

# Naloxone in Schools

## Policy Brief

2020





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## Summary

The Surgeon General of the United States Public Health Service, Vice Admiral Jerome Adams, emphasizes the importance of the overdose-reversing drug naloxone. For individuals currently taking opioids as prescribed for pain, individuals misusing prescription opioids, individuals using illicit opioids such as heroin or fentanyl, healthcare practitioners, family and friends of people who have an opioid use disorder, and community members who come into contact with people at risk for opioid overdose, knowing how to use naloxone and keeping it within reach can save a life.<sup>1</sup>

## Drug Abuse and Overdose Landscape

- County coroners in Ohio reported 3,764 accidental drug deaths in 2018, which is 1,090 fewer than the previous year's record high of 4,854.<sup>1</sup>
- In 2019, 4,028 Ohioans died from unintentional drug overdoses, which was a 7% increase from 2018. From 2018 to 2019, the overdose death rate increased by 6% to a rate of 36.4 deaths per 100,000 population.<sup>1</sup>
- Ohio's decrease was more than four times the national decline of 5%, according to provisional data released separately by the Centers for Disease Control and Prevention.
- Ohio had the third-largest drop among states but still has among the highest rates of fatal drug overdoses in the country.<sup>2</sup>
- According to the U. S. Surgeon General's Advisory on Naloxone and Opioid Overdose, research shows that, when naloxone and overdose education are available to community members, overdose deaths decrease in those communities.<sup>3</sup>

## What is Naloxone?

Death following opioid overdose is preventable if the person receives basic life support and the timely administration of the opioid antagonist naloxone. Naloxone, also known as Narcan<sup>®</sup>, is a medication that can reverse an overdose caused by an opioid drug (heroin or fentanyl, prescription pain medications). When administered during an overdose, naloxone blocks the effects of opioids on the brain and quickly restores breathing.<sup>4</sup> In Ohio, access to naloxone is available without a prescription.<sup>5</sup> Naloxone can be obtained at a retail pharmacy or your local Project DAWN program. Project DAWN (Deaths Avoided with Naloxone) is Ohio's network of community naloxone distribution programs. These programs, operated on a local level, provide take-home naloxone kits and overdose response training to people at risk of opioid overdose and other community members who may be in a position to respond to an overdose.

## Naloxone in Schools

Schools should be prepared to respond to a variety of emergencies, including drug-related emergencies.<sup>5</sup> According to the World Health Organization, those most likely to witness an overdose include people at risk of an opioid overdose; their friends or a family member; and those individuals whose work may bring them in contact with people who have overdosed.<sup>3</sup> Working in the school setting, staff can face unexpected emergencies, including potential opioid overdoses. By having naloxone readily available, an individual may be able to reverse the effects of opioid overdose while waiting for medical care to arrive.

A survey of superintendents found that, out of 295 responses, slightly more than half (53%) indicated that a formal decision has been made about naloxone and 86 (29%) had naloxone currently on site within their district. On average, respondents felt that their community was somewhat supportive of access to naloxone generally (3.25 on a 4-point scale) and also somewhat supportive of access to naloxone in school settings (3.08).

## Naloxone Legislation

During July 2017, the Akron Public Schools Board of Education passed a motion, with only one dissenting vote, to equip every middle school and high school in the district with naloxone.

According to a 2018 article in “USA Today” written by Ken Alltucker, “At least 10 states have passed legislation about naloxone in schools. Some states such as Maryland, New Jersey and Rhode Island require schools to stock the antidote. More often, states allow a local school board or superintendent to decide.”

The state of Washington enacted legislation in 2019 requiring high schools with more than 2,000 students to obtain and store naloxone for emergency situations, beginning with the 2020-21 school year. Schools with fewer than 2,000 students will be allowed to obtain and store naloxone if they choose to do so at the local level. The Washington superintendent of public instruction was directed in the legislation to develop guidelines and training requirements for responding to opioid overdoses in schools.

During July 2019, the state of Rhode Island enacted legislation to require all public and private schools to provide and maintain naloxone in *each* school facility. The legislation also states that any school nurse, teacher, or other school personnel who uses an opioid antagonist will be protected from both civil and criminal liability.

## Policy Considerations and Model Language

### Ohio House Bill (HB) 341 at a Glance

- Governor DeWine signed House Bill 341 into law Sept. 16, 2020.
- HB 341 includes several provisions that will increase access to naloxone.
- House Bill 341:
  - Removes the requirement that facilities possessing naloxone (both for personally furnishing or administering) must have a terminal distributor of dangerous drugs (TDDD) license.
  - Will also expand the number of licensed healthcare providers who can authorize a protocol; prior language only allowed physicians to do so.
  - Allows naloxone to be made available in public locations, so long as it is tied to an existing TDDD license.
  - Will add civil liability protections for laypersons administering naloxone.

### Ohio Senate Bill (SB) 319 - (Naloxone for administration by service entity personnel) at a Glance<sup>6,7</sup>

*Step 1:* SB 319, which went into effect in 2017, allows naloxone to be available for administration at locations, known as service entities, that service individuals who may be at risk of experiencing an opioid-related overdose. It also removes the requirement that the site be licensed as a terminal distributor of dangerous drugs (TDDD) for the purposes of storing naloxone for administration.

*Step 2:* To become eligible to administer naloxone at a service entity, a physician or board of health must establish a written protocol for administering naloxone. In the case of a board of health, the protocol must be established through a physician acting as the board's health commissioner or medical director (ORC 3707.562).

*Step 3:* Attend a onetime training outlined in the service entity protocol. There are four ways to obtain naloxone (ORC 5119.44):

1. Purchase from a wholesaler that is licensed by the State of Ohio Board of Pharmacy.

2. Purchase from any licensed terminal distributor of dangerous drugs.
3. Contact NARCAN<sup>®</sup> to obtain it for your high school, college, or university through the *NARCAN<sup>®</sup> Nasal Spray Schools Program*.
4. Contact your local Project DAWN program. Find your local Project DAWN program at - <https://odh.ohio.gov/wps/portal/gov/odh/know-our-programs/violence-injury-prevention-program/resources/list-project-dawn-sites>.

**ORC 4729.514** states: A service entity or an employee, volunteer, or contractor of a service entity is not liable for or subject to any of the following for injury, death, or loss to person or property that allegedly arises from an act or omission associated with procuring, maintaining, accessing, or using naloxone ... unless the act or omission constitutes willful or wanton misconduct: damages in any civil action, prosecution in any criminal proceeding or professional disciplinary action.

### **Ohio's Good Samaritan Law**

Ohio revised its Good Samaritan laws (ORC 2952.11) in 2016 to encourage individuals to call 911 when someone overdoses. The law offers immunity to those seeking emergency medical services (for either themselves or another individual) for minor drug possession (possession of controlled substances only, not paraphernalia). However, those on parole or probation are not eligible.<sup>8</sup> Additional details about the Good Samaritan law revisions and details on immunity can be found here: <https://u.osu.edu/ohiostart/2019/10/04/drug-overdose-and-ohios-good-samaritan-law/>.

### **Questions to Consider in Development of Naloxone in School Program**

Key items to consider during the development of a Naloxone in School Program include but are not limited to: state laws and district policies, school nurse practice, staff/parent/student education, dosing/storage and community involvement. More details on these items can be found at:

<http://marylandpublicschools.org/about/Documents/DSFSS/SSSP/SHS/NaloxonePolicyFAQ.pdf>.



# Success Stories and Community Highlights

## **Dublin City Schools**

Since 2016, Dublin City Schools has had naloxone available in all of its 19 buildings. The district is leading the way in the state and encourages other school systems to make this a priority as well. “The bottom line is it can save a life. We shouldn’t be afraid of that. We all should have this tool available to save a life,” Deputy Superintendent Tracey Deagle said.

In Dublin, their goal is to have all staff trained to administer the drug. With fairly constant turnover as is typical for many school systems, that is an optimistic goal. But realizing the severity of the situation, Dublin school nurses and school resource officers do their best to train all new hires. Naloxone training of athletic directors, athletic trainers, and coaches is prioritized, as the greatest risk of an overdose is typically after school hours, with community members on campus for sporting events.

Looking to Dublin City Schools as a model for success, other schools across the state should be encouraged to take this step, making naloxone readily available in their schools, and ensuring all staff are prepared to use it, so they have the chance to save a life.

## **ProMedica’s Mock Heroin Project - Description of Agency’s Plan to Raise Awareness to Targeted Populations**

ProMedica sees over 150,000 adult patients in its Ohio-based emergency departments (ED). Many patients who present to the ED are misusing opioid pain medication and a great deal of work has been done with providers to improve prescribing practices. Additionally, an equally impressive effort has been taken on by a distinctive group of ER nurses at ProMedica Flower Hospital’s Emergency Center and Psychiatric Services. In Sylvania, Andrea Donahue, RN, leads the Mock Heroin Project staff along with regular volunteers who share first-hand experiences dealing with opioid drug dependence. By recruiting persons with direct contact and personal involvement, they convey a powerful message that reduces stigma and discrimination while offering hope. The project was formed to show the community what a heroin/drug overdose can look like and explain how the effects of an overdose can affect more than just one individual. Partnering with the Lucas County Coalition, the project educates the community and target audiences on signs and symptoms of drug use (warning

signs), different types of drugs and their effects on the body, different outcomes of overdoses, and available outpatient and inpatient resources and services. Since the program's launch, nearly three years ago, the group has visited 15 community organizations. In an attempt to further educate and encourage the community, the group created an influential and responsive skit that is performed in front of a variety of inner-city schools, local colleges, and community churches, with an emphasis on racial and ethnic minorities most effected by the opioid epidemic.

Using this methodology of education and awareness, ProMedica's Mock Heroin Project staff help reduce stigma and shame associated with opioid drug dependency. With such positive responses from all who are reached, new dates and events are continuously being scheduled.

## Conclusion

- Naloxone is an evidence-based, cost-effective intervention to save the lives of people who are experiencing a drug overdose.
- Naloxone is easy to administer through a nasal spray, with very minimal adverse effects even if a person is not overdosing. Individuals administering naloxone are protected by Ohio's Good Samaritan law.
- Easy and quick access to naloxone is paramount, and naloxone in school settings will increase community-based access.
- Effective school-based models for the training, distribution, and storage of naloxone have been implemented, resulting in positive outcomes.
- ODH and local health departments are available to assist in developing policies for training, distribution, and storage of naloxone in Ohio schools.

# Additional Resources

## **National Association of School Nurses**

- Toolkit: <https://www.pathlms.com/nasn/courses/3353>
- Position Statement: <https://www.nasn.org/advocacy/professional-practice-documents/position-statements/ps-naloxone>

## **Ohio Specific Resources**

### **Ohio Schools with Narcan**

<https://radio.wosu.org/post/just-case-ohio-schools-stock-overdose-reversing-drug-0#stream/0>

### **Take Charge Ohio Toolkit for School Nurses**

<https://tinyurl.com/TCOscholnursestoolresources>

### **Free Narcan for High Schools and Colleges**

<https://www.narcan.com/community/education-awareness-and-training-resources/>

## References

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The Ohio Overdose Prevention Network (Ohio OPN) is a subgroup of the Ohio Injury Prevention Partnership (OIPP). It was created to focus specifically on the epidemic of drug overdose deaths.

The purpose of the Ohio OPN is to identify and implement actions for the prevention of drug misuse, abuse and overdose and to serve as a means of communication and collaboration on this topic among interested organizations, agencies and individuals throughout the state.

This brief, along with the survey that generated presented data, was developed by the Policy Subcommittee of Ohio OPN in efforts to share some summary and framework information around naloxone in schools.