



# Overdose Fatality Review

WAUKESHA COUNTY

## Priority Recommendations Brief

Issue 01



*"Together, we can prevent substance related deaths."*

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Draft Released March 2026

Final Released April 2026

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# About This Report

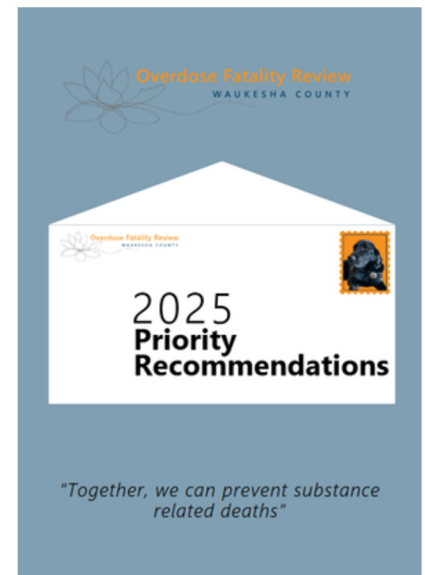
This report summarizes priority recommendation updates from the 2025 Overdose Fatality Review (OFR) cycle. It is the third publication released connecting directly to two previously published reports.

Each report offers different insights from the same Waukesha County OFR and together they provide a more complete picture of the program's priorities, progress and next steps.

Below you can view each report's cover page and the question(s) it attempts to answer:

*What are our priority recommendations to reduce and prevent substance related deaths?*

**Released July 2025**



*How can we align agencies, resources and actions to the priority recommendations?*

**Released December 2025**



*What has been learned, what barriers stand in the way, and what strategies do you suggest to address barriers to priority recommendations?*

**Released April 2026**



***"Together, we can prevent substance related deaths"***



# 2025 Priority Recommendation #1

Update: December 2025

Informed by Dr. Kristen Fox

## 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

## Focus

Intervention to use Medications for Opioid Use Disorder following overdose in the Emergency Department.

## Updates

### **What have you learned since the last update & what wins can you share forward?**

- **Protocol infrastructure in place:** A dedicated team at ProHealth is finalizing MAUD/AUD readmission-reduction protocols, an internal model designed to support substance use workflows and electronic medical records.
- **Emergency Department buprenorphine order sets are nearly ready:** Dr. Fox's team modernized ED buprenorphine order sets (updated from pre-COVID practice) with supportive workflows; the build is in final review and positioned for rollout.
- **Provider readiness is underway:** ProHealth is offering ED provider education for MAUD on new protocols; a similar training will be offered for buprenorphine induction.

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# 2025 Priority Recommendation #1

Update: December 2025

Informed by Dr. Kristen Fox

## What barriers or limits stand in the way?

- **Buprenorphine induction practice gap:** Guidance has changed significantly over the last five years. ED physicians may not have a lot of experience or awareness of buprenorphine induction and adoption may be lagging or inconsistent.
- **Access gaps for uninsured patients:** Patients without insurance have very limited options to continue MOUD after ED/hospital initiation.
- **Patient acceptance and misinformation (MAUD, relevant to SUD education overall):** Low acceptance of MAUD is driven by misunderstanding and fear of side effects (e.g. the belief that medications will make them sick if they consume alcohol), pointing to broader education needs that also affect MOUD uptake.
- **Service disruption risk:** The Sixteenth Street Community Medical services closed on December 20, 2025 which reduced local prescriber capacity.

## What specific strategies do you suggest to address barriers?

- **Replicate the MAUD protocol development model for MOUD:** ProHealth is using the same cross-functional approach (workflow + EMR build + training) to modernize buprenorphine induction and discharge planning in ED/hospital settings.
- **Implement provider training tied to new tools:** ProHealth is rolling out education to support consistency to updated buprenorphine induction protocols.
- **Education to patients about MAUD/MOUD:** provide education regarding side effects of current MAUD/MOUD medications to patients so they can make informed decisions based on accurate information.

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# 2025 Priority Recommendation #1

Update: December 2025

Informed by Dr. Kristen Fox & Terri Phillips

## 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**



### Focus

Access to treatment and connection of services upon release from the Emergency Department.

### Update

#### **What have you learned since the last update & what wins can you share forward?**

- **ED2 Recovery approved by legal department:** ProHealth is positioned to strengthen linkage to care upon discharge for eligible populations.
- **Community partners have adopted Unite Us:** ProHealth Care, Hebron Housing Services, and more community partners have adopted the IMPACT connect technology to facilitate “warm hand offs”. This technology is closed loop referral system that connects patients across systems such as from an emergency department to a housing service.
- **Wisconsin Community Services (WCS) peer support program is funded for 2026:** Peer support specialists could be embedded in the ProHealth emergency department to coordinate continuity of care upon release.

#### **What barriers or limits stand in the way?**

- **ED2 Recovery onboarding complexities:** Bringing peers into ED/hospital settings has significant legal/operational requirements. It also increases the workload for ProHealth teams.
- **ED2Recovery sustainability risk:** Funding is uncertain.
- **Limited treatment “step-down” options available locally:** Shortage of Waukesha County Medicaid accepting step-down partners limits discharge planning options and continuity of care related to MOUD initiation.

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# 2025 Priority Recommendation #1

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Update: December 2025

Informed by Dr. Kristen Fox & Terri Phillips

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## What specific strategies do you suggest to address barriers?

- **Waukesha County participation in a closed loop referral platform like Unite Us:** As a primary provider of social determinants of health services, Waukesha County should participate in a program like Unite Us. Participating in a closed loop referral alongside community partners will strengthen continuity of care upon release from emergency departments, carceral settings, and more.
- **Utilize Rogers WORTH IT Program:** A low barrier, telehealth prescribing program that could be helpful for qualifying patients without insurance

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# 2025 Priority Recommendation #3

Update: December 2025

Informed by Stephanie Engle

## Priority Recommendation

**3** Establish a health alert network in collaboration with community partners

### Lead

WCDHHS

### Strategic Alignment

WCDHHS

### Readiness

Yellow

### Focus

General overview of the Spike Alert Network.

### Update

#### **What have you learned since the last update & what wins can you share forward?**

- **The Spike Alert Network five-tiered protocol has been written:** Following the NACCHO guidance, writing the spike alert network protocol was straightforward. There are state and national resources available to support the Spike Alert Network design.
- **Alignment with CSTE standards:** Regardless of which protocols are adopted and exercised, the spike alert should be aligned to a reasonable extent, with the CSTE standards through the PHAST Overdose Anomaly Toolkit.
- **WiSOARR:** Available to the professional substance use prevention community.

#### **What barriers or limits stand in the way?**

- **Scope and scale:** There is uncertainty on the scope and scale of the project and the level of organizational and financial support for a Spike Alert Network protocol.
- **Spike Alert Network sustainability:** Funding is uncertain.

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# 2025 Priority Recommendation #3

Update: December 2025

Informed by Stephanie Engle

## What specific strategies do you suggest to address barriers?

- **Engage leaders:** Engage Waukesha County leaders to help determine scale, scope and intended impact of the Spike Alert Network.
- **Tier 1 internal pilot:** Consider a small-scale tier 1 exercise pilot project with internal Waukesha County departments to test feasibility and refine strategy.
- **Build out Spike Alert Network:** Explore funding options, develop metrics to measure program effectiveness and impact, and engage stakeholders early to build support and awareness.

# 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:**

<b>Willingness</b>	The level of support and openness to change from community members, leaders and organizations.
<b>Difficulty</b>	The level of barriers or complexity in implementing the recommendations.
<b>Resources</b>	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

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

## Acronyms

<b><u>Acronym</u></b>	<b><u>Definition</u></b>
<b>CSTE</b>	Council of State and Territorial Epidemiologists
<b>ED 2 Recovery Model</b>	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.
<b>LAI</b>	Long Acting Injectables
<b>MAUD</b>	Medications for Alcohol Use Disorder
<b>MOUD</b>	Medications for Opioid Use Disorder
<b>NACCHO</b>	National Association of City and County Health Officials
<b>OFR</b>	Overdose Fatality Review
<b>OPSET</b>	Opioid Settlement Funds
<b>PHAST</b>	Public Health and Safety Teams