Intranasal Naloxone Medication Policy

Effective Date
Approved Date

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Veronica Kelley, DSW, LCSW, Director

Policy

It is the policy of the County of San Bernardino (County) Department of Behavioral Health (DBH) that staff adhere to the intranasal naloxone administering requirement as set forth in DBH Information Notice 18-08, and in accordance with guidance provided by California Civil Code § 1714.22 to ensure access to intranasal naloxone during an emergency.

Purpose

To prevent delays in access and administration of intranasal naloxone, in accordance with Standing Order to Dispense Naloxone Hydrochloride (Naloxone Standing Order). DBH Opioid Overdose Responders shall adhere to accepted guidelines when administering and storing intranasal naloxone.

Definition(s)

Drug Administration is the act of administering a single dose of a prescribed drug or biologic given to a patient by an authorized person in accordance with governing laws and regulations.

Drug Dispensing is the act of interpreting an order for a drug or biologic -- and pursuant to that order -- selecting, measuring, packaging, labeling, and issuing the drug or biologic to a patient.

Medications are substances or preparations used in treating disease or illness. Medications are DBH property prescribed by a Psychiatrist/Physician for a DBH client, donated to DBH for a client, or abandoned at a DBH clinic.

Naloxone is an opioid antagonist used to reverse the effects of opioids -- and is an antidote to opioid overdose. Naloxone works by blocking the opioid receptor sites.

Opioids are prescription medications used to treat pain, such as morphine, codeine, methadone, oxycodone, hydrocodone, fentanyl, hydromorphone, and buprenorphine; as well as illegal drugs, such as heroin and illicit potent opioids such as fentanyl analogs (e.g., diverted substances).

Opioid Overdose Responders are DBH staff who have meet the criteria to administer NARCAN® and have completed the responder training per IN 18-08.

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Opioid Overdose Responder Selection

There is no formal selection process for DBH employees to become Opioid Overdose Responders. DBH employees who meet the criteria outlined in this policy and have completed the Narcan Nasal Spray Training in DBH's Learning Management System are considered Opioid Overdose Responders.

Naloxone Standing Order Elements

Per California Civil Code § 1714.22, documentation regarding a standing order issued by a physician for the administration of intranasal naloxone during an opioid-related overdose shall be maintained by the DBH Medical Director or designee.

The Naloxone Standing Order requires designation of an Overdose Prevention Educator and authorizes DBH to:

- Maintain supplies of intranasal naloxone kits for the purposes of distributing them to clients at risk of an overdose;
- Possess and makes intranasal naloxone available to Opioid Overdose Responders who have completed an overdose training and required documentation; and
- Possess and administer intranasal naloxone to a client who is experiencing an opioid overdose.

The Overdose Prevention Educator shall:

- 1) Ensure that only staff members trained in the use of intranasal naloxone administer the medication, as required by law; and
- 2) Ensure required documentation of the overdose prevention and response educational program is completed.

Required Overdose Training

Opioid Overdose Responders must satisfy the below criteria:

- Have the potential to come in contact with individuals at risk of opioid use.
- Complete overdose training using DBH's Learning Management System.
- Possess the capacity to recognize the signs of opioid use.
- Have reviewed and can apply the essential components of Overdose prevention and response and the <u>Intranasal Naloxone Medication</u> <u>Procedure (MDS2028-1)</u>.

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Required Overdose Training, continued

Additional overdose training shall consist of:

- Overdose prevention techniques.
- Recognizing signs and symptoms of overdose.
- Calling 911: Determining when to call and what information to provide.
- Conducting rescue breathing and/or chest compressions.
- Naloxone storage, carrying, and administration.
- Post-overdose follow-up and care

Intranasal Naloxone Storage

Intranasal naloxone will be distributed to DBH Clinics for storage in designated overdose emergency cabinets and are to be accessible to Opioid Overdose Responders. DBH has purchased cabinets with alarmed doors to store opioid overdose medication.

Note: Only DBH staff members who are trained as Opioid Overdose Responders may administer Naloxone.

Incident Documentation

DBH staff who respond and/or witness medical emergencies, involving the administration of intranasal naloxone, must document details of the incident in the Unusual Occurrence/Incident Report (QM053) and immediately submit the report to their Program/Clinic Supervisor.

Staff should attempt to capture elements such as, but not limited to:

- Individual's respiration rate;
- Quality of their respiration;
- Individual's pulse;
- Individual's pupil dilation;
- Individual's level of consciousness;
- Condition the individual was found in;
- Times events transpired, and
- Name/accounts of any witnesses to the medical emergency.

Staff shall take the necessary and appropriate follow up action such as completing an incident report, as well as other required follow up action as required in the Special Incident Reporting Procedure – Client Related (SFT7016) and How to File an Incident Procedure (SFT7017).

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Related Policy or Procedure

DBH Standard Practice Manual:

- Control, Access and Accountability of Medications and Medical Supplies Policy (MDS2008)
- Intranasal Naloxone Medication Procedure (MDS2028-1)
- Urgent and Emergency Conditions Procedure (MDS2031)
- Special Incident Reporting Procedure Client Related (SFT7016)
- How to Report an Incident Procedure (SFT7017)

Reference(s)

- California Civil Code, Section 1714.22
- California Department of Public Health, Naloxone Statewide Standing Order Frequently Asked Questions
- Standing Order to Dispense Naloxone Hydrochloride