Overdose Fatality Review

WAUKESHA COUNTY

2026 Priorities in Action: A Roadmap to Impact



"Together, we can prevent substance related deaths."

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Activities Summary

On April 15, 2026, the OFR Steering Committee convened for the second 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 five priority recommendations determined by the Core OFR team in January of 2026.

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



Draft Released October 2026 **Final Released November 2026**

"Together, we can prevent substance related deaths"

Structure & Methods



Participants

Multidisciplinary representatives included City of Waukesha Police Department, Family Service with Addiction Resource Council, Hebron Housing Services, NAMI Southeast Wisconsin, Waukesha County Department of Health and Human Services, Waukesha County Heroin Task Force, Waukesha County Medical Examiner's Office, Waukesha County Public Health, Waukesha County Sheriff's Department, Wisconsin Community Services, and Wisconsin Department of Corrections.

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 2026 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 reflection, small group discussion and large group deliberations to reach a joint consensus.

2026 Priority Actions

Priority Recommendation

1 Implement a shared care-coordinated system (e.g. Unite Us) to connect individuals across healthcare, justice, and community settings with housing, healthcare and other social determinant supports.

Lead	Strategic Alignment	Readiness
HH WCMEO	CWPD, FSARC, HH, NAMI, WCDHHS, WCHTF, WCPH, WIDOC	Yellow

Insights

Current status

There is strong interest in a shared care-coordination system, and members see clear value in the concept. Waukesha County agencies have begun exploring this through peer learning. There are important pieces already in place that can support future development, including a health information network, participating community partners, and connection to IMPACT 211. Some Waukesha County healthcare and community-based organizations are already using the IMPACT Connect platform and there is growing familiarity across the community with how a coordinated referral system could improve access to housing, healthcare, and other supportive services.

Needs

As community agencies consider a shared care-coordination system, members identified several needs to support thoughtful planning. This included requesting a complete list of currently participating agencies, building a shared understanding across agencies about the HIPAA and 42 CFR Part 2 protections built into the platform, explore whether other platform options should be considered. Members are curious about participation interest from all Waukesha County health systems, and whether community-based agencies have the resources they would need to integrate the technology into their current workflows. Also, what associated costs and funding opportunities are available.

Barriers

Members recognized that successful implementation will require time, coordination, and broad partnership across systems. Cost, staffing, and project management capacity will all need to be considered, particularly if the community wants to build a model that is sustainable over time. Members also noted that the strength of any coordination platform will depend in part on the availability of community resources such as access to treatment, housing supports and other services. Attention to system integration, confidentiality, and information-sharing processes will also be important as partners work together to build alignment and trust.

Priority Actions

- Build a practical foundation for collaborative implementation.
- Begin with requesting a comprehensive list of participating agencies across healthcare, justice and community systems.
- Request shared education on the platforms HIPAA and 42 CFR Part 2 in the context of care coordination.
- Review other referral software/platform options.
- Assess local health system participation and cost for participating in platform.
- Identify funding, staffng and implementation needs.
- Ensure the system is built in a way that is both responsive and realistic for local providers.

2026 Priority Actions

Priority Recommendation

2 Evaluate availability and efficacy of treatment available in jails and prisons and expand access to co-occuring mental health and substance use treatment for individuals within jail and DOC systems. More providers in the jail, including behaviorial health and treatment providers, with intensive substance use treatment options available across all Wisconsin prisons.

Lead	Strategic Alignment	Readiness
WCDHHS WCSD WIDOC	WCDHHS, WCSD, WIDOC	Yellow

Insights

Current status

There is a strong foundation for this work, with several encouraging developments identified by OFR members. In March 2026, the Wisconsin Policy Forum release *Treatment Behind Bars*, a report that provides valuable context on the availability of MOUD across Wisconsin jails. Members also noted progress in prison settings, including expansion of treatment options and incentives for individuals to participate in treatment. Locally, the Waukesha County Jail is nearing implementation of an MOUD induction program. The OFR team also identified the importance of jail participation, and now the jail administrator is represented on the Core and Steering Committee's; a meaningful step towards strengthening coordination and advancing this work.

Needs

Members expressed a need for more clarity about what Wellpath can provide, whether there is a concrete plan to increase the numbers of providers, and how success should be measured. They also noted the importance of distinguishing between jail and prison systems, as these are separate systems with different operational realities. There was also interest in clarifying whether the emphasis should be on treatment while incarcerated, transition planning upon release, or both. Overall members identified a strong need to better define the scope of the recommendation and determine whether Waukesha County Jail should be the initial focus before expanding to DOC settings.

Barriers

The barriers discussed were primarily operational and resource related. DEA registration is a current barrier to full Waukesha County Jail MOUD implementation though it was reported as in process. Additional barriers include jail staff capacity, broader organizational capacity-building needs, funding limitations, and staff shortages. The need for stronger inter-discplinary partnerships was noted as a barrier to moving the work forward effectively.

Priority Actions

- Define the scope of the recommendation clearly including whether the initial focus should be on Waukesha County Jail or Wisconsin Prisons.
- From there, document current services and gaps, including the role of Wellpath and the present status of MOUD and co-occurring treatment access.
- Focus action on resolving operational requirements such as DEA-related needs, while also developing a realistic staffing, funding, and partnership plan to support expansion.

2026 Priority Actions

Priority Recommendation

3 Increase recovery coach or peer support specialist outreach to individuals with substance use disorder in emergency department and inpatient hospital settings.

Lead	Strategic Alignment	Readiness
WCS	FSARC, WCDHHS, WCHTF, WCPH, WCS, WIDOC	Yellow

Insights

Current status

Members noted similar work and success already happening in Milwaukee which provides a useful model for local consideration. They also identified Wisconsin Voices for Recovery as a strong resource and noted that the use of peer support is increasing more broadly. Chapter DHS 72 established certification and reimbursement requirements for peer recovery support services making it a reimbursable service under certain criteria. Waukesha County and the state of Wisconsin have offered free or reduced training courses to become certified peer support specialists; expanding peer recovery options.

Needs

Several areas were identified where more information is needed before local implementation can move forward. These include whether hospitals will commit foundational or startup funding to integrate peer recovery services, how the billing works in practice, and whether grant funding is available to support implementation. More information that would be helpful to consider is the effectiveness of peer support in these settings, whether reimbursement through DHS 72 could meaningfully close the funding gap, and whether a peer support pool can be reliably funded, managed and maintained.

Barriers

The primary barriers were related to workforce stability, funding, and operational structure. Background check requirements can create challenges, and questions remained whether a peer support pool can be reliably funded, managed and maintained in Waukesha County. Other questions were about the best model for implementation including who employs the peers and how the work is managed. Legal and risk concerns were also identified along with ongoing challenges related to funding and oversight of CPSS roles across both mental health and substance use systems.

Priority Actions

- Clarify the service model including the scope of work, the hospital settings involved, and the structure for employment and supervision of peer staff.
- Identify available information related to CPSS billing, reimbursement, effectiveness, and grant opportunities to determine whether these are sufficient to support implementation.
- Recruit, retain, and support a pool of peer specialist, while reviewing Milwaukee and Wisconsin models for lessons that could inform local design.

2026 Priority Actions

Priority Recommendation

4 Place QR codes in restaurant and hospitality bathrooms and common areas to connect patrons and staff to local overdose prevention and treatment resources.

Lead	Strategic Alignment	Readiness
NAMI WCHTF WCPH WCS	CWPD, FSARC, NAMI, WCDHHS, WCHTF, WCPH, WCMEO, WCS, WIDOC	Green

Insights

Current status

This recommendation already has strong momentum and a base of support. Members identified a clear campaign concept, available funding, and active involvement from OFR and HTF members. Waukesha County Environmental Health partnered with Public Health to reach more than 2,250 licensed establishments countywide through its annual license renewal newsletter. In the May 2026 Environmental Health newsletter, Waukesha County Public Health included a brief promotion of the QR code/poster initiative, which would connect individuals to overdose prevention and treatment resources.

Needs

To support succesful rollout, several planning needs can help strengthen the campaign. These include, clarifying workflows, defining the teams capacity and the project scope, and identifying the most effective strategies for placing materials in local establishments. More information about the impact of similar strategies in other communities, how this work might be expanded into other settings, what prevention and treatment resources should be highlighted, and how usage data could be tracked, could all be helpful. Understanding the staffing and support needed for implementation and evaluation will also help ensure the effort is manageable and effective.

Barriers

This effort will benefit from thoughtful coordination, clear communication, and strong community partnership. Time, project management, and staff capacity will all need to be organized carefully, and business participation will be essential to broaden the reach.

Priority Actions

- Design a coordination plan with clear roles, workflow, and responsibilities.
- Partner with OFR, HTF, Environmental Health and Public Health to share ownership in the campaign.
- Establish a plan for tracking and measuring reach.
- Assess expansion into additional settings when feasible.

2026 Priority Actions

Priority Recommendation

5 In an emergency department, hospital etc. have an intervention to use Medications for Opioid Use Disorder following an overdose and access to more treatment, connection to services upon release and expand the criteria for patients with substance use disorder.

Lead	Strategic Alignment	Readiness
No lead	HH, WCDHHS	Yellow

Insights

Current status

There is already a promising foundation for this work. Members identified existing models in Wisconsin that can help inform local planning, and they noted that emergency departments are already well positioned with prescribers available. ProHealth is building a model, and hospitals and community partners appear to recognize the importance of strengthening intervention and follow-up after overdose. Related efforts, including the WORTH IT program, are also a part of the local landscape and the jail has been promoting awareness of the low barrier and accessible MOUD program.

Needs

Members identified several areas where additional clarification would help shape a stronger community response. These include understanding who is responsible for follow up in the community after hospital discharge, whether there are enough communtiy resources available to support ongoing care, and how programs such as Rogers WORTH IT initiative fit into the broader response model. Members also want more information about how treatment that begins in the Emergency Department can continue successfully over time and what the current criteria are for follow-up after discharge.

Barriers

Members recognized that building a strong post-overdose response will require a shared commitment across hospital, treatment, and community-based organizations. Key considerations include patient engagement in follow-up, provider and prescriber support for MOUD initiation and continuation, and the overall strength of the follow-up process after discharge. Members also noted that ongoing access to medications, visibility into available treatment resources, and the development of a robust referral network will all be important to making this work effectively and sustainably.

Priority Actions

- Define clear continuity of care pathways that begin in the emergency department and extend into community-based follow-up and treatment.
- Identify who is responsible for follow-up after discharge, map available treatment and recovery resources, and clarify how existing efforts such as WORTH IT can align with broadening access to care.
- Work together to strengthen hospital and prescriber engagement, support continued access to MOUD, establish clearer expectations for follow-up so that individuals leaving care experience a more connected and supportive system response.

Sample Action Plan

Overview

In 2026, 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].

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 5 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



"Together, we can prevent substance related deaths"

Gratitude

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

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Questions or Comments?
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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
CWPD	City of Waukesha Police Department
FSARC	Family Services with Addiction Resource Council
HH	Hebron Housing Services
NAMI	NAMI Southeast Wisconsin
WCDHHS	Waukesha County Department of Health and Human Services
WCHTF	Waukesha County Heroin Task Force
WCMEO	Waukesha County Medical Examiner's Office
WCPH	Waukesha County Public Health
WCS	Wisconsin Community Services
WCSD	Waukesha County Sheriff's Department
WIDOC	Wisconsin Department of Corrections

Acronyms

Acronyms	Definintion
HIPAA	Health Insurance Portability and Accountability Act of 1996
DEA	Drug Enforcement Administration
DOC	Department of Corrections
HTF	Heroin Task Force
MOUD	Medications for Opioid Use Disorder
OFR	Overdose Fatality Review
OPSET	Opioid Settlement Funds