



LANCASTER COUNTY OVERDOSE FATALITY REVIEW

2024 Annual Report

January 1 – December 31, 2024

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BACKGROUND

The Lancaster County Overdose Fatality Review (OFR) team is a multidisciplinary group convened to strengthen community responses to Lancaster County overdose deaths through collaborative review and system-level improvements. Operating under the authority of Pennsylvania Act 101 of 2022, the team meets bi-monthly to confidentially review individual fatal overdose cases, analyze patterns, and develop actionable recommendations aimed at strengthening public health, behavioral health, criminal justice, and community systems.

In 2024, the OFR team reviewed a total of eight overdose fatalities occurring within Lancaster County. These reviews revealed ongoing challenges related to care transitions, barriers to substance use and mental health treatment, recovery support services, and gaps in information sharing between organizations. Based on these findings, the team developed targeted recommendations to support more coordinated, community-driven responses to prevent overdose fatalities.

This report highlights key findings from the 2024 case reviews, including recurring themes and opportunities for system-level improvement. It also documents the challenges encountered in conducting reviews, and proposed strategies to strengthen the county's overall response to overdose deaths.

The Lancaster County OFR team remains focused on translating these insights into action - working alongside local partners to improve care coordination, address service gaps, and reduce preventable overdose fatalities in our community.

OFR TEAM OVERVIEW

The Lancaster County Overdose Fatality Review (OFR) team was established to bring together partners from across sectors to collaboratively review overdose fatalities and identify opportunities for prevention and system improvement.

The team operates through Penn Medicine Lancaster General Health's Community Health and Substance Use Prevention initiatives and operates under the guidance of the Pennsylvania Department of Health, as outlined in Act 101 of 2022.

The OFR team includes representatives from sixteen agencies and organizations across multiple disciplines. The team also includes five trained interviewers who conduct voluntary next-of-kin interviews, providing additional insight into decedent histories and lived experiences.

In 2024, the OFR team had five in-person meetings and reviewed eight overdose fatality cases. Each case was selected in coordination with the Lancaster County Coroner's Office and prioritized based on local overdose trends and the potential to generate meaningful system-level insights.

Team Agencies and Organizations:

Community Services Group

Compass Mark

The GateHouse

GOAL Project

Lancaster County Adult Probation and Parole Services

Lancaster County BH/BS

Lancaster County Children and Youth Agency

Lancaster County Drug and Alcohol Commission

Lancaster County Emergency Management Services

Lancaster County Forensic Center – Office of the Coroner

Lancaster Harm Reduction Project, Inc.

LGH STEPS Program

Pathways Center for Grief and Loss

Penn Medicine Lancaster General Health

School District of Lancaster

Union Community Care

Key Roles on the team include:

- **Facilitator/Coordinator:** Leads OFR meetings, oversees the case selection process, coordinates team activities, develops policies and procedures to support OFR operations, and collects relevant data related to overdose fatalities to inform case reviews and recommendations.
- **Data Manager:** Maintains internal data systems, and supports the analysis of findings to inform team discussions and recommendation development.
- **OFR Team Members:** Participate in confidential reviews, provide system-specific insight, and assist in developing recommendations and intervention opportunities.
- **Next-of-Kin Interviewers:** Conduct interviews with family members, when appropriate, to gather background and lived experience data.
- The team is also supported by Penn Medicine LGH staff members who assist with meeting coordination, documentation, and cross-sector communication.

2024 FINDINGS AND RECOMMENDATIONS

In 2024, the OFR team identified a number of recurring system-level challenges:

- **Care Fragmentation:** Gaps in coordination between medical, behavioral health, social services, and corrections systems.
- **Access Barriers:** Limited accessibility to reentry services, inpatient treatment, and recovery supports.

- **Documentation Issues:** Inconsistent recording of substance use/misuse and mental health histories in medical records.
- **Healthcare Access for At-Risk Individuals:** Inadequate follow-up care following medical treatment or services, especially for individuals experiencing housing instability.
- **Underutilized MAT:** Inconsistent access to medication-assisted treatment, particularly in primary care settings.
- **Behavioral Health Gaps:** Insufficient follow-up after emergency department or psychiatric discharge, and limited involvement of primary care providers in post-discharge care.
- **Youth & Family Needs:** Limited access to education on substance use and recovery for families.
- **Outreach & Education:** Limited community outreach to underserved populations, including minority and transient populations.

Key Recommendations to Improve Systems of Care and Community Resources in Lancaster County:

- **Care Coordination**
 - Develop integrated pathways across criminal justice, treatment, and case management systems.
 - Improve access to inpatient care for individuals with complex medical and substance use needs.
- **Behavioral Health**
 - Improve behavioral health response in emergency departments.
 - Strengthen primary care referral systems for medication management.
 - Expand access to grief counseling and family support.

- **Medication-Assisted Treatment (MAT)**
 - Promote patient-centered care in methadone clinics.
 - Train providers in evidence-based opioid tapering protocols.
 - Expand Suboxone prescribing in primary care settings and provide ongoing opioid use disorder (OUD) education for primary care providers.
- **Healthcare Access**
 - Improve primary care referrals to addiction medicine specialists and psychiatry for behavioral health services.
 - Ensure comprehensive documentation of substance use disorder treatment history in medical records.
 - Reduce barriers for vulnerable individuals by expanding access to Federally Qualified Health Centers (FQHCs), and enhancing availability of community resource tools.
- **Recovery Support**
 - Expand peer and outpatient support following discharge from inpatient treatment.
 - Provide family education on addiction and recovery.
 - Support equitable treatment access for individuals with complex criminal-legal histories.
 - Engage marginalized populations via culturally responsive outreach.
- **Harm Reduction**
 - Increase naloxone distribution and related education, particularly for families affected by substance use.
 - Promote standardized naloxone protocols across EMS providers.
 - Expand harm reduction outreach with mobile crisis teams and peer specialists.
 - Encourage local adoption of naloxone distribution and fentanyl testing protocols.

- **Reentry and Housing**
 - Strengthen service navigation for individuals leaving incarceration or community supervision (probation or parole).
 - Expand flexible housing solutions for underserved populations.
- **School-Based Interventions**
 - Strengthen prevention through school-based interventions for truancy and drop-out prevention.
 - Address barriers to obtaining parental consent for school-based substance use interventions.

PROPOSED SOLUTIONS FOR BROADER SYSTEM GAPS

- **Care Access & Integration**
 - Integrate care models linking mental health and substance use treatment, primary care, and criminal justice systems.
 - Remove ID and residency barriers to improve access to insurance and treatment.
 - Provide cross-sector training on substance use disorders, harm reduction, and culturally responsive care.
- **Overdose Response Protocols**
 - Establish consistent overdose response protocols across emergency medical services, including standardized naloxone administration and post-overdose intervention practices.
 - Support broader implementation of standardized fentanyl testing protocols among law enforcement agencies.

- **Data & Communication**
 - Standardize documentation and follow-up practices in healthcare settings for individuals with SUD.
 - Strengthen communication from behavioral health providers on discharge planning and patient needs, to coordinate post-discharge care and follow-up.
 - Advance mobile outreach tools to better serve hard-to-reach populations.
- **Legal and Policy Recommendations**
 - Adopt policy solutions that improve insurance access for impacted populations through flexible documentation requirements and expanded presumptive eligibility.
 - Promote equitable access to treatment for individuals impacted by criminal legal system involvement, including those with offense-related restrictions.
 - Support the development of statewide standards for timely and confidential sharing of corrections and criminal justice records across jurisdictions to support overdose prevention and case review efforts.
 - Establish clear pathways for authorized access to Medicaid behavioral health and Veterans Affairs (VA) records to support comprehensive overdose case reviews.

IMPLEMENTATION EFFORTS

In 2024, the Lancaster County OFR focused primarily on strengthening its internal processes for case review, data collection, and recommendation development. A key challenge was moving beyond information-gathering toward a more active role in supporting the implementation of recommendations. While several community initiatives aligned with OFR findings, the OFR was not directly involved in their planning or execution.

Recognizing this gap, the team is taking steps to shift from data collection alone to refining recommendations for implementation, identifying potential partners, and planning for increased collaboration in 2025.

BARRIERS AND CHALLENGES

- **Delayed Case Referrals:** Procedural and administrative challenges have led to frequent delays in receiving overdose case information, significantly impacting the team's ability to thoroughly prepare for and conduct complete, well-informed reviews.
- **Limited Participation from Key System Partners:** The absence of key partners has restricted the team's ability to conduct fully informed, system-level reviews.
- **Complications Obtaining Records from External Sources:** The team had difficulty obtaining essential records needed for comprehensive case reviews.
- **Challenges in Conducting Next-of-Kin Interviews:** Procedural limitations have hindered the team's ability to consistently conduct next-of-kin interviews.
- **Staffing Changes:** A mid-year staffing transition shifted data management responsibilities to the OFR facilitator/coordinator, temporarily impacting the team's capacity for overdose data analysis.

OFR DISSEMINATION AND ENGAGEMENT

In 2024, the Lancaster County OFR team engaged in efforts to raise awareness of overdose fatality review work and share findings with the broader community:

OFR Public Forum – February 2024

The team hosted a public forum in February 2024 to introduce the OFR process to community stakeholders and members of the public. The event included an overview of the team's structure and goals, as well as a presentation of key findings and recommendations from the OFR team's first year of reviews (2023).

Stakeholder Engagement

Team members actively engaged with potential partner agencies to increase awareness of the OFR's mission and to encourage broader participation. These efforts focused on expanding representation from healthcare systems, law enforcement, and community-based organizations.

Report Sharing

We shared findings from our 2023 and 2024 case reviews with both internal and external stakeholders through various engagement opportunities throughout the year. Our 2023 findings were featured in our inaugural annual report, which is published on the health system's Community Health website.

NEXT STEPS FOR LANCASTER COUNTY OFR

Key Focus Areas for 2025:

- **Strengthen Implementation Pathways:** Transition from recommendation development to active collaboration with partners to support implementation of OFR-identified strategies.
- **Establish Subcommittees:** Launch subcommittees focused on specific problem areas (e.g., healthcare access, reentry, housing, equity) to expand community involvement and accelerate systems change.
- **Develop Tracking Mechanisms:** Implement a system for monitoring recommendation follow-through and measuring impact over time.
- **Improve Data Utilization:** Enhance the analysis and presentation of overdose data to better inform case selection, identify trends, and support targeted recommendations.
- **Expand Stakeholder Engagement:** Build new partnerships with organizations not yet engaged in the OFR process.
- **Strengthen Information Sharing:** Improve cooperation from service providers in responding to OFR record requests, to ensure timely and complete access to essential case information.

Our Ongoing Commitment:

Over the past year, the Lancaster County Overdose Fatality Review team has made important progress - from strengthening case review processes to identifying system-level gaps and developing meaningful recommendations. While challenges remain, this work has laid a stronger foundation for more coordinated and responsive overdose prevention strategies.

Looking ahead, our focus is on moving from insight to impact. We plan to track implementation efforts, build out subcommittees to support key priorities, and continue strengthening partnerships across sectors. These next steps are essential to creating lasting change.

We're grateful to our team members, agency partners, and community stakeholders for their continued commitment to this work. Your time, insight, and collaboration make this effort possible, and together, we remain focused on saving lives and improving care for those most at risk.



CONTACT US

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