

**ADMINISTRATIVE REGULATIONS
REGARDING ADMINISTRATION OF NALOXONE (NARCAN)**

Opioid Overdose Prevention (Emergency Administration of Naloxone)

The District's opioid overdose prevention program shall establish and follow appropriate procedures for the use of Naloxone (Narcan), regarding placement, storage, inventory, reordering, documenting and reporting incidents of usage and training.

Communication

Each school stocking Naloxone (Narcan) will have the school nurse, along with the District administration, plan for annually informing all parents/guardians and staff about the policy pertaining to its use and specifically:

- The availability of Naloxone to treat opioid overdoses and what it does;
- The symptoms of opioid drug overdoses;
- The manner in which individuals should report suspected overdoses;
- The protection from criminal prosecution provided by law for persons who report a suspected overdose using their name and remaining with the overdosing person until emergency medical services (EMS) or law enforcement arrive;
- The protection from civil liability provided by law for persons who report overdoses or administer Naloxone (Narcan) in overdose emergencies.
- Parents and guardians to notify the school nurse or other school representative if the opioid antagonist should not be administered to their child.

Standing Order from the School Physician/School Medical Advisor

The school physician/School Medical Advisor shall provide and annually renew a standing order for administration of Naloxone (Narcan) to students or staff suspected of experiencing an opioid overdose. The standing order shall be maintained in the nurses' office and copies of the standing order shall be kept in each location where Naloxone (Narcan) is stored.

Training

School nurses having custody of Naloxone shall be trained in its use by the Nursing Supervisor, school physician/School Medical Advisor, or Department of Public Health (DPH) approved training or from the appropriate division of the Connecticut State Department of Education. Such training program shall include overdose risk factors, recognizing opioid-related overdoses,

calling 911, rescue breathing administering Naloxone (Narcan), recovery position and promptly seeking medical attention for drug overdoses.

The following signs may indicate an overdose situation:

- The person is unresponsive or limp.
- The person is awake but unable to talk.
- The person's breathing is slow or erratic or the individual is not breathing.
- The person's pulse is slow or erratic or there is no pulse.
- The person's skin is pale gray or blue, especially around the fingernails and lips.
- The person is making deep, slow snoring, choking or gurgling sounds.
- The person is vomiting.

A list of District individuals who successfully completed such training shall be maintained, updated and kept in the school nurse's office and the District's Central Office.

Acquisition, Storage, and Disposal

The school physician/School Medical Advisor shall order for each school site Naloxone (Narcan) from a properly credentialed wholesaler of drugs, cosmetics and medical devices.

Naloxone (Narcan) will be clearly marked and stored in the nurse's office and/or in the schools AED cabinets. It will be stored in accordance with the manufacturer's instructions to avoid extreme cold, heat and direct sunlight. It is to be stored in moderate temperatures, out of direct sunlight, and not in a refrigerator.

Inspection of the Naloxone is to be conducted regularly by the school nurse. The expiration date is to be checked. Expiration is generally 12 to 24 months.

There should always be one backup naloxone kit per building. When a Naloxone kit is used, another backup kit is to be ordered. Naloxone that is nearing its expiration date should be replaced. The school nurse is to maintain a log of Naloxone supplies containing the following information: lot number, date of receipt, expiration date, and location. The school nurse shall perform an inventory check on a monthly basis.

Administration of Naloxone (Narcan)

When responding to a suspected drug overdose, the school nurse shall:

1. Call for medical help immediately (Dial 911).
2. Check for signs of opioid overdose.
3. Perform initial rescue breathing (or CPR if needed), as instructed in training.

4. Prepare and administer Naloxone (Narcan), as instructed in training.
5. Continue the rescue breathing (or CPR if needed), as instructed in training.
6. Administer second dose of Naloxone (Narcan) in 3 minutes if no response or minimal breathing or responsiveness.
7. Place in recovery position, as instructed in training.
8. Stay with the individual until emergency medical help arrives.
9. Cooperate with EMS personnel responding to the incident.
10. Notify the building administrator or designee of the incident.

Follow-Up

After the administration of Naloxone (Narcan) the school nurse will follow the District's reporting protocols.

The school nurse, or other staff, is also to notify appropriate student services and provide substance abuse prevention resources to the overdose victim and family, as appropriate.

School nurses are to document all administration of Naloxone (Narcan) in the same manner as the administration of other medications under non-patient specific orders. The school nurse must report all administration of Naloxone (Narcan) to the Building Principal and the Nursing Supervisor who will inform the school physician/School Medical Advisor and Superintendent.

The Superintendent or his/her designee will immediately report incidents involving the use of controlled substances on school property, at any school-sponsored activity or on a school bus to the local police department in accordance with state law and regulations, the procedure set forth in the memorandum of understanding with local law enforcement and Board policies.

The Superintendent or his/her designee will notify the parent/guardian of any student involved in an incident involving the use of controlled substances as soon as practicable. All attempts made to reach the parent/guardian will be documented.

Any student who experiences a drug overdose is to be referred to the District's Student Assistance Program.

Legal Reference: Connecticut General Statutes

10 - 212 School nurses and nurse practitioners. Administration of medications by parents or guardians on school grounds. Criminal history; records check.

10-21 20 Administration of medications in schools. (as amended by PA 99- 2, and June Special Session and PA 03-211, PA 04- 181, PA 07-241, PA 07- 252, PA 09 - 155, PA 12-198, PA 1 4-176 and PA 15-215)

170-714 Immunity for prescribing, dispensing or administering an opioid antagonist to treat or prevent a drug overdose.

21 a -279(g) Penalty for illegal possession. Alternate sentences. Immunity.

52-557b Immunity from liability for emergency medical assistance first aid or medication by injection. School personnel not required to administer or render (as amended by PA 05-144, An Act Concerning the Emergency Use of Cartridge Injectors).

Connecticut Regulations of State Agencies 10-21 20-1 through 1 0-21 20- 10, inclusive, as amended.

PA 15-198: An Act Concerning Substance Abuse and Opioid Overdose Prevention

PA 16-43: An Act Concerning Opioids and Access to Overdose Reversal Drugs

Approved: June 18, 2024