

OPIOID OVERDOSE RESPONSE

Purpose

This procedure clarifies the response to a possible opioid overdose at District schools. These guidelines and Administrative Procedure apply to district and school staff who have been identified and trained by the District to recognize and respond to signs of student opioid overdose.

Definitions

Naloxone

An antidote to an opioid overdose. Naloxone can restore breathing following an opioid overdose and can be given by injection. Under BC law, anyone may administer naloxone in an emergency situation outside of a hospital setting. This includes staff, students, parents, and volunteers. Naloxone has no effect on a person if they have not taken opioids.

Opioid

A class of drug, such as morphine, heroin and codeine as well as oxycodone, methadone, and fentanyl.

Opioid Overdose

An acute life-threatening condition caused using too much opioid. During an opioid overdose a person's breathing can slow or stop.

1. Minimum Standard

- 1.1 If the Associate Superintendent of Learning Services, in conjunction with the *Vancouver Coastal Health (VCH)*, Medical Health Officer, advises that a site has been identified with an elevated risk of students exposed to opioid use, then voluntary staff training will be made available regarding:
 - 1.1.1 Identification of opioid overdose
 - 1.1.2 Delivery of naloxone
 - 1.1.3 Need for cardiopulmonary resuscitation (CPR)
 - 1.1.4 When to call 911.
- 1.2 Staff trained in opioid identification and naloxone administration will call 911 and then may choose to give naloxone and/or cardiopulmonary resuscitation (CPR) depending on the circumstances and their comfort level with administering naloxone. By permission of the Associate Superintendent, Learning Services, naloxone kits will be made available to identified district sites through the district procurement system (VSB Purchasing).
- 1.3 Students who have self-identified with significant drug use histories or concerns should be referred by the school administrator to *VCH* for support.

2. Education and Training

- 2.1 Training for staff will be provided, as recommended by VCH, via the “*Towards the Heart*” online training course.
- 2.2 For staff safety, staff will not be required to leave their school/site to respond to overdoses occurring off the school site.
- 2.3 Staff should understand that there may be some health and safety risk involved in responding to overdose. Responding to overdoses involves proper use of personal protective equipment, handling syringes, and potential contact with drugs or blood and body fluids. If drugs are on the person or the scene, they also must be handled carefully (gloves are required and located in the naloxone kit). Finally, some individuals may be angry and physically aggressive or violent upon revival via naloxone. Staff should be prepared to stand back and de-escalate these situations.

3. Overdose Documentation

Any staff member who responds to an overdose will report the event immediately to the school administrator and provide a written summary of the events. This documentation will be kept separate from the student file.

- 3.1 The school administrator or District Principal of Alternate Education will report the event to the Associate Superintendent Learning Services and complete a *BC Schools Protection Program (SPP)* report.

4. Overdose Response Supplies

One (1) naloxone kit will be provided per stand alone site and should be stored with other emergency medical supplies for easy access when required, yet out of easy reach of students.

- 4.1 The school administrator is responsible for ordering replacement supplies, monitoring expiry dates, confirming available supplies annually, and ensuring unused medication that expires will be disposed of at a pharmacy.

5. Identification of an Overdose

Identification that a person is having an opioid overdose is the first and most critical step in saving a person’s life. Some early signs that a person is experiencing an opioid overdose include:

- 5.1 Severe sleepiness or unconsciousness
- 5.2 Slow heartbeat
- 5.3 Trouble breathing or slow, shallow breathing or snoring
- 5.4 Cold, clammy skin
- 5.5 Trouble with walking or talking

6. The following information from the *Towards the Heart* program has been adopted as district procedure:

Follow the **SAVE ME** steps below to respond.
If the person must be left unattended at any time, put them in the recovery position.





Stimulate
Unresponsive?
CALL 911



Airway



Ventilate
1 breath every
5 seconds



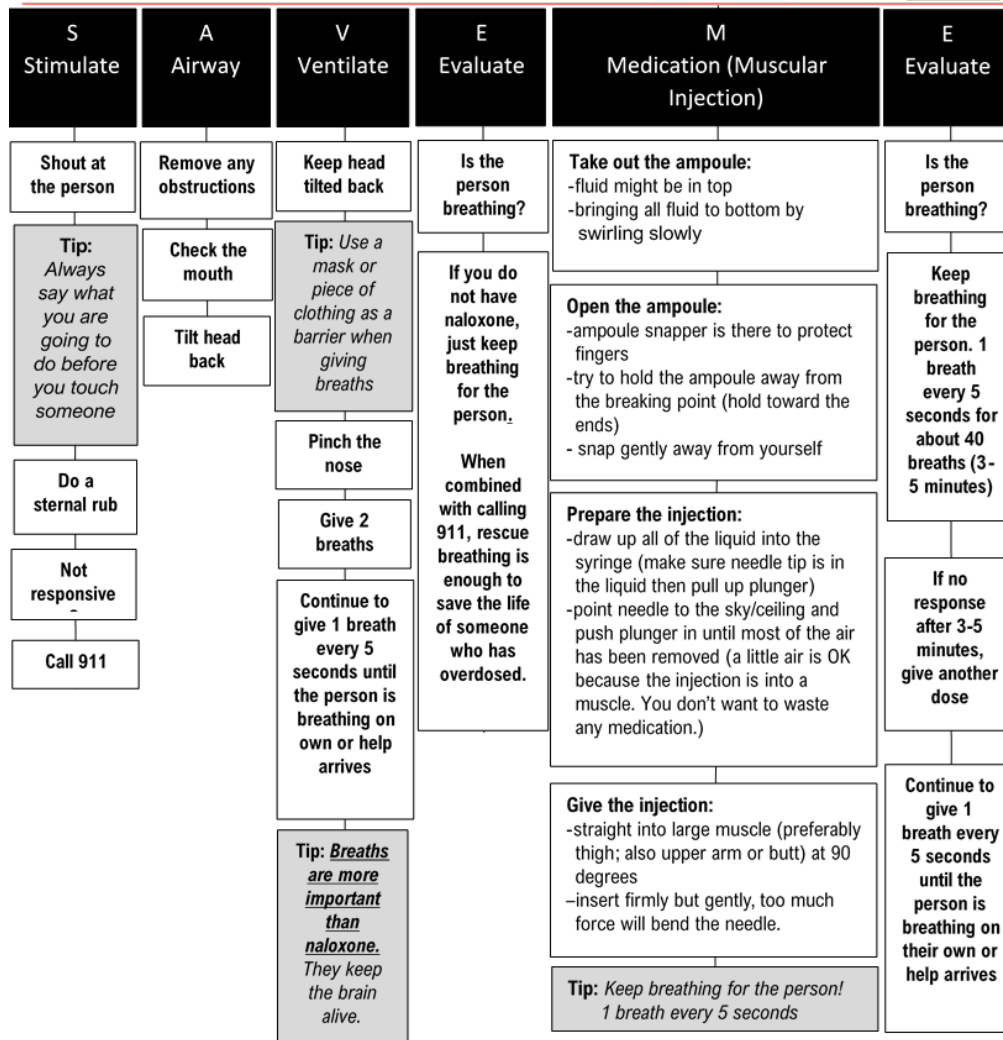
Evaluate



Medication
1 mL of naloxone
*Continue to provide
breaths until the
person is breathing on
their own*



Evaluate
2nd dose?
*If no response
after 3-5
minutes give
another dose*



Reference: Vancouver Coastal Health, *Towards the Heart* program, BC Communicable Disease Control, Harm Reduction Services

Adopted: February 5, 2020, December 15, 2021