

Opioid Overdose Reversal Medication Training, Administration Prevention, and Postvention

Emergency Management Policy Number: 5030

1.0 PURPOSE

Columbia Basin College ("CBC" or the "College") is committed to the health and safety of its students, faculty and staff, and in maintaining a safe and efficient learning and work environment that complies with all local, state and federal safety and health regulations, programmatic standards, and with any special safety concerns identified at the unit level. This includes providing safety and emergency response equipment, including opioid reversal medication that may promote the health and safety of students, faculty, staff and members of the public.

During 2019, the Washington State Legislature passed Substitute Senate Bill 5380 – Opioid Use Disorder, codified in <u>RCW 28B.10.577</u>, which mandates that institutions of higher education with a residence hall housing at least one hundred students must develop a plan for the maintenance and administration of opioid overdose reversal medication to respond to symptoms of an opioid-related overdose.

This policy provides for consistent application, location, maintenance, inspection, training, and reporting to the Director for Emergency Management and Campus Security. This policy is not intended to cover all circumstances involved in such emergencies.

2.0 AUTHORITY & SCOPE

2.1 Authority: RCW 28B.10.577; Statewide Standing Order of the Washington State Department of Health.

2.2 Scope: All Campus.

3.0 DEFINITIONS

- **3.1** Opioid overdose reversal medication means any drug used to reverse an opioid overdose that binds to opioid receptors and blocks or inhibits the effects of opioids acting on those receptors. It does not include intentional administration via the intravenous route. (RCW 69.41.095(7)(b)).
- **3.2** Opioid-related overdose means a condition including, but not limited to, decreased level of consciousness, non-responsiveness, respiratory depression, coma, or death that: (i) results from the consumption or use of an opioid or another substance with which an opioid was combined; or (ii) a lay person would reasonably believe to be an opioid-related overdose requiring medical assistance. (RCW 69.41.095(7)(c)).
- **3.3** Naloxone is a drug that counteracts the life-threatening effects of an opioid overdose and comes in two forms, a nasal spray and an injection.
- **3.4** Opioids include, but are not limited to, oxycodone, hydrocodone, codeine, fentanyl, heroin, and morphine.

- **3.5** Opioid Overdose Response Training means the annual training, and any required refresher or make-up sessions offered by the College and required for each CBC Overdose Responder.
- **3.6** Overdose Responder means an individual who has been trained to administer opioid reversal medication. A CBC Overdose Responder may be a:
 - **3.6.1** Primary Responder, which means a member of CBC Campus Security who has completed Opioid Overdose Response Training and whose official duty as part of their job description includes responding to opioid overdose emergencies; or
 - 3.6.2 <u>Designated Responder</u>, which means any available designated CBC personnel, other than CBC Campus Security, who has completed Opioid Overdose Response Training to respond to an opioid overdose emergency in the event Campus Security personnel are unavailable.
- 3.7 Standing order means written or electronically recorded instructions, prepared by a prescriber for distribution and administration of a drug by designated and trained staff or volunteers of an organization or entity, as well as other actions and interventions to be used upon the occurrence of clearly defined clinical events in order to improve patients' timely access to treatment. The State Health Officer of the Washington State Department of Health has issued a standing order in accordance with RCW 69.41.095(5)) to facilitate wide distribution of the opioid antagonist, naloxone, so that people in Washington can provide assistance to persons experiencing an opioid-related overdose.

4.0 OPIOID OVERDOSE REVERSAL MEDICATION TRAINING, ADMINISTRATION, PREVENTION, AND POSTVENTION POLICY & PROCEDURE

4.1 Purchase and Maintenance of Opioid Overdose Reversal Medication

- **4.1.1** Purchase of Medication
 - **4.1.1.1** The College will use opioid overdose reversal mediation in the form of Naloxone Hydrochloride Nasal Spray.
 - **4.1.1.2** To the extent possible, the College will utilize free "starter kits" and other discounts provided to educational institutions, as identified by the Washington State Board of Community and Technical Colleges (SBCTC). Each naloxone kit will consist of a Naloxone Hydrochloride Nasal Spray device, step by step directions for naloxone administration, an information sheet on opioid overdose and naloxone, and at least two pairs of non-latex gloves.
 - **4.1.1.3** As recommended by the Washington State Department of Health, a minimum ratio of two (2) naloxone kits per 150 student residents will be available for use at the College. The College may increase the number of naloxone kits available based on the recommendation of local emergency medical providers.
- **4.1.2** Maintenance and Location of Naloxone Kits
 - **4.1.2.1** Naloxone kits will be stored based on manufacturer's recommendations and those of local emergency medical providers.

- **4.1.2.2** Naloxone kits will be stored in the Pasco Campus Security Office (V-Building), in Sunhawk Residence Hall, and Richland Campus Security Office (HSC 321). The College may determine that the kits need to be available in other locations, and will provide clear signage wherever appropriate.
- **4.1.2.3** Naloxone kit storage locations will be clearly marked as follows: a sign above the storage location which states, "Naloxone Kit Opioid Overdose Reversal Medication." The naloxone kit will be labeled "Naloxone Kit Opioid Overdose Reversal Medication."
- **4.1.2.4** The Director for Emergency Management and Campus Security is responsible for the annual inspection of each naloxone kit, and for the disposal and replacement of any expired, damaged or used kits according to the manufacturer's instructions.

4.2 Overdose Responders

- **4.2.1** Employees who have been trained under this policy and procedure to be opioid Overdose Responders must meet the following requirements:
 - **4.2.1.1** Successfully complete all required opioid overdose reversal medication administration training.
 - **4.2.1.2** Respond to emergency calls related to opioid overdose reversal medication use.
- 4.2.2 <u>Training Requirements</u>: Employees who have been designated or have volunteered to be opioid Overdose Responders must successfully complete annual basic Opioid Overdose Response Training. The training will include naloxone nasal spray administration and Hands Only CPR training. The Director for Emergency Management and Campus Security will be responsible for ensuring the training includes each item of opioid overdose response training skills, as required by Washington State Department of Health (DOH). The duration of the training will be consistent with DOH standards.
- 4.2.3 <u>Training Records</u>: Records of employee training will be maintained by the Human Resources Office for documentation in the each employee's official personnel file. The Director for Emergency Management and Campus Security will provide the Human Resources Office with list of current Primary and Designated Responders after each training.

4.2.4 Liability and Good Samaritan Laws:

4.2.4.1 According to <u>RCW 69.41.095</u>, the State of Washington provides protections from criminal and civil liability to any person who, acting in good faith and with reasonable care, possesses, stores, distributes, or administers an opioid overdose reversal medication pursuant to a standing order.

- **4.2.4.2** An individual administering opioid overdose reversal medication who is acting as a Good Samaritan under RCW 4.24.300 is protected from civil damages if they provide emergency care or treatment in good faith. These protections do not apply in the case of personal injury or wrongful death resulting from gross negligence or the willful and wanton misconduct of the person who renders emergency care.
- **4.2.4.3** According to RCW 4.92.070, employees of the College are eligible for defense by the Washington State Attorney General's Office from lawsuits related to acts or omissions that cause loss, injury or harm if the employee's acts or omissions were, or purported to be, in good faith and within the scope of the employee's official duties. This protection does not apply if an employee intentionally injures someone, or clearly violates a law (unless in good faith).

4.3 Administering Naloxone

- **4.3.1** Whenever possible, Campus Security personnel will be the Primary Responders who administer naloxone.
- **4.3.2** The Overdose Responder will administer the naloxone nasal spray as trained, and at minimum:
 - **4.3.2.1** Assess the individual experiencing the emergency as trained (shake, shout, and sternal rub);
 - **4.3.2.2** Call or direct someone to call 9-1-1 and CBC Campus Security;
 - **4.3.2.3** Put on non-latex gloves found in the naloxone kit;
 - **4.3.2.4** Check for and remove any items that may cause bodily injury;
 - **4.3.2.5** Administer the naloxone nasal spray as trained;
 - **4.3.2.6** Stay with the person until help arrives;
 - **4.3.2.7** Provide information regarding the incident to the Director for Emergency Management and Campus Security as requested.
- **4.3.3** A second person will be deployed to assist whenever possible (it is preferable that the assisting person be trained in administering naloxone, but not required).
- **4.3.4** In the event that Campus Security personnel are not available to perform this role, any available Designated Responder will administer the naloxone.
- **4.3.5** The following are the College personnel designated to administer naloxone:

| Position Title | Phone Number | Campus Location |
|---------------------|-----------------------------|-----------------|
| Campus Security | | Pasco Campus |
| Director | (509) 542-4544 or ext. 2544 | Security Office |
| | | V-Building |
| Security Lieutenant | (509) 542-4777,or ext. 7777 | |

| Security Officers, Pasco Campus | (509) 521-4599 or ext. 7777 | |
|---|-----------------------------|--|
| Security Officer, Richland Campus | (509) 539-8167 | Richland Campus Health Science Center |
| Student Housing Director | (509) 542-4550 or ext. 2203 | (HSC) Sunhawk Hall St. Andrews Loop Building |
| Program Assistant | (509) 492-0372 (on-call) | |
| Resident Assistants (RA) | (509) 492-1208 (RA duty) | Sunhawk Hall |
| Student Conduct Assistant Dean for Student Conduct and Activities | (509) 542-4765 or ext. 2765 | ASCBC Office H-Building |
| Fitness Center Director for Student Recreation and Wellness | (509) 542-4630 or ext. 2630 | Fitness Center G-Building |
| Assistant Director for Student Recreation and Wellness | (509) 542-4418 or ext. 2258 | |
| Student Activities Director | (509) 542-4823 or ext. 2223 | ASCBC Office H-Building |
| Student Activities Specialist | (509) 542-4828 or ext. 2228 | |

4.4 Training of Overdose Responders

- **4.4.1** The College will work with local emergency responders and/or with DOH to develop and administer a training program; in all cases, the training will meet minimum training standards developed by DOH.
- **4.4.2** Overdose Responders will, at a minimum, participate in refresher training at least annually that will cover any updates to this policy, advances in treatment of opioid overdoses, and other relevant updated information.
- **4.4.3** Whenever feasible, a broader group of individuals at the College will be trained to assist in administering medication, in addition to the designated personnel above.

4.5 Prevention and Postvention

4.5.1 Opioid overdose prevention efforts will, at a minimum, incorporate education about opioid overdose and treatment into existing drug and

alcohol prevention programs and new student orientations (both Collegewide and student housing-specific). Such efforts may include tables hosted at student or employee campus activities, posters and flyers, brochures and handouts, or informational emails and other communications.

- **4.5.2** Opioid overdose postvention efforts will, at a minimum, include intervention by a College mental health counselor, or referral to a local community mental health provider. Outreach and support services will also be offered and made available to responders and those who are involved in or affected by overdose incidents.
- **4.5.3** Immediately after any incident in which naloxone is used to provide emergency medical assistance, Campus Security personnel shall promptly notify the Director for Emergency Management and Campus Security. If the incident involves a student, the Associate Dean for Student Retention and Completion, Counseling and Advising must also be notified.
 - **4.5.3.1** The used naloxone kit will be disposed according to the manufacturer's instructions and supplies will be replaced by the Director for Emergency Management and Campus Security as needed.
 - **4.5.3.2** As soon as possible following a response to an opioid overdose emergency, the Director for Emergency Management and Campus Security, the Campus Security Lieutenant, and the Campus Primary Responder(s) shall conduct an evaluation of the response efforts to identify strengths and deficiencies of the response plan as revealed by the incident. A post incident report will be developed and a copy will be forwarded to the President's Cabinet for review. minimum, the report will include the date of the overdose, the arrival and departure time of the Overdose Responder, a description of the individual's condition and conduct prior to and after administration of naloxone, the amount of naloxone administered by the Overdose Responder, and the time that law enforcement or emergency medical services arrived and departed. The report will be maintained by the Director for Emergency Management and Campus Security and may be shared with College officials with a legitimate interest in the incident.
 - **4.5.3.3** Confidentiality must be maintained in accordance with all state and federal regulations. Therefore, Overdose Responders are to refrain from open discussion of any aspects of the medical event.
 - **4.5.3.4** The Director for Emergency Management and Campus Security will ensure that appropriate authorities are notified of equipment

irregularities so that the device manufacturer may be notified immediately.

FORMS & OTHER RESOURCES

- **4.6** Washington State Department of Health Standing Order to Dispense Naloxone
- **4.7** <u>Stopoverdose.org</u> <u>University</u> of Washington, Center for Opioid Safety Education and Alcohol & Drug Abuse Institute.
- **4.8** Benton-Franklin County Emergency Medical Services Narcan Administration training evaluator checklist.

5.0 HISTORY & POLICY CONTACT

- **5.1 Proposal Date**: [06/02/2020].
- **5.2 Promulgation Date**: [09/09/2020].
- **5.3 Responsible Administrator**: Director for Emergency Management and Campus Security.