

### Background

Drug overdose is the leading cause of accidental death in the United States, claiming more lives annually than auto- and gun- involved incidents. The opioid crisis is currently recognized as a national public health emergency by the federal government. It is the position of the National Association of School Nurses (NASN) that the safe and effective management of opioid-related overdoses in schools must be incorporated into the school emergency preparedness and response plans.

Saint Paul Public Schools recognizes that many factors, including the use and misuse of prescription medications or inadvertent opioid exposure can be risk factors for overdose. SPPS has a protocol and procedure to have emergency medication for opioid overdoses that may occur in our schools

#### **Opioid Overdose Response (Emergency Administration of Naloxone)**

Saint Paul Public Schools will obtain and possess naloxone to be maintained and administered by trained school personnel to a student or other individual if it is determined in good faith that person may be experiencing an opioid overdose.

Saint Paul Public Schools will provide assistance to any students or other individuals who may be suffering from an opioid overdose following protocols and procedures of the school district. Trained staff members shall make every reasonable effort to include the use of naloxone combined with rescue breaths to revive the victim of any apparent opioid overdose.

Minnesota State Statute 604A.04 "Good Samaritan Overdose Prevention" allows for "A person who is not a healthcare professional who acts in good faith in administering an opiate antagonist to another person whom the person believes in good faith to be suffering a opioid overdose is immune from criminal prosecution for the act and is not liable for any civil damages for acts or omissions resulting from the act." Additionally, in accordance with Minnesota State Statute 604A.05, the individual who is seeking/providing assistance and the individual who is experiencing an overdose may have a limited immunity from prosecution.

#### Standing Order

SPPS has a standing order for naloxone by a licensed medical provider to house and administer naloxone to students or other individuals believed or suspected to be experiencing an opioid overdose on school grounds. A copy of the standing order will be maintained in the office of Health and Wellness and will be renewed annually.

# Naloxone Coordinator & Storage Procedures

The Naloxone Coordinator for SPPS is Health and Wellness Director. To successfully uphold the naloxone policy, the Naloxone Coordinator or designee will observe the following guidelines:

### Medication Acquisition

- Naloxone will be secured by the Department of Health and Wellness for each designated <u>SPPS site</u> through appropriate distribution channels
- Naloxone may be any valid formulation, including intramuscular injectable naloxone, NARCAN® applicator, nasal atomizer device, or autoinjector
- A recommended minimum of two doses of naloxone will be available at each school site when supplies and funding are available

### Medication Storage/Access

- Naloxone will be stored in the school health office with the AED
- Trained Security and Emergency Management (SEM) staff will carry naloxone or determine a secure location
- Secondary sites, when supplies are available, may have an additional kit located in the main office
- <u>SPPS Naloxone Emergency Response Procedure</u> will be stored in each naloxone kit
- Naloxone will be maintained on school premises, at minimum during student contact hours
- Kits will be reviewed monthly by Health and Wellness or SEM staff to ensure that they are intact and are not expired
- Building Health and Wellness staff are responsible for ordering replacement kits for ALL doses given onsite. Google form linked here

## Medication Usage

If naloxone is administered, report to the appropriate parties (see Notification Procedures) and secure replacement doses as needed

## **Naloxone Training**

The Department of Health and Wellness will determine and provide naloxone training to identified staff:

**Phase 1- Spring 2023:** Licensed School Nurses, Health Assistants and The Office of Security and Emergency Management.

**Phase 2- School Year 2023-24:** Other school staff such as building administrators, counselors and social workers

Training for designated school staff will be conducted annually and will include:

- Signs & symptoms of opioid overdose
- Location of onsite naloxone
- Good Samaritan Act
- Appropriate administration of naloxone, corresponding to administration type maintained onsite (IM, nasal, or autoinjector)
- Rescue breathing
- Activation of emergency personnel
- Notification procedures
- Documentation of care
- Naloxone reordering procedure
- Annual update on substance use including overdose prevention strategies and follow up care

## Signs of an Overdose & Naloxone Administration

Signs of Overdose Include:

- Unresponsiveness or unconsciousness
- Slow or shallow breathing
- Struggling to breathe and making gasping or gurgling sounds
- Very small (pinpoint) pupils
- Cold or discolored skin due to lack of oxygen: pale or blue face, lips, and nails
- Slowed pulse or lowered blood-pressure

# If There is a Suspected Overdose, Follow These Steps:

- 1. Can you safely approach the scene? If so, assess the person for responsiveness, pulse, and breathing and attempt to wake them
- 2. Call 911 immediately. Tell them "Someone is unresponsive and/or not breathing." Keep them on the line until emergency responders arrive
- 3. Activate Standard Response Protocol (Hold In Place)
- 4. Stay with the person
- 5. Request or obtain naloxone kit and AED
- 6. Apply gloves when able
  - a. **Airway** Ensure airway is open and that nothing is inside the person's mouth
  - b. Breathing Perform 2 rescue breaths
    - One hand on chin, tilt head back, pinch nose closed
    - Make seal over mouth, breath into mouth. Use barrier when able
    - 1 breath every 5 seconds until naloxone kit arrives
    - Chest should rise, not stomach
  - c. Administer naloxone (indicate dose available):
    - naloxone HCL nasal spray (4mg/0.1mL)
    - naloxone HCL injection (0.4mg/mL)
  - d. Continue to perform rescue breaths as above
  - e. Administer additional doses of naloxone (alternate sites) every 2-3 minutes if no improvement in symptoms. Be prepared to initiate CPR, use of AED and continue rescue breathing as needed
  - f. If/when the person wakes up be aware of your surroundings and place the person in the recovery position (on their side, body is supported by a bent knee). Use caution, as person may become combative
  - g. Continue to monitor and repeat above procedures until EMS arrives. After the individual is in the care of EMS, follow emergency procedures including notifications, document care and ensure that naloxone kit is reordered

#### **Notification Procedures**

In the event of naloxone administration and emergency response activation, the following people must be notified:

• Licensed School Nurse

- Health and Wellness Administrator
- Building Administrator
- Emergency Communication Center (SEM) 651-744-1191
- Parents/guardians, as appropriate

#### Maintenance

Health and Wellness Administrator or designee will keep a master log of expiration dates in accordance with internal procedures, manufacturer's recommendations and any applicable Department of Health guidelines. Expired or administered medication will be replaced, as able, to maintain the recommended number of onsite doses.

A log will be maintained to document who received yearly training (to start with). Will move to building level maintenance later.

#### **Naloxone Administration Graphic**

