# SCHOOL DISTRICT NO. 53 (Okanagan Similkameen)

# **POLICY**

No. F-18

Created: October 21, 2025

# **UNEXPECTED HEALTH EMERGENCIES – OPIOID OVERDOSE RESPONSE**

#### Preamble:

The Board of Education of School District No. 53 (Okanagan Similkameen) recognizes that there is a duty to provide care to students and staff who are at risk from a life-threatening opioid overdose situation.

The purpose of this policy is to establish guidelines and procedures for the utilization of naloxone, an opioid antagonist or 'reversal agent' administered by a school staff member in response to an opioid overdose emergency.

This policy has been designed to ensure that suspected opioid overdose situations are recognized and responded to in a timely manner by trained staff members.

The Emergency Health Services Act allows all health care professionals, first responders (including security personnel) and citizens to administer naloxone in non-hospital settings.

# **Policy:**

This policy and regulations apply to school staff who have been trained to recognize and respond to a suspected opioid overdose. Trained staff can administer naloxone to any student or staff member suspected of having an opioid overdose, whether or not, there is a history of opioid or other drug use on school sites or during school sponsored events.

All District schools will maintain on-site naloxone in designated locations ie., with other medical supplies for easy access.

# SCHOOL DISTRICT NO. 53 (Okanagan Similkameen)

# REGULATIONS

No. F-18

Created: October 21, 2025

#### **UNEXPECTED HEALTH EMERGENCIES – OPIOID OVERDOSE RESPONSE**

#### 1. Definitions:

- a. Naloxone An opioid antagonist that temporarily reverses the effects of opioids by competing for the same receptor sites. Naloxone is available in British Columbia without prescription and is administered by injection into a muscle or intranasally
- b. Opioid Depressant medication used for pain relief that has the potential to slow breathing and heart rate. Thay may be prescribed or obtained from the unregulated market. Common opioids include heroin, fentanyl, oxycodone, codeine, morphine, methadone and hydromorphone
- c. Overdose An overdose is a physiological event that occurs when a substance or combination of substances is consumed in amounts exceeding what the body can safely process, leading to harmful and potentially life-threatening effects
- d. <u>Opioid overdose</u> An acute life-threatening medical emergency that occurs when a person is exposed to a toxic amount of opioids. It is characterized by the body's response to excessive opioid levels, which can lead to unconsciousness or unresponsiveness, severely slowed or stopped breathing, and pinpoint pupils
- e. <u>Trained opioid overdose responder</u> A school or district location staff member who has completed opioid overdose response training, including naloxone administration, as recommended by the local health authority
- 2. Training: Opioid overdose response training, including naloxone administration, should be undertaken by designated staff member(s) at every school. Staff should be aware that opioid overdose response, like many other emergency response protocols, may involve health and safety concerns. District health and safety protocols should always be followed. Additionally, responding to emergencies may be an upsetting or traumatic experience for responders, bystanders, and individuals experiencing medical distress. Staff are encouraged to access supports and resources through the District's employee assistance program.
- **3. Procurement of Naloxone:** Each school will be responsible for the procurement of naloxone kits and replacing supplies prior to expiration dates. At a minimum, each school should have one or the other of the following supplies within a naloxone kit (Narcan Nasal Spray or Naloxone Ampoules):

NASAL NALOXONE KIT			
ITEM	MANUFACTURER	QUANTITY	
Narcan Nasal Spray, 4 mg dose	Adapt Pharma	2	
Nitrile Gloves, pair	Various	1	
Mask/barrier device	Various 1		
Step by step instructions	Various	1	

INJECTABLE NALOXONE KIT			
ITEM	MANUFACTURER	QUANTITY	
Naloxone Ampoules (0.4 mg/ml)	Various	3	
Vanishing Point Syringes – Retractable (3 ml)	Various	3	
Plastic Ampoule Breakers	Various	3	
Nitrile Gloves, pair	Various	1	
Mask/barrier device	Various	1	
Step by step instructions	Various	1	

- **4. Storage of Naloxone:** Kits are to be stored with other emergency medical supplies for easy access when required. Naloxone is to be stored in accordance with the manufacturer's instructions. Inspection of the naloxone and ancillary kit items shall be conducted regularly, including regular review of expiration dates.
- **5. Suspected Opioid Overdose Response and Naloxone Administration:** In the event of a suspected opioid overdose, trained staff members shall follow the protocols outlined in their opioid overdose response training.

# a) Check for signs of an opioid overdose

- Breathing is slow, irregular or absent
- Person is minimally responsive or unresponsive
- Pupils are extremely small
- Lips and nails are discoloured
- Skin is cold and clammy
- Person may be making snoring or gurgling sounds
- Heart rate may be slow or absent
- Person may be rigid or experience seizure
- Vomiting may occur

# b) Follow the 'SAVE ME' steps:

#### Stimulate

- First, try to rouse the person, call their name, tell them to take a breath, apply pain stimuli, if necessary, by squeezing their fingertips or muscle between their neck and shoulder. Tell the person what you are doing before you do it
- **If unresponsive, call 9-1-1.** Let the operator know the person is unresponsive, and provide your exact location

# **Airway**

- Tilt head back to open the airway
- Look in mouth and use gloves to remove any objects that may be blocking the airway

# Ventilate

- If not breathing, use the mask in the naloxone kit to cover the mouth
- Pinch nose, keep head tilted back and give 1 breath every 5 seconds until the person is breathing on their own or help arrives
- Check to make sure the chest rises each time you give a breath

#### Evaluate

- Are they breathing on their own?
- If yes, move person into recovery position and monitor for breathing
- If no, prepare to administer naloxone and continue rescue breathing with mask, 1 breath every 5 seconds

# Medication − Administering NARCAN<sup>TM</sup>

#### Nasal Spray:

- Remove Nasal Spay device from the package. Do **NOT** test the device. There is only one dose per device
- Lay the person on their back. Tilt the person's head back and provide support under their neck with your hand.
- Hold the device with your thumb on the bottom of the plunger with your first and middle fingers on either side of the nozzle.
- Gently insert the tip of the nozzle not one nostril. Your fingers should be right up against the nose. If giving to a child, make sure the nozzle seals the nostril.
- Press the plunger firmly with your thumb to give the dose.
- Remove the device from the nostril.

## Injectable:

- Take one ampoule out of the medicine bottle.
- Swirl the ampoule in circles to get all the liquid to the bottom.
- Snap off the top of the ampoule. It will break into two pieces with little pressure.
- Unwrap the syringe. Put the needle into the liquid and pull up on the plunger. Try to suck up all the liquid into the syringe.
- Turn the syringe with the needle pointed up. Gently push the plunger until most of the air is pushed out.
- Firmly push the needle into an upper arm or thigh muscle. The needle can go through clothes. Never put the needle into the neck or heart.
- Push the plunger down hard. It will click and the needle will retract.
- Give another injection every three minutes until they are breathing normally (at least 1 breath every 5 seconds).

#### Evaluate

- Naloxone will start to work in 2 to 5 minutes
- Is the person breathing on their own?
- If yes, move person into recovery position and monitor for breathing
- If **no**, prepare to administer another dose of naloxone and continue rescue breathing, 1 breath every 5 seconds
- Give another dose of naloxone every 3 minutes until the person is breathing on their own (at least 1 breath every 5 seconds)

#### 6. Aftercare

• <u>Comfort the person</u>: Overdosing can be frightening and traumatic. For individuals who regularly take opioids, opioid withdrawal, after naloxone administration, can be unpleasant. Explain what happened and what you have done. Some individuals may be frightened, confused or upset. They may not understand or remember that they have overdosed. Be prepared to reassure and deescalate

- Encourage transport to hospital: Explain the importance of going to the hospital as the overdose may return, that they may have been injured when they overdosed or aspirated on fluids. Opioids can last 4 to 24 hours in the body. Naloxone wears off in 30 to 90 minutes. It is important that the person receives medical care after the overdose response
- <u>Inform first responders what happened</u>: Be prepared to provide Emergency Services or first responders with information regarding the suspected opioid overdose and treatment provided

# 7. Post-Incident Response

- An opioid overdose can be upsetting or traumatic for those who witness or respond to the event. School District Critical Incident Response and debrief protocols should be followed
- Proceed with all required School District Health and Safety processes, including reporting processes.

# **IMPORTANT**

- ✓ Call 9-1-1 immediately when an opioid overdose is suspected
- ✓ Naloxone can be administered by a non-health care professional before emergency medical assistance arrives, however it is not a substitute for medical attention.
- ✓ While naloxone only works for opioid overdoses, it is completely safe so if you are not sure, it is better to administer it.
- ✓ Even if naloxone is unavailable, giving breaths can save a life.
- ✓ If the person has not been breathing for a while or you don't know how long they have not been breathing, 9-1-1 may instruct you to start chest compressions.

# Follow the SAVE ME steps to respond



