

# Module 3. Facilitate Your OFR Meeting



# Facilitate Your OFR Meeting

Module

3

This module will assist overdose fatality review (OFR) facilitators in effectively facilitating review meetings to build trust and identify recommendations to prevent future overdose deaths.

## 3A. Facilitator's Role

An effective facilitator is a neutral convener who is a good listener, develops trust with partners, encourages group participation and engagement, leads but does not direct discussion, and guides the group towards collective problem solving to craft recommendations.

Ideally, to maintain objectivity and a sense of equality among partnering agencies and members, the facilitator should be a representative from a neutral lead agency, such as local public health or community coalition, and will not report to a principal agency such as the police department, the mayor's office, or a behavioral health service agency.

### Definition:

The OFR team facilitator is a "neutral convener" who oversees facilitation of team meetings to collectively problem solve and identify recommendations to prevent future overdose deaths.

### Tip:

Including discussion about the decedent's associates and social connections can provide a more contextual understanding of the circumstances surrounding the overdose death.

## 3B. Guiding Principles

The facilitator is responsible for ensuring that members agree with the following guiding principles:

- The "North Star" (a shared goal of reducing overdose deaths)
- Overdose deaths are preventable
- Substance use disorder is a chronic, treatable disease
- Use of multisector data to inform response strategies
- Continually improve the OFR process and prevention activities

Visit the CDC Foundation's Public Health and Safety Team (PHAST) Toolkit to learn more about these guiding principles.

## 3C. Meeting Agenda

A successful OFR meeting will cover the following nine steps. A sample agenda can be found in Appendix B.

### 1. Opening remarks and introduction

This step should include member introductions, updates from previous meetings, upcoming events, data presentation, review case selection criteria, and other announcements.

- Member introductions: Attendees share their names, titles and their agencies' names and roles in preventing overdose fatalities.
- Updates from previous meetings: Members share status updates on any delegated action items or recommendations from previous meetings.
- Data presentation: At the beginning of the year, present an overview of the prior year's fatal and nonfatal overdose deaths. At each subsequent meeting, present the year-to-date number of overdose fatalities and any noticeable trends (e.g., changes by overall numbers, demographics, or substance type). Understanding overdose fatalities (e.g., who is at risk for an overdose and where overdose deaths are happening) requires an ongoing and real-time analysis of overdose trends. Using a standard report will help partners understand long-term trends in fatalities and allow them to plan and develop new strategies or modify existing ones. Data and analysis from these reports can also be invaluable for promoting public awareness and outreach, as well as for applying for grant funding. A sample summary data report is included in Appendix B. Also, refer to the CDC Foundation's PHAST for more guidance about presenting data at an OFR meeting.
- Review case selection criteria: If not all overdose deaths within a jurisdiction are being reviewed, remind the review committee about which criteria were used to select the case.

### 2. Goals and ground rules

The facilitator reads aloud the meeting goal(s), guiding principles, and ground rules included on the agenda handout. Ask participants whether they want to add any new ground rules.

- A sample list of ground rules is included in Appendix B.
- Guiding principles listed in Section 3B.

### 3. Confidentiality

The facilitator or coordinator collects members' reviewed and signed confidentiality forms and answers any related questions. Confidentiality is discussed in more detail in Module 4. Collect Your OFR Data.

- Confidentiality agreement: This essential form needs to be signed at the beginning of each review by the members present. A sample confidentiality agreement is included in Appendix D.
- If more than one case is reviewed at a meeting and some members arrive mid-meeting, the facilitator needs to make sure that they sign and submit the confidentiality agreement when they arrive.
- Interagency agreement: This agreement needs to be signed by senior leadership of each participating agency (including any ad hoc agencies) before they participate in any reviews. The agreement states the role of the agency in the reviews. A sample interagency data sharing agreement is included in Appendix D.
- The facilitator is responsible for reminding team members that the meeting is closed and that the information shared in the meeting shall not be discussed outside the meeting, as outlined in the agreements they have signed.

### 4. Case presentation

The facilitator presents the decedent's basic case information.

- The facilitator presents the case summary developed by the coordinator, as outlined in Section 2B. Coordinator’s Activities, Step 6. Summarize Case(s).
- If each member is given a summary document, all documents should be collected at the end of the meeting.

## 5. Member report-outs

The facilitator calls on each member to share what he or she knows about the decedent, his or her social connections, and the overdose incident. The information shared helps members understand more about where the decedent lived, socialized, worked, and played to help identify risk factors and missed opportunities for prevention and intervention that may have contributed to the overdose death.

The facilitator calls on members to share their summary reports, as discussed in Section 2C. Members’ Activity, Step 4. Prepare a Summary, starting with the medical examiner and first-responder agencies, to report out in reverse chronological order, for assistance with developing an incident timeline. The facilitator will then determine the best approach to receive report outs from the remaining members, based on the specific case.

## 6. Group discussion

The facilitator actively guides the group discussion by encouraging members to ask questions. The group discussion will clarify the timeline of significant life events and identify missed opportunities for prevention and intervention. The facilitator may want to use the strategies outline in Section 3D. Meeting Facilitation Strategies.

## 7. Case and timeline summarized

The facilitator summarizes significant case information and draws a timeline of key activities, ideally on a whiteboard.

## 8. Formulate recommendations

The facilitator leads a problem-solving discussion as outlined in Figure 2.1 to identify recommendations for change in practices or policies that may have prevented this overdose death and may prevent those in the future.

## 9. Summarize and adjourn

The facilitator reviews and clarifies actionable recommendations, assigns individuals responsible for any action items, reflects on the meeting’s process and findings, and collects any participants’ handouts containing case information.

- The facilitator recaps how the meeting went and relates today’s review to other cases or to a larger context, such as by saying, “Today’s case involved a heroin-laced fentanyl, and there has been an increase in such reported cases in recent months from this area of the city.”
- The team determines whether the investigation is complete or whether more information is needed.
- Remind members of confidentiality and collect any papers with confidential information.
- Remind members of the time and location of the next meeting.

Figure 2.1 Problem-Solving Process to Identify Recommendations



**Tip:**

To have the most significant impact, recommendations should focus on:

- Improving service delivery and investigation.
- Changing agency policies and practices.
- Revising local ordinance or state legislation.
- Initiating or modifying community prevention strategies.

- Trying to understand the decedent's experience through his or her eyes.
- Holding a place at the table for the decedent or taking a moment of silence.

### 3. Summarize members' comments

To ensure that main points are heard, the facilitator may restate or summarize members' comments, when possible, making connections clearer and stronger between members' points and potential implications for changing a system.

### 4. Solicit a variety of solutions/recommendations

Actively encouraging strategies beyond standard enforcement and intervention-centered approaches will steer the group towards more upstream or primary prevention activities.

### 5. Address misinformation

While the facilitator does not need to be an expert, he or she should identify and correct misinformation when apparent. If there is disagreement over the accuracy of a statement, it can be paused for further research after the meeting to shift the focus back to the task at hand. Attention to accurate information will inspire standards of information quality. This is important for the development of meaningful recommendations and can reduce stigma that is based on misinformation.

### 6. Acknowledge all potential solutions

The facilitator remains neutral by acknowledging and giving equal consideration to all suggested solutions and demonstrating how each suggestion is part of a continuum of response to prevent overdose.

## 3D. Meeting Facilitation Strategies

An OFR meeting is a combination of information sharing, group brainstorming and problem solving, strategic planning, and decision making. The meeting facilitator actively participates in the discussion, moving it from information sharing to problem solving using the following strategies.

### 1. Thank members

Thanking members for their input and suggestions encourages participation by all who have relevant information.

### 2. Encourage person-first language and respect for the decedent and survivors

OFR teams have a responsibility to honor the decedent's life and to respect surviving family members and loved ones. This can be accomplished by:

- Protecting confidentiality of the case review proceedings.
- Using appropriate and sensitive language when discussing the case.
- Avoiding judgment of the decedent's decisions.
- Considering all factors that contributed to the decedent's substance use and overdose.

## 7. Ask open-ended questions

Asking open-ended questions helps participants (1) understand the “bigger picture,” (2) examine the underlying issue, and (3) develop their own solutions.

## 8. Ask clarifying questions

The facilitator may ask members to explain agency-specific or sector-specific acronyms or labels so that everyone understands the material being presented. It is best not to assume that people already know or understand information. Asking clarifying questions helps team members become familiar with the internal processes of different organizations.

## 9. Ask reflective questions

Pausing and asking reflective questions allows members to look at the case and information shared and to identify missing information or partners.

Questions that may be useful include “Do we have all the information we need to identify the problem or solution?” and “Are there any organizations missing from this discussion?”

## 10. Encourage all to participate

To reinforce that all members have equal value and voice regardless of title or professional experience, the facilitator may want to refer to everyone by their first names. In addition, the facilitator should call on members who are less engaged or who do not readily speak up during the meeting.

## 11. Ask for help

Encourage persons who or agencies that specialize in an area to help direct a discussion. They may help by framing the nature of the problem, summarizing the results of past initiatives, explaining a new concept or practice, or proposing possible future recommendations.

## 12. Encourage team building

The OFR team should use meeting breaks as an opportunity to incorporate team building. This may involve as little as pulling aside a couple of members and introducing them to each other, bringing up a shared interest or connection they may not be aware of. Another way to build team cohesion is to provide general agency or member updates at the beginning or end of the meeting that may result in partnerships during and outside of the fatality review experience.

## 13. Anticipate possible areas of tension or bias

Including in the ground rules how the team will address unprofessional or disparaging statements from others will build trust. It is important that everyone understand the need to stay focused on working together to identify possible strategies for preventing future overdoses.

## 14. Politely redirect members

If the conversation becomes repetitive or irrelevant, the facilitator should ask questions or change focus to keep the conversation moving forward. For example, if a member makes a comment such as “This overdose could never have been prevented,” the facilitator should politely redirect members in a direction towards prevention. This may be as simple as saying, “While this case may be difficult to review, we have identified a few service gaps. Let’s start with one of those and think about what improvements may benefit others.”

## 15. Remind members of the “North Star” and guiding principles

For some members, considering an overdose death a preventable event may be a significant cultural shift. Reminding members to commit to a common goal or “North Star” to reduce overdose deaths can help ground all OFR team members. More information about guiding principles can be found in the CDC Foundation’s PHAST Toolkit.

### 3E. Managing Difficult Conversations

Disagreements, arguments, competing agency interests, and other personal and professional conflicts need to be anticipated and resolved prior to or during the meeting so the discussion can feel safe and fruitful for everyone.

As with much of the OFR process, much of the work happens outside of the review meeting. It is often necessary for the facilitator to reach out to members

#### Tip:

Remind members of guiding principles:

- The “North Star” (shared goal of reducing overdose deaths)
- Overdose deaths are preventable
- Substance use disorder is a chronic, treatable disease
- Use of multisector data will inform response strategies
- Continually improve OFR process and prevention activities



after a meeting to address any conflicts that arise during the review process and, when the facilitator anticipates conflicts, to reach out ahead of the meeting to mitigate any possible conflicts.

To help limit and manage difficult conversations, the facilitator may also want to:

#### Limit tension between partners

To help members collaborate, the facilitator may want to make such suggestions as, “Let’s try to build a solution together that will meet everyone’s needs.” If there is competition between service agencies, it can be useful to highlight the value each organization brings to the table.

#### Notice possible political issues

In researching a case for the review meeting, the facilitator may notice something that could result in one agency being under fire. The facilitator should give the agency a heads-up prior to the meeting, setting up the conversation and expectations in a way that allows for respectful, honest transparent discussion to identify and correct any issues to mitigate future problems.

#### Be on alert for individual member triggers

If a member of the meeting said something that was obviously disrespectful, the facilitator will need to remind members to be respectful. If the statement was stated respectfully, but another member took offense or is sensitive to the statement, the facilitator might restate the comment in a way that decreases the negative impact and encourages problem solving and collaboration.

#### Put a conversation on hold until after a meeting/create a “parking lot”

Acknowledge when a conversation is drifting or irrelevant and ask that members put it on hold until after

the meeting. Sometimes, disagreements benefit from a pause, which provides an opportunity for additional research to inform conflict resolution. The facilitator can tactfully ask the members to pause the discussion and move on to the next case or agenda item.

### Remain neutral and objective

It is very important that the facilitator remain neutral and objective. Do not take sides in the dispute. Instead, ask members to focus on the facts of the case and the goal of the review—to prevent future overdose deaths. The facilitator may need to end a possible escalating discussion by making a statement such as, “It appears we have reached a stalemate. Let’s move on and discuss other issues that were identified.”

## 3F. Measuring Meeting Success

The facilitator wants to make sure that meetings are as successful as possible. The OFR process is always evolving in response to members’ needs and changes in data trends. In addition, the identified recommendations impact large system issues, and it may take time to effectively make noticeable improvements. Therefore, it may be helpful to have some short-term measures to determine whether the OFRs are successful.

### How do you know if an OFR is successful?

- Agencies continue to send staff members to the reviews.
- Members contribute to the discussion.
- Members are open to feedback and are not defensive.
- Members come more prepared for each meeting.
- Members linger after the meeting has formally ended to network with other members.

- Members begin to see connections between seemingly unrelated overdose deaths and develop a shared analysis.
- Agencies report that the information is useful to their daily work.
- Each agency is working on at least one recommendation during the year.

In addition to the above measures of success, the facilitator will want to connect with members between meetings to get feedback on the overall OFR process and meetings and identify strategies for improvement.

## 3G. Meeting Notes

The coordinator typically takes notes during the review. If the OFR team does not have both a coordinator and a meeting facilitator, the facilitator will want to delegate someone to take notes during the OFR meeting.

Notes help to document tasks that need follow-up and to track recommendations. Sometimes, notes are summarized and included in future meeting handouts or meeting minutes.

## 3H. Post-Meeting Tasks

While the OFR meeting forms the foundation of the process, follow-up events are equally important. The meeting discussion, case information, and identified recommendations must be documented and momentum maintained.

Immediate post-meeting activities (on the same or next day) include the following:

1. Preparing meeting minutes and securely storing them electronically with the other case records. A meeting minute template is included in Appendix C.
2. Capturing the OFR case information that was shared and collected at the review meeting, often

using an OFR database. Learn more about the OFR database in Module 4. Collect Your OFR Data.

3. Working on follow-up activities and reaching out to any identified partner agencies.
4. Drafting and sending updates to the governing committee, as requested. More information about this task can be found in Section 3I.

### 3I. Updating the Governing Committee

Summarizing review activities to update the governing committee should be done after each review meeting. Most often, the OFR coordinator is responsible for communicating with the chair of the governing committee to determine what is expected from a report-out from the OFR team.

Depending on the jurisdiction's OFR structure, some governing committees receive updates annually on priority recommendations and implementation status of prior recommendations. Other governing committees may request more frequent updates on review activity and findings; for instance, on a quarterly basis.

An update may be a short summary on a standing agenda or a full-length presentation or report. A sample governing committee report is included in Appendix C.

### 3J. Preventing Case Review Burnout

Reviewing overdose fatalities can affect review team members emotionally and psychologically. These effects are known as secondary trauma. The effects can be reduced by:

- Inviting experts in secondary trauma to present to the team.
- Identifying and understanding attendee reactions to potentially upsetting information.
- Acknowledging that everyone experiences stress from reviewing overdose fatalities.

- Sharing professional self-care resources and strategies with team members.
- Reporting on and celebrating successes such as implemented recommendations generated by the OFR process.
- Reminding members of the purpose and effectiveness of OFRs.
- Allowing members to rotate out after a period of service to the team if requested.
- Recognizing many members of the OFR team are first responders, behavioral health, and health care providers and may have compassion fatigue.

Compassion fatigue is the emotional strain of working with those suffering from the consequences of traumatic events. First responders may experience compassion fatigue as a result of encountering repeated overdose cases.

Consider using "The Vicarious Trauma Toolkit" (U.S. Office of Justice Programs, Office for Victims of Crime) to address and prevent secondary trauma. (Source: <https://vtt.ovc.ojp.gov/what-is-vicarious-trauma>)

