# Community Based Naloxone Program: Frequently Asked Questions for Distribution Sites

Community Based Naloxone (CBN) Program distribution sites can be community pharmacies, community based organizations, public or private clinics, hospitals, community health sites, and private businesses, among other categories. These questions are to support new and existing naloxone kit providers from a variety of distribution sites.

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## 1. How do I register to become a CBN kit distribution site and get kits?

Read and follow the instructions in the <u>Community Based Naloxone Program Distribution</u>
<u>Site Manual</u> to register your program as a kit distribution site and educate your staff to prepare for distribution. Visit <u>www.ahs.ca/naloxone</u> for all surveys you will need to complete. Register your site through the Site Registration survey. This takes 7-10 business days to process and complete. Once completed, you will receive an email with a unique login code for your site. You will then be able to order kits via the Naloxone Kit Order survey using this code. Delivery of kits takes 7-10 days and there is no delivery fee.

## 2. What training do I need to distribute naloxone kits?

Anyone who distributes a kit is considered a trainer. Trainers who are **not** Alberta Health Services staff should complete the eLearning module (titled **Community Based Naloxone Training for Kit Distribution**) found on <a href="www.ahs.ca/naloxone">www.ahs.ca/naloxone</a>, or an equivalent training that is based on the <a href="Community Based Naloxone Program Opioid Poisoning Response">Curriculum Guide for Trainers</a>. AHS staff must complete the "Community Based Naloxone Training for Kit Distribution" course on MyLearningLink. This will take approximately 30 minutes. Other training tools can be found on <a href="www.ahs.ca/naloxone">www.ahs.ca/naloxone</a>.



# 3. What information do I need to collect from someone requesting a naloxone kit?

You do **not** need to collect **any** identifiers (e.g., ID, name, date of birth) to provide someone with a kit. Information the CBN Program needs when distributing kits is data collected in monthly reporting for evaluation of the CBN Program. Questions include: whether this is their first kit or a replacement kit, how many kits they are receiving (if more than one) and what happened to their previous kit, if it is a replacement kit. This information is captured in the <u>Naloxone Kit Distribution Record</u> found at <u>www.ahs.ca/naloxone</u>. This is a tool for you to keep track of the number of kits you distribute, which you can then use to complete the Naloxone Kit Monthly Distribution Report survey. You do not have to collect any identifiers if clients choose to remain anonymous. The Naloxone Kit Distribution Record form can be discarded once data is collected for monthly reporting and/or kept for records for your program. Data will be collected for reporting purposes via the Monthly Distribution Report survey (see Question 4 below).

#### 4. What reporting is required of our site to give out kits to clients?

We require a Naloxone Kit Monthly Distribution survey to be submitted on the 8<sup>th</sup> day of every month. You can find all Naloxone Kit surveys on <a href="www.ahs.ca/naloxone">www.ahs.ca/naloxone</a>. You should designate one person at your site to be responsible for collecting the information necessary for this report and for submitting it on time. It may be helpful to review this report prior to distributing kits to decide how you and your team can best collect this information on a monthly basis. The <a href="Naloxone Kit Distribution Record">Naloxone Kit Distribution Record</a> is a tool you can use to collect this information but is not considered a reporting form and is not collected by our program. You may choose to create your own spreadsheet or form to collect this information in a way that best suits your program as needed.

# 5. What education am I required to provide clients receiving the kits and how long will this take?

Providing an individual with a kit should always be accompanied with appropriate training. Training time can vary depending on the individual's experience and knowledge, but takes approximately 10 minutes on average. Training is not mandatory and can be refused by the individual. There are training videos, documents, checklists and tools that you may use at <a href="https://www.ahs.ca/naloxone">www.ahs.ca/naloxone</a>. Always open a kit and ensure that all contents of the kit are there before handing it out. Note the expiry to ensure it is up to date.

#### 6. Can we give kits to family members or friends of a person who uses drugs?

Yes! CBN kits are available to any member of public who is at risk of poisoning or likely to witness poisoning. Proof of risk is not required to receive a kit. If they are a concerned member of the public and want to have a kit on hand to be able to help someone else, they can have a kit. More information on this can be found at <a href="https://www.drugsafe.ca">www.drugsafe.ca</a>.

# 7. Can our organization use the training resources offered on the CBN Program website to train our staff in administration of naloxone?

The resources found on <a href="www.drugsafe.ca">www.drugsafe.ca</a> and <a href="www.drugsafe.c

### 8. Are we able to use CBN kits if someone experiences poisoning in our workplace?

CBN kits are for distribution to members of the public who are at risk of or likely to witness poisoning in the community. They are not for use by employees in the workplace (e.g., for occupational health and safety or emergency response as a bystander while at work). Alberta Health has funded the kits for distribution to members of the public only at this time. Please follow your workplaces policies around medical emergencies in these situations. This should include calling 911, letting them know you have a naloxone kit, and following the operator's instructions. Nasal spray formulations of naloxone can be purchased for occupational health and safety use, and may be available at no cost to some programs and individuals. However, it is the responsibility of each organization or employer to work within their workplace health and safety policies and legal department advice to determine the criteria for use and appropriateness of use.

#### 9. How can we prevent accidental exposure to fentanyl?

Incidental skin exposure to fentanyl is extremely unlikely to immediately harm you. Fentanyl may appear as a powder, tablet, rock, sticker/blotter, or liquid solution. It is important to do an initial risk assessment. Inhalation and transfer to mucous membranes (eyes, nose, and mouth) are common routes of exposure. Always wear appropriate personal protective equipment (PPE) such as gloves, face mask, respirator, or goggles/visor as needed, if your work could potentially expose you to fentanyl (e.g., a shelter worker picking up discarded belongings in a shelter bathroom). If a scene is visibly high-risk for an exposure (e.g., an illegal drug lab), call 911 immediately and do not enter. If contact occurs, immediately wash the affected area with soap and water to remove the residue. Do not use alcohol based rubs or wipes. Visit What you need to know about fentanyl exposure by Health Canada to learn more. For information on safe needle disposal, see Getting rid of needles safely.

#### 10. What if someone has used their naloxone kit and wants to replace their kit?

Providing a replacement kit to someone who has used their kit to reverse opioid poisoning is acceptable and encouraged. Provide a kit as you normally would, collecting information about their previous kit for the monthly report (as in Questions 3 and 4 of this section), and encourage them to fill out a Naloxone Kit Usage survey (found at <a href="issaed/naloxonekit">issaed/naloxonekit</a> and on

www.ahs.ca/naloxone). You may also choose to fill one out on their behalf with whatever information you are able to obtain through your interaction. This survey does not collect identifiers (can be done anonymously and on behalf of the person who used the kit) and can be completed partially or in whatever capacity you are able to complete them. Information is used to evaluate the CBN Program to ensure we are meeting the needs of Albertans across the province.

# 11. If I have more questions, who may I contact?

For any questions, concerns or support needs, please email <a href="mailto:naloxone.kit@ahs.ca">naloxone.kit@ahs.ca</a>.