ADMINISTRATIVE PROCEDURE 340

OPIOID OVERDOSE RESPONSE

BACKGROUND

This procedure clarifies the response to a possible opioid overdose at District work sites and facilities. These guidelines apply to all School District staff who have been identified and trained by the District to recognize and respond to signs of a student opioid overdose at school sites and during school sanctioned events.

DEFINITIONS

Naloxone

Naloxone is an antidote to an opioid overdose. Naloxone can restore breathing following an opioid overdose and can be given by administering a naloxone injection or a nasal spray known as Narcan™. Under BC law, anyone may administer naloxone in an emergency 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 drugs, that include substances such as morphine, heroin, codeine, oxycodone, methadone, or fentanyl.

Opioid Overdose

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

PROCEDURES

1. Minimum Standard

    1.1. Given the risks associated with overdoses related to opioids, all District facilities will be provided with a minimum of one Naloxone kit and voluntary staff training will be made available regarding:

        1.1.1. Identification of opioid overdose;

        1.1.2. Administration of Naloxone;

        1.1.3. Need for cardiopulmonary resuscitation (CPR); and,

        1.1.4. When to call 9-1-1.

2. **Call 9-1-1.**

    Staff trained in opioid identification and naloxone administration will give an injection of naloxone and/or cardiopulmonary resuscitation (CPR) depending on the circumstances and their comfort level. By permission of the Superintendent, or designate, naloxone kits will be made available to identified District sites through the District procurement system.

3. Education and Training

3.1. Initial Training of Staff

3.1.1 Training for identified staff will include:

3.1.1.1 Overdose Recognition;

3.1.1.2 Overdose Response without naloxone (CPR and 9-1-1); and,

3.1.1.3 Overdose Response with naloxone as per this guideline and procedure.

3.2. The Manager of Occupational Health and Safety will organize Naloxone training for staff who are members of site-based Health & Safety Committees, and for all principals and vice-principals. Online training may be made available to those who would like and/or cannot attend in-person training.

3.3. School sites that continue to identify a need will be required to attend annual refresher training organized by the Manager of Occupational Health and Safety.

3.4. For staff safety, staff will not be required to leave their school/site to respond to potential overdoses.

3.5. Staff should understand that there may be some health and safety risk involved in responding to an overdose. Responding to overdoses involves proper use of personal protective equipment and potential contact with drugs or body fluids. If drugs are on the person or scene, they must be handled with gloves. Staff should be prepared to stand back and de-escalate individuals who may be angry or physically aggressive or violent upon revival via naloxone.

4. Overdose Response Supplies

4.1. A minimum of one Naloxone kit will be provided to all schools within the District.

4.2. Procurement of Naloxone shall be done centrally and be the responsibility of the Manager of Occupational Health and Safety The replacement schedule will be based on the original acquisition dates of the Naloxone and the expiry date. Procurement of Naloxone will occur three months prior to the expiry date. Instructions for the disposal of the unused expiring lots will be done through a local pharmacy.

4.3. Naloxone kits should be stored with other emergency medical supplies for easy access when required.

5. 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 through the completion of an Incident Report which is available in the Hub. This documentation will be kept separate from the student file and the employee file.

5.1. The principal will report the event to the Superintendent or designate and complete a *BC Schools Protection Program* (SPP) report.

6. 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:

6.1. Severe sleepiness or unconsciousness;

6.2. Slow heartbeat;

6.3. Trouble breathing or slow, shallow breathing or snoring;

6.4. Cold, clammy skin; or,

6.5. Trouble with walking or talking.

7. Procedure for Suspected Opioid Overdose Response and Naloxone Administration

7.1. **Call 9-1-1** immediately when an opioid overdose is suspected.

7.2. Check the ampule

7.2.1. Bring all fluid to the bottom by swirling the ampule.

7.3. Open the ampule by holding it away and gently snapping the top away from yourself.

7.4. Prepare the injection

7.4.1. Draw all the liquid into the syringe.

7.4.2. Point needle towards the sky/ceiling and push the plunger in until most of the air has been removed.

7.5. Give the injection

7.5.1. Choose a large muscle (preferably the thigh, upper arm or buttocks).

7.5.2. Insert the syringe at a 90 degree angle and push the plunger until a "click" is heard.

7.5.3. Remove the needle from the individual.

7.6. Aftercare

7.6.1. Stay with the person until help arrives.

7.6.2. Explain what has happened when the individual wakes up.

7.6.3. Inform the emergency response team of what has been done.

Reference: Towards the Heart Program, BC Communicable Disease Control, Harm Reduction Services

Date Approved: June 3, 2025
Date Amended: June 9, 2025