Overdose Fatality Review
WAUKESHA COUNTY

2025
Priorities in Action:
A Roadmap to Impact

"Together, we can prevent substance related deaths."

Activities Summary

On May 28, 2025, the OFR Steering Committee convened for the inaugural Strategic Alignment Workshop.

The objective of the workshop was to uncover key insights from community leaders to learn how best to align agencies, resources and actions to the six priority recommendations determined by the Core OFR team in March of 2025.

This report summarizes key activities and offers a roadmap to move from priority recommendations to action and impact.

Review
2025 Priority Recommendations Report

Share
Knowledge and key insights

2025 Strategic Alignment Workshop

Clarify
Where necessary

Align
Agencies, resources and actions for impact.

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Structure & Methods

Participants

Multidisciplinary representatives included Hebron Housing Services, ProHealth Care, Village of Hartland Police Department, Wisconsin Community Services, Wisconsin Department of Corrections, Waukesha County Department of Health and Human Services, and Waukesha County Public Health.

Methods

The workshop utilized facilitation methods designed to pool ideas, elicit collective wisdom and experience, value input, manage complex information and sustain community development.

Process

The workshop process included a review of the 2025 Priority Recommendations report, knowledge sharing and key insights, and opportunities to clarify. The workshop concluded by aligning agencies, resources and actions to each priority recommendation for impact.

Activities included individual reflections, small group discussion and large group deliberations to reach a joint consensus.

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2025 Priority Actions

Priority Recommendation

1 In an emergency department, hospital, etc have an intervention to use Medications for Opioid Use Disorder following an overdose and access to more treatment, connections of services upon release.

Lead
ProHealth Care

Strategic Alignment
HTF, WCDHHS, WCS

Readiness
Yellow

Insights

Current status
Local hospital leaders have expressed support for advancing MOUD induction protocols, which were previously in practice before COVID. Implementation can be informed by well-established and widely available models.

Needs
Collect baseline data, learn what the current protocols are, understand the role of independent physician groups, conduct an environmental scan of services available, establish internal workflows, address barriers to employing and sustaining peer support services, explore a Waukesha County ED2Recovery model.

Barriers
Resources including staff time and program costs, underdeveloped follow up networks to support connections to services at and following discharge.

Priority Actions

- Establish workflows for MOUD induction and discharge planning.
- Address barriers to employing peer support services.
- Explore ED2 Recovery model.
- Expand and maintain referral network.

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2025 Priority Actions

Priority Recommendation

2 Better discharge planning for carceral and healthcare settings including finding the best fit & confirmed appointment date upon discharge for follow-up care.

Lead	Strategic Alignment	Readiness
WCDHHS	PHC, WCDHHS, WCPH, WCS, WI DOC	**Red**

Insights

Current status
A joint workgroup between Waukesha County Jail and Waukesha County DHHS is focused on expanding MOUD access and strengthening discharge planning. At present, MOUD is available in the jail only for a limited group. Partners are ready to support this work, though less is known about the current landscape in healthcare settings.

Needs
Collect baseline data and learn what the current protocols are, explore capacity to support improved discharge planning protocols, conduct an environmental scan of services available, explore the introduction of the ED2Recovery model in Waukesha County jail and hospitals.

Barriers
Resources including staff time and program costs, information privacy and security protections, jail is not represented on OFR team, insurance and healthcare disruptions.

Priority Actions

- Continue jail and DHHS workgroup.
- Learn what the current protocols are.
- Explore the ED2 Recovery model at the time of jail and hospital discharge.
- Gather information on current jail and hospital discharge planning protocols.
- Address resource limitations/barriers to improve jail or hospital discharge planning.
- Recruit jail to OFR team.

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2025 Priority Actions

Priority Recommendation

3 Establish a health alert network in collaboration with community partners

Lead	**Strategic Alignment**	**Readiness**
WCDHHS	WCDHHS	Yellow

Insights

Current status
A WCDHHS dedicated workgroup is currently designing a Health Alert Network with the support of local leaders. Interest and willingness to collaborate has been expressed by community partners.

Needs
Set a Waukesha County specific threshold, plan an awareness campaign of the Health Alert Network, build after-action steps into a written protocol, define a detailed alert response plan with defined steps and outcomes.

Barriers
Resources including staff time and program costs, funding availability and sustainability, coordination and unknown interest in partnering across agencies and resources.

Priority Actions

- Establish threshold.
- Build after-action plans into the protocol.
- Scale the protocol to match resources available.
- Increase Awareness of the Health Alert Network via communication campaign.

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2025 Priority Actions

Priority Recommendation

4 Emergently prioritize buprenorphine in carceral settings and continue treatment after release. Explore opportunities with long-acting buprenorphine as a strategy to make that easier.

Lead	Strategic Alignment	Readiness
WCDHHS	To be determined	**Red**

Insights

Current status
There is an established workgroup between Waukesha County Jail and WCDHHS focused on MOUD expansion and improved discharge planning protocols. Currently, MOUD in the jail is limited to specific groups.

Needs
Collect baseline data to understand who is currently being offered MOUD, learn what is available and offered through the current jail protocol, increase MOUD education and support to those incarcerated, survey MOUD interest for incarcerated people.

Barriers
Stigma, cost and coordination of Long Acting Injectable medications, OPSET funds don't cover correctional officer's time, challenges to collaborating, jail is not represented on OFR team.

Priority Actions

- Continue jail and DHHS workgroup.
- Review and document MOUD protocols in the carceral setting.
- Explore the introduction of the ED2 Recovery model at the time of jail discharge.
- Gather information on current jail discharge planning and MOUD induction/administration protocols.
- Address resource limitations/barriers to improve jail or hospital discharge planning.
- Recruit jail to OFR team.

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6

2025 Priority Actions

Priority Recommendation

5 Discharge from carceral settings with Narcan.

Lead	Strategic Alignment	Readiness
WCDHHS	WCDHHS, WI DOC	**Green**

Insights

Current status

Currently, there is an abundant supply of Narcan available to the jail. Narcan training is also available to incarcerated people. There is a jail policy and procedure that makes Narcan available upon release. There are a variety of Narcan access points within the jail where Narcan is available to people being released or visiting.

Needs

More information is needed to understand how incarcerated/reentering people are being notified of Narcan availability and what are the reasons for low Narcan utilization. Is Narcan being offered as an opt-out model?

Barriers

Currently, incarcerated people being released are not open to accepting Narcan. Possibly due to stigma and fear of revocation or arrest. Additionally, there are differences in risk reduction strategies across partners. Lastly, the jail is not represented on the OFR team.

Priority Actions

- Continue to supply the jail with Narcan.
- Explore reasons within current policy, procedure and practice for low Narcan utilization among people being discharged from jail.
- Survey the reentry population to understand how fear of revocation of arrest might factor into Narcan acceptance/utilization.
- Shift to an opt-out of Narcan at discharge model.

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2025 Priority Actions

Priority Recommendation

6 Advocate for automatic enrollment in benefits upon discharge from an institution.

Lead	Strategic Alignment	Readiness
WCDHHS	WCDHHS, WI DOC	**Red**

Insights

Current status
Currently, peer support specialists are working with people recently discharged from institutions. They are likely supporting people through benefits navigation in some capacity. There is a toolkit available through NACO to support this upstream advocacy work.

Needs
Evaluate the impact of institutionalization on benefits, including an analysis on how many people go into jail with benefits. More information is needed to understand cross-sector collaboration flows, current discharge planning practices, and definitions. Further, an exploration of the ED2Recovery model is needed.

Barriers
Barriers include stigma, program costs, staff time and potential cuts to medicaid.

Priority Actions

- Explore opportunities/barriers to maintaining benefits, pre-trial.
- Recruit jail to OFR team.
- Recruit Economic Support Services to OFR team.
- Continue jail and DHHS workgroup.
- Explore the introduction of the ED2 Recovery model at the time of discharge from Waukesha County institution.
- Gather information on current benefits navigations services available at the time of discharge from Waukesha County Institution.

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Sample Action Plan

Overview

In 2025, the Core OFR team of Waukesha County prioritized a strategy to mitigate local substance related health threats by establishing a health alert network. The goal of the network is to disseminate digital alerts across specified stakeholder networks when set thresholds have been reached, as it relates to substance related health events.

Recommendation #3

"Establish a health alert network in collaboration with community partners."

Goals & Objectives

Baseline and Literature Review

- **Objective:** Develop foundational guidelines for a health alert network protocol.
- **Action step:** Comprehensively review existing literature and guidelines to establish standardized procedures.
- **Measure(s):** Write a Waukesha County health alert network protocol with a loose framework.

Review Current Communication and Coordination Protocols

- **Objective:** Evaluate current communication and coordination protocols for emergency health alerts.
- **Action step**: Gather insights on challenges and successes within current communication flow and technologies used in alert dissemination.
- **Measure(s):** Design easy-to-understand workflows supported by responders and Public Information Officer's.

Test Health Alert Network Protocols

- **Objective:** Test and refine the health alert network protocols.
- **Action step:** Conduct simulation exercises and incorporate feedback from testers to address gaps and ensure reliability in real world conditions.
- **Measure(s):** Host "after-action" discussions. Incorporate lessons learned and suggestions into future strategies and procedures.

Integrate Partners into the Health Alert Network

- **Objective:** Develop and launch a communication campaign seeking health alert network partners.
- **Action step:** Identify stakeholders and create a targeted communication strategy to introduce and onboard a network of prospective partners.
- **Measure(s):** Total number of stakeholders identified, total number of network members signed on, and perceived value of joining network by members.

Continuous Feedback and Improvement

- **Objective:** Establish a feedback loop for continuous improvement of health alert network protocols.
- **Action step:** Routinely evaluate the effectiveness of the health alert network through surveys and interviews with network participants.
- **Measure(s):** Changes in network performance indicators (timeliness and reach), long-term participant engagement, effectiveness of response network.

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Sample Action Plan

Overview

In 2025, the Core OFR team of Waukesha County prioritized a recommendation to [texthere]. The goal of the recommendation is to [texthere].

Recommendation #[X]
"[priority recommendation here]"

Goals & Objectives

Subheader 1

- **Objective:** [Text here].
- **Action step:** [Text here].
- **Measure(s):** [Text here].

Subheader 2

- **Objective:** [Text here].
- **Action step**: [Text here].
- **Measure(s):** [Text here].

Subheader 3

- **Objective:** [Text here].
- **Action step:** [Text here].
- **Measure(s):** [Text here].

Subheader 4

- **Objective:** [Text here].
- **Action step:** [Text here].
- **Measure(s):** [Text here].

Subheader 5

- **Objective:** [Text here].
- **Action step:** [Text here].
- **Measure(s):** . [Text here].

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Suggested Actions

- Advocate for policy support and resource allocation to implement the priorities.

- Lead, invest in and promote cross-collaborative initiatives that align with these priorities.

- Engage leaders, community members, people with lived and living experience, and private sectors to expand resources and drive innovation.

- Foster partnerships and strengthen coalitions within the community to broaden the impact of these priorities.

- Secure and leverage technology to enhance project management, data driven decision making and communication.

- Utilize available toolkits and evidence-based practices to guide implementation based on proven methodologies within local contexts.

- Explore inter-institutional agreements between organizations to improve gaps in care.

- Develop a framework for monitoring the implementation and effectiveness of the priority recommendations, providing regular reports to stakeholders.

- Create a feedback mechanism for continual opportunity to refine and optimize implementation and strategic methods.

Conclusion

By combining action and investments around these top 6 priorities, local leaders, coalition partners and Overdose Fatality Review members can contribute to a planful and purposeful implementation of the top priorities with the goal of effectively reducing and preventing substance related deaths in Waukesha County.

Visualize Success

Professional Networks are Expanded

Barriers are Challenged Together

Bridges are Built Together

Support and Care is Easy to Access and Navigate

Wins are Shared and Celebrated!

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Gratitude

Special thanks to our OFR Steering Committee for participating in the first Strategic Alignment Workshop!

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Appendix

Readiness Definition

Readiness is the degree to which a community is prepared and positioned to act on a priority recommendation. *Each recommendation has been assigned a color based on perceived readiness with red being the least ready and green being the most ready.

Key components of readiness include:

Willingness   The level of support and openness to change from community members, leaders and organizations.

Difficulty   The level of barriers or complexity in implementing the recommendations.

Resources   The availability of funding, staffing, facilities, partnerships, training, technology and other supportive infrastructure.

*With the information currently available, each recommendation has been assigned a readiness level which is considered a subjective measure.

Agencies

Abbreviation	Definintion
HH	Hebron Housing Services
HTF	Heroin Task Force
PHC	ProHealth Care
VHPD	Village of Hartland Police Department
WCDHHS	Waukesha County Department of Health and Human Services
WCPH	Waukesha County Public Health
WCS	Wisconsin Community Services
WI DOC	Wisconsin Department of Corrections

Acronyms

Acronyms	Definintion
ED 2 Recovery Model	Peer support services within and outside of emergency department settings which can be used by employee recovery coaches and/or Wisconsin Certified Peer Support Specialists to provide support to individuals with an Opioid or Stimulant Use Disorder referred from emergency departments, first responders, the legal system and other community settings.
LAI	Long Acting Injectables
MOUD	Medications for Opioid Use Disorder
OFR	Overdose Fatality Review
OPSET	Opioid Settlement Funds

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