

# Overdose Fatality Review

## Winnebago County, Wisconsin

### Annual Report 2019-2020

***Overdose deaths are preventable.***

The purpose of this team is to prevent overdose deaths. The team accomplishes this purpose by examining individual, organizational, and systems level factors related to overdose deaths that occur in Winnebago County. The reviews focus on systems level change to prevent future deaths and not on identifying fault in organizations or individuals connected to the death being reviewed.

## BACKGROUND

Winnebago County established their Overdose Fatality Review (OFR) team in early 2018 when the Winnebago County Drug and Alcohol Coalition's Data team wrote and was awarded an Overdose Fatality Review grant from the Department of Justice and Wisconsin Department of Health Services (DHS). As part of this grant we receive technical assistance from Medical College of Wisconsin and Wisconsin DHS. Overdose deaths have been consistently growing since 2001. Even though we've seen a decrease in this past year, overdoses remain high and we expect an increase in 2020 due to COVID-19. Our OFR team has continued to look at the root causes of these overdoses and system level changes we can make to help save lives.

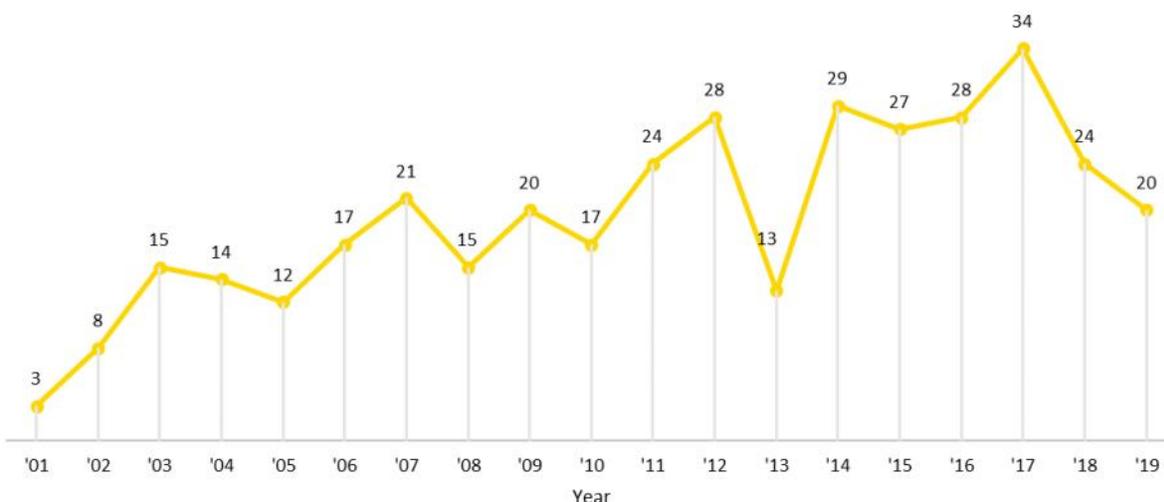
## THE REVIEW PROCESS

From September 2019 – August 2020, the Overdose Fatality Review team reviewed 8 deaths. The process involved each partner sharing information about the decedent's life and death, discussion of risk factors and circumstances surrounding each decedent, examination of system issues related to addiction and substance use, and identification of opportunities to influence policy and practice to prevent future overdoses and overdose deaths. Confidentiality is maintained through inter-agency memorandum of understandings (MOUs), signed agreements at each meeting, and de-identification of the decedent during the review meeting. The process is designed to maintain the highest levels of respect for the decedent, those impacted by the death, the partner agencies in the room, and the broader community.

### PARTNER AGENCIES

Addiction Medical Solutions of Wisconsin (AMS), Appleton Field Office, Appleton Police Department, Apricity, Ascension, Aurora Medical Center of Oshkosh, Aurora Pharmacy, City of Menasha Health Department, City of Menasha Police Department, City of Oshkosh Fire Department/Emergency Medical Services, City of Oshkosh Police Department, Community Church, Day by Day Warming Shelter, Department of Justice, Fox Crossing Police Department, Fox Valley PRISM Team/Unity Recovery Services, Gold Cross Ambulance Service, Gloria Dei Lutheran Church, Hometown Pharmacy, Lake Winnebago Area Metropolitan Enforcement Group, Neenah Police Department, Northeast Wisconsin Mental Health Connection, Nova Counseling Services, Omro Police Department, Oshkosh Area School District, Partnership Community Health Center, Samaritan Counseling Center of the Fox Valley, Solutions Recovery, Inc., ThedaCare, The daCare Behavioral Health, University of Wisconsin Oshkosh Police Department, Village of Winneconne Police Department, Winnebago County Coroner's Office, Winnebago County Health Department, Winnebago County Human Services Department - Behavioral Health, Winnebago County Safe Streets Committee (Criminal Justice Coordinating Committee), Winnebago County Human Services Department - Child Welfare, Winnebago County Office of the District Attorney, Winnebago County Sheriff's Office, Winnebago County Sheriff's Office - Jail, Wisconsin Department of Corrections.

### THE NUMBER OF OVERDOSE DEATHS HAS DECREASED IN RECENT YEARS YET STILL REMAINS HIGH



# DATA ON ALL 2019 OVERDOSE DEATHS IN WINNEBAGO COUNTY

While this report is 2019-2020, we only have confirmed data for 2019, which is presented in this report. In 2019, there were 20 overdose deaths in Winnebago County.

**SEX:** 16 Males, 4 Females

**AGE RANGE:** 22-56 Years-old

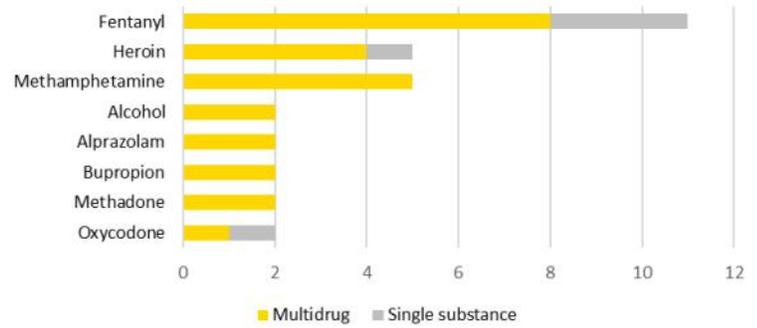
**RACE/ETHNICITY:** Overdoses affect individuals of all races and ethnicities and they occur at disparate rates: 75% White, 25% Hispanic/Asian/Black

**GEOGRAPHIC LOCATION OF DEATH:** 10 City of Oshkosh, 4 City of Neenah, 3 City of Menasha, 2 Village of Fox Crossing, 1 City of Appleton

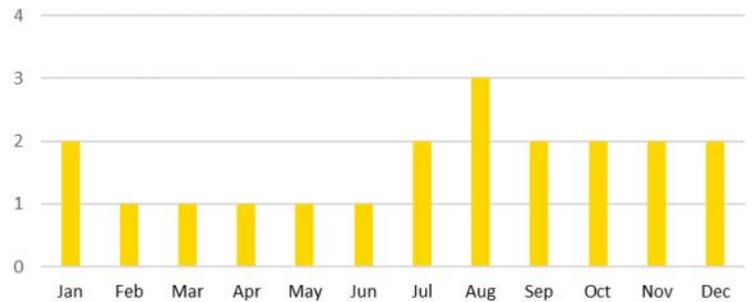
There were no significant differences between 2018 and 2019 trends. We expect 2020 to demonstrate differences based on preliminary data.



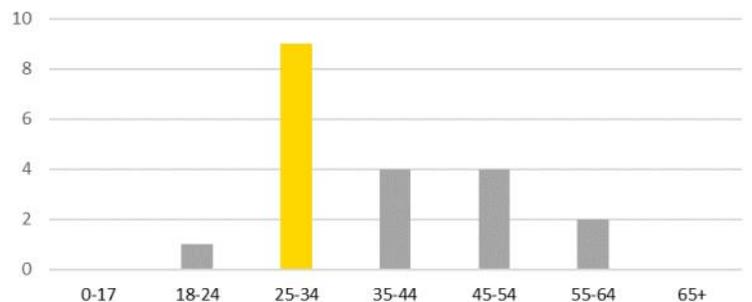
## IN 2019, FENTANYL HAD A ROLE IN 11 OVERDOSE DEATHS



## IN 2019, THE MAJORITY OF OVERDOSE DEATHS OCCURRED IN THE SECOND HALF OF THE YEAR



## IN 2019, THE MAJORITY OF OVERDOSE DEATHS OCCURRED AMONG INDIVIDUALS AGED 25-34



# THE EFFECTS OF COVID-19 IN WINNEBAGO COUNTY

Preliminary estimations lead us to expect an increase in overdose deaths for 2020 due to COVID-19.

## DEATHS OF DESPAIR

*“More Americans could lose their lives to deaths of despair, deaths due to drug, alcohol, and suicide, if we do not do something immediately. Deaths of despair have been on the rise for the last decade, and in the context of COVID-19, deaths of despair should be seen as the epidemic within the pandemic.”*

- *Projected Deaths of Despair from COVID-19 report (2020) by Wellbeing Trust*

The OFR team review process, our partners, and the people we aim to support were all impacted by COVID-19. We saw increased substance use, more overdoses and overdose deaths, and relapses in recovery. The OFR team felt the urgency of our work. During COVID-19, we continued to meet virtually to share changes to service, find ways to collaborate, and to serve those in need.

## CHANGES IN CONDITIONS:

- Loss of jobs and income
- Delays in unemployment assistance
- Increase of income (for some) due to unemployment
- Food insecurity
- End of eviction moratorium and loss of homes
- Limited childcare services
- K-12 shutdowns and virtual learning
- Limited and changing access to social, medical, and mental health/substance use services
- Isolation from social distancing measures; loss of support and strain on mental health

## SUCCESSSES & CHALLENGES IN SERVICE RESPONSE

### **Successful changes to service related to COVID-19:**

OFR partners reported that the move to telehealth, virtual treatment services, and virtual recovery support meetings were successful. To reduce the risk of COVID exposure and spread, state policies allowed for an increase of doses per visit for medicine assisted treatments. A 24/7 drug-free program was expanded as a condition of bond. Narcan and Fentanyl test strip distribution increased.

### **Needs and gaps in services identified:**

Some challenges we saw included inability to offer in-person crisis care, counseling, and peer support, which limited referrals and access to services. Recovery services were not initially classified as “essential” by the state, resulting in sudden closure of groups and organizations. Access to services for those without internet was extremely limited as libraries and shops typically used were closed. The justice system (i.e. law enforcement, courts, and jail) could no longer serve as an access point to treatment. Residential treatment programs and sober living options had waitlists due to group housing restrictions. The swiftness and length of the COVID-19 pandemic led to uncertainty in how to access and refer those suffering to resources and help.



# MAJOR THEMES FROM DEATHS REVIEWED IN 2019-2020

**Narcan Administration:** First responders administered Narcan/naloxone, but no decedent carried Narcan and most were found alone without anybody to administer.

**Location of Incident:** 88% of incidents occurred at a place of residence such as the home of the decedent or their friend/family.

**Family History:** Most decedents witnessed significant substance use by others in the home when they were young. Some experienced the substance use death of a loved one.

**Early Initiation:** Many decedents had documented substance use at an early age [10-15]. Early substance use is a risk factor for disordered use in the future and can be attributed to childhood trauma, family history, and ease of access to drugs and alcohol.

**Mental Illness:** All decedents had a history of mental illness. Minimal diagnosis, limited recognition of mental health in scope of the substance use, and the access to mental health services for those with substance use disorders were contributing factors that led to the overdose deaths of some in our community.

## 2020-2021 PRIORITIES

*Recommendations on the following page move forward priorities, which reflect what was learned from the lives of decedents in our community. Recommendations will be developed to continue to impact these priority areas.*

### MENTAL HEALTH

Overdose deaths are considered deaths of despair and are deeply connected to mental health needs. We will prioritize how mental health is treated and supported for those that also have substance use disorders.

### CHILD TRAUMA

To reduce continued exposure to trauma and improve support to those that have experienced trauma, we will prioritize how child trauma is addressed and what support is needed for youth, families, and agencies that serve youth in our community.

### RECOVERY SUPPORT

Recovery that includes support (instead of shame and stigma), sober living/working spaces, and community gatherings that are substance-free can help prevent future overdoses and relapses. Recovery-friendly interventions and recommendations will be prioritized.

### COMMUNICATION OF LESSONS LEARNED

Each sector of our community brings valuable insight into how we can impact and reduce overdoses and overdose deaths. We will prioritize improvements to how we share lessons learned, challenges, and needs to our community. The prevention of overdose deaths calls for a community-wide response.



# 2019-2020 OVERDOSE PREVENTION RECOMMENDATIONS

We continue to work on past recommendations as we develop new recommendations through our reviews and work together. These are recommendations that the OFR team established since our previous annual report.



**1. Explore the expansion of Victim Crisis Response (VCR) to serve all areas of Winnebago County.**

*Family and childhood trauma can occur from the sudden loss of a loved one. An expansion of Victim Crisis Response to include all of Winnebago County would offer immediate response to the needs of victims, especially children, at the time of an overdose death.*

**2. Offer training and support to law enforcement agencies in Winnebago County regarding trauma informed care.**

*A history of trauma has been connected to nearly all decedents of overdose deaths through our reviewed cases. Support and expansion of training to law enforcement to offer a trauma informed response at the time of calls related to substance use can reduce further trauma of children and loved ones (i.e. safe place for children and loved ones) and for officers who face secondary trauma.*

**3. Promote and share resources to family/friends of substance users for the purpose of recognizing signs/symptoms of substance use disorder and to connect to support services.**

*Family and friends do not always know how to recognize when substance use has become a problem that requires help, how to connect their loved one to the help that is needed, or what resources and services are available in our community.*

**4. Support and expand a substance free culture that engages many stakeholders in our community which focuses on the support of individuals and families who are on a path to recovery.**

*To prevent and reduce substance use, support recovery, and be a healthier community for all, we must support and foster community activities, workplaces, and an overall culture that are substance free.*

**5. Support efforts to establish a community-based supervision program, Winnebago Connect, that works with people in the justice system to quickly gain access to treatment and recovery services, community resources, and case management.**

*Alternative and diversion programs, such as Drug Court, increase long-term recovery and reduce recidivism through access to treatment, recovery, and support services. Many individuals do not qualify for Drug Court, which requires a felony charge. Winnebago Connect offers opportunity for those with touchpoints in the justice system to connect to mental health and substance use services.*

**6. Implement Zero Suicide framework across health, behavioral health, and substance use providers and systems (short-term goal).**

*The use of substances has been a method of lethal means (suicide attempts and completions) in Winnebago County. Supporting the NEW Mental Health Connection in the implementation of the Zero Suicide framework by engaging substance use providers and systems is critical to the reduction of suicide deaths.*

**7. Implement Zero Suicide framework across all community systems (long-term goal).**

*Engage community systems to reduce suicide deaths in our community by implementing the Zero Suicide framework with the N.E.W. Mental Health Connection. Substance use has been a method of lethal means for suicide attempts and completions in Winnebago County.*

# PROGRESS MADE ON PREVIOUS RECOMMENDATIONS

Building on our recommendations we shared in our 2018-2019 Annual Report, we have taken action on many of them. The following includes updates on our successes, work we've accomplished, and work we have to do.

PREVIOUS RECOMMENDATIONS	PROGRESS MADE
Create a referral-to-help card that partners can share with at-risk individuals and their loved ones.	<i>The We Heart You card is now in 10 counties, serving as a touchpoint opportunity for connection to services.</i>
Support the launch of the Law Enforcement Addiction Assistance Program (L.E.A.A.P.) in Oshkosh.	<i>We continue to evaluate this program, which has expanded to include those with substance use disorders involving any substances, not limited to opiates.</i>
Leverage chaplain/faith community services in overdose related incidents.	<i>Chaplains and faith leaders have refocused this recommendation to the support, training, and resources for faith communities to connect the people they serve to services. A guide titled "A Healing Response to Substance Use" along with an instruction video has been created for faith leaders, staff, and volunteers.</i>
Explore EMS/fire departments mapping drug overdoses and interactions to provide intervention for help and improve access to services and referrals.	<i>A taskforce evaluated mapping systems that can help prevent overdoses. We will pilot ODMAP for 6 months to see if it's a system that can meet the community's needs; this pilot began on August 1, 2020. We are now exploring the feasibility of implementing a rapid response initiative to offer assistance after an overdose.</i>
Ensure Narcan/naloxone distribution in Winnebago County through the health department and partners.	<i>Winnebago County Health Department offers Narcan/naloxone to community residents and has exceeded its supply issued through a state program; additional supplies granted to meet our community's need. Access to Narcan/naloxone continued throughout COVID-19.</i>
Promote Narcan/naloxone access to those that use substances, even for those that do not plan to use opiates due to synthetic opiates mixed into other drugs.	<i>Communication continues with our community to keep Narcan/naloxone on hand, regardless of the substance used. Efforts are ongoing and require regular evaluation.</i>
Expand overdose prevention and Narcan/naloxone training for people who interact with those that may use drugs; work with CPR training services to incorporate Narcan/naloxone training into their standard service.	<i>Progress still needs to be made to incorporate the use of Narcan/naloxone deployment into regular CPR training offered through programs in our community. Evaluation of training needs for agencies still needs to be conducted.</i>
Work with local pharmacists to establish best practices when using the Wisconsin Prescription Drug Monitoring Program (PDMP) as prescriptions are distributed.	<i>State representatives from the PDMP program present to community partners how to better utilize the system. Progress needs to be made to work with local pharmacists and providers to improve PDMP use.</i>
Support state policy that allows peer support for substance use to be a billable service covered by insurance and medical assistance.	<i>Statewide policy has been enacted in early 2020 to allow for Peer Recovery Services to be billable services for those receiving medical assistance. Administrative rules are being drafted to allow for this policy to be implemented.</i>
Create a regional (cross-county) response team to work with those identified as high-risk for overdose; similar to a crisis intervention team.	<i>We are reviewing a Rapid Response Team model in Milwaukee and others in the country, to identify what type of response could be effective in Winnebago County.</i>
Expand and adapt the Law Enforcement Addiction Assistance Program (L.E.A.A.P.) regionally base on successes and learnings from the Oshkosh and Appleton programs.	<i>Menasha Community Addiction Assistance Program (M.C.A.A.P.) was created and includes Menasha's Health Department, Police Department, Public Library, Neenah/Menasha Fire Department, Gold Cross Ambulance, and Fox Valley PRISM team. The program has served over 100 people with connection to peer support and other substance use services in less than a year.</i>

# A COMMUNITY CALL TO ACTION

This work requires a community response. We are all impacted and we all have a role in reducing substance use and preventing overdose deaths. Here are some actions you can take to help!

## BE A CONNECTION TO CARE

**WE HEART YOU CARDS:** Use these referral cards, which can be requested by calling 920-232-3000, to connect people with substance use issues and their friends and family to resources in our community.

**NARCAN ACCESS:** Life saving Narcan/naloxone is available in Oshkosh through the Winnebago County Health Department, call 920-232-3000 and at Vivent in Appleton, call 920-733-2068.



## GET INVOLVED

**COMMUNITY LEVEL SUPPORT:** This work, the work of the review process and the implementation of recommendations that stem from the review process, requires resources. Those resources come in many forms (e.g., time, data, knowledge, and money). Please consider how you may be able to contribute your resources to the work of the Overdose Fatality Review Team and the broader community work around overdose death prevention and substance use reduction.

**BREAKWATER:** A Community Together. Formerly the Winnebago County Drug & Alcohol Coalition, Breakwater is focused on preventing substance use in our communities. We also work to strengthen community collaboration and implement many of the recommendations made by the OFR Group. Visit [www.breakwaterwi.org](http://www.breakwaterwi.org) to learn more about Breakwater and how you can get involved and support the health and resilience of our communities.



**COMMON TABLE:** Faith communities are on the front lines of substance use; responding to and counseling individuals, friends, and family that are impacted. This brief guide was created for faith leaders to help you connect individuals to services and care they may need. Our community has many great treatment and recovery resources and support services. You can be a trusted bridge to offer a healing response to substance use for those in need.

**SOUNDING BOARD:** To make sure our work is relevant, the OFR team decided that we needed to have more people in recovery around the table, as well as gaining input from people struggling with addiction, those in recovery, and those as community advocates. The OFR Sounding Board is meant to have members from the OFR team as well as community members to dive into some of the approved OFR recommendations. The goal is to understand if the recommendations are relevant, what needs to be changed/added, as well as how to implement the recommendations in the community.

## CONTACT INFORMATION:

OFR support is coordinated through the Winnebago County Health Department. Jennifer Skolaski, the OFR facilitator, can be reached by email at: [jskolaski@co.winnebago.wi.us](mailto:jskolaski@co.winnebago.wi.us)