



( ) Required  
 (X) Local  
 ( ) Notice

## **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.

### **Administration of Opioid Antagonist Pursuant to Non-Patient Specific Order**

The Board of Education approves the following program for the use of opioid antagonists on students or staff suspected of having opioid overdose whether or not there is a previous history of opioid abuse.

Opioid antagonists shall be limited to naloxone and other medications approved by the Department of Health for such purposes, and administered only to students and staff.

### **The District Operates a NYSDOH Registered Opioid Overdose Prevention Program**

The school district will participate as an opioid overdose prevention program registered with the New York Department of Health (NYSDOH) as an opioid antagonist recipient. As clinical director, the school district's medical director will:

- be the program's clinical director for the program;
- issue a non-patient specific order for the administration of an opioid antagonist (naloxone); and
- provide oversight of the clinical aspects of the program.

Naloxone will be stored in secure but accessible locations consistent with the district's emergency response plan. Such locations shall be designed to provide ready and appropriate access for use during emergencies, consistent with the district's emergency response plan.

Any school staff members may volunteer to participate in the program. Once trained by using a NYSDOH approved training program, staff members may administer intranasal (in the nose) naloxone in the event of an emergency, on-site during the school day or at any on-site school sponsored activity.

School nurses may also participate in the program. Pursuant to a non-patient specific order and protocol issued by a NYS licensed physician or certified nurse practitioner, school nurses may administer intranasal naloxone or, if allowable per their training, intramuscular (in the muscle) naloxone, on school premises or at any school-sponsored activities occurring off school grounds. The non-patient specific order and protocols must meet the criteria established pursuant to the regulations of the commissioner of education (8 NYCRR §64.7).

The district will maintain a log of trained school personnel and report newly trained personnel on a quarterly basis to the NYSDOH. Any staff member wishing to participate in the program shall contact the program director.

The school district will designate a program director for its opioid prevention program, who shall be the Director of Student Services. The program director will, among other things:

1. Ensure approved policies and procedures are in place to provide guidance on how the program will be administered;
2. Ensure that there is a clinical director who oversees the clinical aspects of the program;
3. Establish training consistent with the school or school district's policies and the NYSDOH guidance.
4. Ensure that responders complete a NYSDOH approved training prior to receiving a certificate of completion; and dispense and/or provide shared access to naloxone kits to trained responders in accordance with laws, rules and regulations;
5. Establish/maintain a recordkeeping system for training and opioid antagonist inventory and use according to the NYSDOH requirements;
6. Act as a liaison with emergency medical services and emergency dispatch agencies;
7. Assist the clinical director in collecting, reviewing and reporting information on overdose, and naloxone administration; and,
8. Report to the NYSDOH on a quarterly basis the number of doses of naloxone available in the school or district and the number or overdose responders trained.

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

### **Documentation and Other Provisions**

School nurses will document the administration of naloxone in accordance with the non-patient specific order and protocol that authorized the nurse to administer the naloxone, and report the administration of the naloxone to the district's medical director.

If there is a patient specific order for a particular student, the district will refer to the current New York State Education Department Guidelines for Medication Management in Schools as appropriate.

Those trained as volunteer responders in the administration of naloxone will be required to review training every year.

Ref: Education Law §§902 (requires public schools to employ medical director); 922 (volunteer naloxone responder); 6527 (emergency treatment of anaphylaxis and opioid overdose); 3023 (liability coverage); 6509-d (protection from liability for professional misconduct); 6909 (administration of naloxone by nurses)

Public Health Law §3309 (volunteer naloxone responder)

8 NYCRR §64.7 (administration of naloxone); Part 136 (school health services program, including naloxone)

10 NYCRR §80.138 (volunteer naloxone responder)

*Guidance for Implementing Opioid Overdose Prevention Measures in Schools*, New York State Education Department, updated 3/2019,  
[https://www.schoolhealthny.com/cms/lib/NY01832015/Centricity/Domain/85/NYSED\\_%20OpioidGuidance\\_3.2019.pdf](https://www.schoolhealthny.com/cms/lib/NY01832015/Centricity/Domain/85/NYSED_%20OpioidGuidance_3.2019.pdf)

*Opioid Overdose Prevention: Guidelines for Policies and Procedures*, New York State Department of Health, March 2014,  
[www.health.ny.gov/diseases/aids/general/opioid\\_overdose\\_prevention/docs/policies\\_and\\_procedures.pdf](http://www.health.ny.gov/diseases/aids/general/opioid_overdose_prevention/docs/policies_and_procedures.pdf)

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