

**OPIOID OVERDOSE PREVENTION**

The Board of Education recognizes that the use of opioids can lead to overdose and death of district students and staff. The Board wishes to minimize these deaths by the use of opioid overdose prevention measures.

The signs and symptoms of opioid overdose can include: shallow, slow, erratic, or no breathing: slow, erratic, or no pulse: snoring: choking with a gurgling sound: unconsciousness, minimal responsiveness, limp body, unresponsive to painful stimuli: pinpoint pupils: blue or purple lips or fingertips: pale, blue gray or ashen skin: clammy face or skin.

The Board of Education approves the following program for use of opioid antagonists (Naloxone only) on students, staff, or visitors suspected of having opioid overdose.

The District will participate in an existing NYSDOH Registered Opioid Overdose Prevention Program (Columbia County Department of Health).

The school district will participate in an existing New York State Department of Health (NYSDOH) registered opioid overdose prevention program (Columbia County Department of Health - CCDOH) CCDOH has its own clinical director, and will issue an updated non-patient specific order for the administration of Naloxone. CCDOH will be responsible for training all school personnel who will be administering the Naloxone. CCDOH will also provide the Naloxone kits for the school and any trainee. The District will collaborate with CCDOH's program director to follow protocol and procedures related to management of Naloxone in the school.

The District shall designate a main liaison to work with CCDOH. Naloxone will be stored in a secure but accessible location consistent with the District's emergency response plan.

Any school staff member may volunteer to participate in the program. Once trained by CCDOH, staff members who volunteer may administer intranasal Naloxone in the event of an emergency, on site during the school day or at any on-site school sponsored event. All volunteers administering Naloxone will be covered under the NYS Good Samaritan Law (adopted in 09/11).

School nurses may also participate in the program. Pursuant to a non-patient specific order and protocol issued by the CCDOH Medical/Clinical Director, school nurses may administer intranasal Naloxone per their training, on school grounds or at any school sponsored event off school grounds. The non-patient specific order and protocol must meet the criteria established pursuant to the regulations of the Commissioner of Education (8 NYCRR 64.7).

The Registered Nurse representative will ensure the school district will comply with the requirements of Public Health Law 3309 including, but not limited to appropriate clinical oversight, recordkeeping and reporting to CCDOH.

School nurses will document and report the administration of the Naloxone to the program's program director at CCDOH.

This policy will be reviewed on an annual basis to ensure they continue to meet the needs of the district and are consistent with recommended best practices.

Those trained as volunteer responders will be required to review training every year, and participate in a live training/certification every two years by CCDOH.

Cross-ref:

5420 Student Health Services

Ref:

NYS Education Law 922: 6527: 3023: 6509-d: 6909

Public Health Law 3309

8 NYCRR 64.7: part 136

10 NYCRR 80.138

Guidance for Implementing Opioid Overdose Prevention Measures in Schools, NYSED, updated 03/2019

Effective Date: October 3, 2023

**OPIOID OVERDOSE PREVENTION REGULATION****Administration of Opioid Antagonist Pursuant to Non-Patient Specific Order**

The on-site inventory and placement of Naloxone will be accounted for weekly, and counted by personnel designated by the school administrator. Accounting for Naloxone in AED cabinets may occur at the same time the check of the AED is performed. This count should be included and recorded on the AED log. The log must include the date, time and signature of the designated personnel performing the count. The log will be kept with whatever Naloxone has not yet been deployed in the school health office, with the log being maintained for no less than seven years. When new Naloxone is placed in the locked storage cabinet or AED cabinet, the lot number, date of receipt , expiration date and location must be recorded on the log. The designated personnel placing the Naloxone in the storage area will sign the log and will need to monitor expiration dates. The designated personnel will contact CCDOH when the Naloxone supply is getting low or nearing expiration date so a replacement supply can be furnished.

Naloxone will be documented in the individual's cumulative health record for student's, or consistent with applicable policies for care administered to staff. Documentation must include the date and time of administration, the signs and symptoms displayed by the student or staff member prior to administration: the student or staff member's response to the Naloxone, if CPR/rescue breathing/AED was administered, the name of the EMS agency providing transport or care, along with the name of the health care facility the student/staff was transported to: and signed by the person completing the documentation. Incident reports will be completed as per the District policy.

Effective Date: October 3, 2023