



# Overdose Spike Preparedness Exercise: Mock Scenario and Inject Inventory

**How to use this resource:** This document serves as a menu of options for exercise facilitators to select from when determining which injects, or example changes to scenarios, to include in their overdose spike preparedness exercise. The information listed is modifiable. The discussion questions are suggestions that may be adapted based on jurisdiction needs and time restrictions. For a four-hour exercise, exercise facilitators may plan to use the basic mock scenario and two injects from the inject inventory. Note that the basic mock scenario refers to “County A,” which will be the main or initial affected county. The injects offer opportunities to explore additional situations and tailor the exercise to fit the jurisdiction’s needs. When selecting injects, jurisdictions are encouraged to consider the needs of all populations, particularly those who are vulnerable to inequitable health outcomes.

## Basic Mock Scenario

*You have been notified of a suspected overdose spike or anomaly in [County A]. There have been [#] suspected overdose incidents and [#] deaths. Lab results indicate the presence of fentanyl. The investigation of this incident is ongoing.*

## Basic Mock Scenario Discussion Questions:

### Notification:

- How is a spike defined in your jurisdiction?
- How are you notified that a spike may be occurring?
- Are there any notification systems used to notify partners or the public about overdose spikes? When and how are these systems used? Who manages these notification systems?
- Is there any additional information that you would want to know? How might you obtain that information?
- Are there specific populations or geographic areas experiencing a higher overdose burden or increased risk during this spike? How would we gather this information?
- What partners should be notified and what kinds of information do they need?





## Inject Inventory

The inject inventory is a set of suggested injects to use during an overdose spike preparedness exercise. Injects are introduced after the basic mock scenario is discussed and are intended to test capacity and capabilities in specific areas. It is generally a good idea to choose two injects, though it will depend on the amount of time allotted for discussion.

### Other Substances Inject:

*How might the response differ if lab findings indicate that [xylazine, nitazenes, medetomidine, or other novel psychoactive substances] were involved?*

#### Discussion Questions/Additional Prompts:

- How does the team plan to communicate with the affected community about the potential risk associated with these substances?
- Can partners increase outreach in affected areas?
- What are additional community outreach tools partners could use to prevent overdose?
- Are there any special considerations for route of administration and/or combinations of substances (effectiveness of overdose reversal agents, wound care, or other health care needs)?
- How might delays in lab confirmations affect public health messaging and community outreach strategies?

### Rural Inject:

*How might the response differ if the spike affected a significant number of people in [County B]? This county is in a more rural area of the state.*

#### Discussion Questions/Additional Prompts:

- What additional barriers may people affected by a spike in a rural community face?
- What additional partners should be involved in the response effort from [County B]?
- County B public health agency has what role in responding to this action?
- What resources should be coordinated across the impacted localities?
- How will response partners communicate with each other?
- What strategies can be implemented to address technology barriers that may limit access to information or services during a spike response?



## Institutional Settings

*How might the response differ if [# number] of impacted people are in, or recently left, an institutional setting or carceral setting jail, prison, psychiatric hospital, juvenile facility, care homes, etc. ?*

### **Discussion Questions/Additional Prompts:**

- How might response efforts differ (e.g., leveraging relationships with organizations serving people in these settings)?
- What additional planning and response activities might be needed to prevent overdose?
- What additional planning and response activities may be needed to reach those at risk who have recently left an institutional setting?
- What additional resources can be leveraged to support response efforts?
- How might institutional policies impact the timeliness and effectiveness of the overdose response?

## Older Adults Inject:

*How might the response differ if [# number] of impacted people are older adults or live in senior housing?*

### **Discussion Questions/Additional Prompts:**

- How might response efforts differ (e.g., leveraging relationships with appropriate community-based organizations and housing authorities)?
- How can communication be tailored for this population?
- How can outreach be tailored to meet the unique needs of older adults (ex: communication preferences, accessibility needs, service access challenges, etc.)?
- What additional resources could be leveraged to support response efforts?

## Large Events Inject:

*How might the response differ if the spike occurred among people attending a large-scale event, such as a concert, the viewing of an eclipse, or a busy vacation period at a tourist destination?*

### **Discussion Questions/Additional Prompts:**

- How will response needs differ?
- How might response efforts differ (e.g., leveraging relationships with other partners involved in event planning, connecting with emergency management and emergency response partners, etc.)?
- What additional resources could be leveraged to support response efforts?
- What types of surge capacity might be needed and how will response partners manage a sudden surge in needs?

## Messaging Inject

*How might the response differ if inaccurate or conflicting information is affecting public understanding of the overdose spike or available response actions?*

### **Discussion Questions/Additional Prompts:**

- What processes would be used to coordinate messaging across public health, public safety, healthcare, and community partners?
- Who would be responsible for developing, approving, and disseminating key messages during a spike response?
- How would your team ensure messaging is timely, accurate, and aligned across communication channels?
- How might unclear messaging affect public awareness or use of available response resources, and how would that be addressed?

## OTC and Prescription Medications Inject

*How might the response differ if a large number of cases involved over-the-counter OTC and prescription medications?*

### **Discussion Questions/Additional Prompts:**

- How can public messaging be tailored to address the risks associated with OTC and prescription medication misuse? What will messaging response partners look like?
- What partners (e.g., pharmacists, health care providers) should be engaged to mitigate this surge, and what resources can they offer?
- What community outreach or alternative support strategies can be provided to prevent further incidents?