friday, October 10, 2025, with MCJ, CRC Leadership, and the State Jail Inspector. The Jail Inspector stated that a third toilet must be installed in each housing unit to meet the required occupant-to-toilet ratio. We are waiting for an update on when the toilets will be installed. MCJ Leadership met with Mechanical Service Manager at the Department of Administrative Services on Monday, October 27th, 2025. We are working on narrowing down a date in January that works for MCSO and Facilities Management. A project manager will be assigned to manage and oversee the plan. On Friday, October 31, 2025, MCJ received an email from ICS Solutions Account Manager confirming that the phones, tablets, and video visit stations are all operational and ready for use by occupants. MCJ Leadership submitted a Memorandum of Understanding (MOU) to CRC Leadership in June 2024. CRC's Leadership returned the MOU with some edits. Line #12 on the MOU requires the same classification as the current transfer process. On Friday, November 7, 2025, Deputy Sheriff Director emailed CRC's Assistant Superintendent and Security Director requesting an update on the status of the MOU. He did not receive a response until he followed up again on Wednesday, November 12, 2025. CRC's Security Director responded and stated they would provide an update in a few days. Sheriff Director reached out to CRC's Superintendent via phone and left a message, but has not received a call back. At this time, without a signed MOU, we are unable to move forward with the use of the Annex to begin the Graffiti Abatement Project. Community Reintegration Center: The Milwaukee county CRC had to do a lot of maintenance work to get the Annex completed and ready for usage. The facility was not ready for usage in July because it had to have bunks placed in units for usage and the HVAC needed to be checked, along with phones and internet and new computers and updated kiosks. Update from ICS Solutions on 10/30/25 they have the phones and tablets ready. So at this time the Annex is ready to house occupants/residents. The CRC has been working diligently to prepare the Annex for occupancy by the MCJ.This has included ensuring that it has met all requirements per Administrative Code 350, working with the jail inspector, ensuring communication access through ICS Solutions, working with healthcare vendors and consultants and working with jail leadership. We've been told on multiple occasions that the jail was unable to staff the Annex due to their own staffing shortages. This was communicated by Sheriff Director on 11/3 and reiterated again at a stakeholders meeting by Deputy Sheriff Director on 11/4. Additionally, the CRC has requested a short term variance from the jail inspector to add an additional 60 beds to CRC to assist the jail while they are having staffing shortages. The Annex was noted it was able to be used by the CJF on 10/31/2025. The MOU is a two party agreement which needs to be updated by both parties with who can bee housed here and for how long with new dates as the old dates expired in 2024. By assisting the CJF with the 60 new beds in the interim both parties should have a MOU in place before the CJF is ready to use the space before the January date that the CJF has requested the use to help with thier staffing shortages. DAS-Facilities Management: FM has an older plan that was developed over a year ago that would have to be updated with current costs and timelines to get an accurate account of resources needed for total pod rehabilitation & maintenance. O&M plans to assign a project manager to oversee and manage the plan once it's fully developed.
Communication w/ External – Classification for CRC Work with CRC to enhance the classification system for inmates transferred from MCJ to CRC.	Communication w/ External (Sec. 5.9, p.27–28)	Collaboration initiated: MCJ has reached out to the CRC Superintendent to jointly improve the inmate classification process for transfers. This is intended to ensure smoother transitions and appropriate placement for MCJ inmates sent to CRC. Discussions are ongoing; <i>CRC is reviewing MCJ's proposals, but no final plan has been adopted yet .</i>	Office of the Sheriff: Unsure what prompted this in the audit. MCJ and CRC communicate daily through county email on the need for transfers. Transfers are granted based on the available bed space at the CRC, and the transfers must meet the CRC's criteria. Community Reintegration Center: The CRC and MCJ work on bus lists daily based on available beds and the Northpointe classification system. The Northpointe Classification sytems helps classify residents who are suitable to be housed at each facility.
Communication w/ External – Female Classification System Create a classification system specifically for female inmates consistent with MCJ practices.	Communication w/ External (Sec. 5.9, p.28)	Developing gender-specific classification: MCJ and CRC leadership are actively working on a female-specific classification system. They participated together in the Equivant Corrections Conference in June 2025 to develop strategies for a gender-responsive classification aligned with current jail standards. This cooperative effort is well underway; <i>however, the new system is still in development and not yet implemented .</i>	Office of the Sheriff: MCJ will collaborate with CRC as well as Wellpath's medical and mental health to determine who may be properly housed in the Annex. MCJ volunteered to be a part of the Beta rollout. At this time, there is no date available as to when this will be implemented. MCJ is unaware if CRC plans to participate. Community Reintegration Center: The MCJ and the CRC have both received the north point classification training through Equivant to better assist each other in properly classifying where individuals should best be housed. MCJ would be staffing the annex so they would need to assist making decisions of who they could properly house in the annex.

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Communication w/ External – Maintenance Support Coordinate with County Maintenance leadership to address facility maintenance issues in the jail.	Communication w/ External (Sec. 5.9, p.28)	Joint maintenance planning: MCJ established regular communications with County Maintenance. A collaborative action plan is being formulated, and some maintenance projects have already been completed (e.g. repairs in units MHU and 4D, creation of organized key rings for security). <i>Despite progress, several maintenance issues remain outstanding; continued partnership and project completion are needed for full resolution .</i>	Office of the Sheriff: During the tour of the Annex on Friday, October 10, 2025, with MCJ, CRC Leadership, and the State Jail Inspector. The Jail Inspector stated that a third toilet must be installed in each housing unit to meet the required occupant-to-toilet ratio. We are waiting for an update on when the toilets will be installed. MCJ Leadership met with Mechanical Service Manager at the Department of Administrative Services on Monday, October 27th, 2025. We are working on narrowing down a date in January that works for MCSO and Facilities Management. A project manager will be assigned to manage and oversee the plan. On Friday, October 31, 2025, MCJ received an email from ICS Solutions Account Manager confirming that the phones, tablets, and video visit stations are all operational and ready for use by occupants. MCJ Leadership submitted a Memorandum of Understanding (MOU) to CRC Leadership in June 2024. CRC's Leadership returned the MOU with some edits. Line #12 on the MOU requires the same classification as the current transfer process. On Friday, November 7, 2025, Deputy Sheriff Director emailed CRC's Assistant Superintendent and Security Director requesting an update on the status of the MOU. He did not receive a response until he followed up again on Wednesday, November 12, 2025. CRC's Security Director responded and stated they would provide an update in a few days. Sheriff Director reached out to CRC's Superintendent via phone and left a message, but has not received a call back. At this time, without a signed MOU, we are unable to move forward with the use of the Annex to begin the Graffiti Abatement Project. Community Reintegration Center: The Annex currently has 3 dorms that allow 30 residents/occupants per dorm for a total of 90 beds for usage. As of 10/30/25 ICS Solutions has the phones and tablets ready for use. The CRC has been working diligently to prepare the Annex for occupancy by the MCJ. This has included ensuring that it has met all requirements per Administrative Code 350, working with the jail inspector, ensuring communication access through ICS Solutions, working with healthcare vendors and consultants and working with jail leadership. We've been told on multiple occasions that the jail was unable to staff the Annex due to their own staffing shortages. This was communicated by Sheriff Director on 11/3 and reiterated again at a stakeholders meeting by Deputy Sheriff Director on 11/4. Additionally, the CRC has requested a short term variance from the jail inspector to add an additional 60 beds to CRC to assist the jail while they are having staffing shortages. The Annex was noted it was able to be used by the CJF on 10/31/2025. The MOU is a two party agreement which needs to be updated by both parties with who can bee housed here and for how long with new dates as the old dates expired in 2024. By assisting the CJF with the 60 new beds in the interim both parties should have a MOU in place before the CJF is ready to use the space before the January date that the CJF has requested the use to help with thier staffing shortages. DAS-Facilities Management: FM has an older plan that was developed over a year ago that would have to be updated with current costs and timelines to get an accurate account of resources needed for total pod rehabilitation & maintenance. O&M plans to assign a project manager to oversee and manage the plan once it's fully developed.
Recently Closed Recommendations			
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Security – Key Control (Key Watcher) No electronic key management system in use (risk of key loss/unauthorized access).	Security (Sec. 5.1, p.9)	Key Watcher electronic system in progress: MCJ is organizing key rings and removing obsolete keys in preparation for full Key Watcher deployment in May 2025. One Key Watcher unit is already installed in the supervisor's office. Staff training on key control will coincide with system go-live. <i>Interim audits showed no key control issues .</i>	Office of the Sheriff: Completed. As of July 1, 2025, all Key Watcher cabinets are online and operational.
Food Service – Posted Menus Occupants are not provided written menus of meals (limiting transparency and communication).	Food Service (Sec. 5.4, p.15–16)	Plan for posting menus: MCJ intends to post daily menus in housing units and on inmate tablets to improve transparency. However, as of April 28, 2025, this has not yet been implemented due to ongoing renovations at the Community Reintegration Center kitchen (which prepares meals). Menu posting will commence once the renovations are complete and operations normalize.	Office of the Sheriff: Completed. Menus have been posted in the housing units, occupant tablets, and kiosks since May 2025. We received an updated menu in October 2025, and they have been posted.
Medical – TB Screening Non-compliance with tuberculosis screening guidelines (at-risk inmates missing chest X-rays or annual tests).	Medical (Sec. 5.7, p.20)	Intensive audit and monitoring: The Infection Control Nurse is conducting 100% chart audits to enforce TB screening per policy. Between January and April 2025, compliance improved to 83%, and average time to chest X-ray for HIV+ inmates dropped to ~14.8 days. <i>Audits will continue until a sustained 60-day full compliance is achieved .</i>	Office of the Sheriff: Completed, the initial response that was provided was from Wellpath. Wellpath: From April 2025 to September 2025, the 14 day chest x-ray completion rate for HIV positive occupants has been at 100% compliance for each month. Our overall compliance has increased from 83% to 98% during this time and we have decreased the average number of days from intake to chest x-ray for this population from 14.8 days to 7.28 days. The sustained 60-day full compliance has been achieved. NCCHC-NRI: The NCCHC Resources team is currently researching to identify the most accurate data source to conduct an objective study for compliance to TB practices. Anticipated to occur in quarter 4 of 2025.
Mental Health – 24/7 Coverage Facility lacks around-the-clock mental health staffing (no comprehensive plan for nights/weekends).	Mental Health (Sec. 5.8, p.27)	Staffing plan initiated: MCJ restructured positions by converting one full-time psychologist position into two part-time positions to provide greater coverage (aiming for nights and weekends). The two part-time roles were posted and recruitment is ongoing. <i>As the new positions are not yet filled, 24/7 coverage is not fully realized; the plan's success is pending hiring and onboarding of these clinicians .</i>	Office of the Sheriff: Completed. Wellpath: 24/7 mental health staffing was achieved as of 7/1/25. The part-time positions were both filled and we now have a mental health professional who works third shift every weekend. The mental health team is currently fully staffed. NCCHC-NRI: NCCHC Resources conducts staffing analysis monthly and monitors Wellpath vacancy reporting weekly. Findings indicate no current vacancies. It should be noted that Wellpath has established and maintained an on-call practice for any vacant shift where onsite staff can reach a mental health qualified healthcare professional. Partial compliance. Audit Services Division: Schedules of mental health staffing from Wellpath show a 30 minute period of time (6:30-7am) for all days of the week, that is not staffed with a mental health professional. However, according to Wellpath, a charge nurse is present during this window of time and after conferring with jail staff, the 6:30-7am time period is generally not a period of high mental health incident activity.