Community Based Naloxone Program: Frequently Asked Questions for Pharmacy Staff

Community based naloxone is an evidence-based response to the opioid overdose crisis, as a lifesaving antidote administered by members of the public. Pharmacies began participating in the Community Based Naloxone (CBN) Program (formerly the Take Home Naloxone Program) in January 2016, and their involvement has grown ever since. As of April 2021, approximately 111,282 naloxone kits have been provided by community pharmacies to Albertans since the program was first launched. Approximately 360,462 naloxone kits have been distributed across Alberta by 2,208 community sites.

Pharmacists play an important role in the wellness of patients, friends, and family impacted by substance use and are key partners of the CBN Program. The following frequently asked questions can provide helpful information when distributing naloxone kits and saving lives across Alberta. Further information to guide practice can be found at abpharmacy.ca/naloxone. The Alberta Pharmacists' Association (RxA) provides online training and support for pharmacies and staff interested in being a part of the CBN Program. For more information, visit rxa.ca/pharmacy-practice-support-and-resources/community-based-naloxone-program.

Choose a question below to jump to the answer on the following pages.

- 1. Does the CBN Program require personal identifiers to receive a naloxone kit?
- 2. Can I give someone a naloxone kit if they refuse training?
- 3. Am I responsible for ensuring all pharmacy staff have completed training?
- 4. How do I provide comprehensive training?
- 5. What is important to know about VanishPoint syringes?
- 6. Can I provide a kit to minor or youth?
- 7. Can a pharmacy supply an organization or business with multiple naloxone kits?
- 8. How can someone report that a naloxone kit has been used and why do we collect this information?
- 9. What can I do if a person asks about where to get help for substance use?
- 10. Who do I contact if I have questions about the Community Based Naloxone Program?
- 11. What is harm reduction and how do I find harm reduction services in my community?



1. Does the CBN Program require personal identifiers to receive a naloxone kit?

The CBN Program does not require programs to collect personal identifiers to provide a naloxone kit. Naloxone kits are available free of charge to members of the public at risk of experiencing or likely to witness an opioid poisoning without providing ID, personal health numbers, or proof of need for a kit. Some individuals may feel uncomfortable or be unable to provide personal identifiers. The intent of the CBN Program is to ensure people who need a naloxone kit do not face barriers accessing naloxone. Information on submitting an anonymous claim is found in the Alberta Blue Cross Pharmacy Benefact Number 715 (December 2017).

2. Can I give someone a naloxone kit if they refuse training?

Yes, a naloxone kit can be provided without training. However, every effort should be made to provide training so that the kits can be used effectively and successfully. It is important to offer the full training, but it should not be a barrier to obtaining a naloxone kit, if a person declines training. In these circumstances, consider providing these individuals with written materials. Individuals requesting naloxone kits should always be asked if they have any questions or need a review on use of the kit, regardless of if it is a replacement kit

3. Am I responsible for ensuring all pharmacy staff have completed training?

Pharmacy licensees should ensure that all pharmacy staff who will be interacting with individuals requesting naloxone kits have been fully trained and have a basic understanding of the kits, stigma avoidance, and how a kit may be obtained anonymously. Training for pharmacy staff can be found at the <u>Alberta Pharmacists' Association Community Based Naloxone Program</u> page and additional resources to support training are also available at www.ahs.ca/naloxone.

4. How do I provide comprehensive training?

Training on how to teach individuals to respond to opioid poisoning with a naloxone kit correctly is essential. Training resources can be found at the <u>Alberta Pharmacists'</u>
<u>Association Community Based Naloxone Program</u> page and <u>www.ahs.ca/naloxone</u>. Training should include (but is not limited to):

- how to identify opioid poisoning and the importance of calling 911
- how to check for breathing and provide rescue breaths
- how to assess for need to administer naloxone
- how to prepare the naloxone injection by withdrawing the dose from the vial
- awareness on the safety mechanism in the VanishPoint syringe
- how to landmark on the thigh or deltoid and administer an intramuscular injection
- when to give the second and third vial of naloxone
- the recovery position
- what to tell the person after reversal

- what to do after the reversal (safe disposal of kit, kit replacement, and reporting kit use anonymously)
- proper storage of naloxone (away from direct light and between 15-30°Celsius); also important to note that naloxone that is expired or stored outside the recommended temperature range may still be effective and safe to use if it is the only naloxone available

5. What is important to know about VanishPoint syringes?

VanishPoint syringes are a feature of the naloxone kits. They are safety engineered devices that prevent reuse of needles and, thus, prevent disease transmission and injury. Once the plunger is fully depressed, the needle is retracted into the barrel and the syringe can be safely discarded in a sharps or tamper-proof container. If someone is not familiar with this type of needle, they may accidentally depress the plunger and prematurely activate the safety mechanism. This is an important teaching point that must be discussed when providing someone with a kit.

6. Can I provide a kit to a minor or youth?

An individual under the age of 18 can be assessed, considered a Mature Minor and provide consent without the input of their legal representative. A Mature Minor must be able to understand and appreciate the nature, risks and consequences of a proposed treatment/procedure including its ethical, emotional, and physical aspects. The CBN Program has a Mature Minor Assessment for Naloxone Kit Distribution to help decide if a youth fits the Mature Minor criteria.

7. Can a pharmacy supply an organization or business with multiple naloxone kits? CBN kits are publicly funded for distribution to members of the public at risk of an opioid overdose or likely to witness an opioid overdose. CBN kits are not publicly funded for workplace use at this time. Employers are responsible for the purchase of naloxone for workplace use. Individuals representing groups or organizations requesting naloxone kits from pharmacies for use in the workplace should be referred to the CBN Program at naloxone.kit@ahs.ca for support with finding a solution.

8. How can someone report that a naloxone kit has been used and why do we collect this information?

It is important for the CBN Program to be able to collect information about poisoning response with naloxone kits to evaluate effectiveness of the program. This information is used to improve program efforts and revise the kits as needed. When someone returns to the pharmacy to obtain a replacement kit, please encourage reporting kit use anonymously by sharing the link to the Naloxone Kit Usage Survey or providing a paper copy of the form to complete then input electronically later on. Let them know they can provide any

information they are willing and comfortable to provide and do not have to complete the form in full or provide any personal identifiers. Alternatively, the pharmacy staff can assist with completion of the form and submit it on behalf of the individual. Forms are submitted online. The Naloxone Kit Usage Survey form can be found at <u>is.qd/naloxonekit</u>.

9. What can I do if a person asks about where to get help for substance use?

A complete listing of treatment clinics for opioid dependence in Alberta can be found by visiting www.ahs.ca/odp. For more information, and to find a service that meets a patient's specific needs, the Addiction Helpline is available 24/7 at 1-866-332-2322.

10. Who do I contact if I have questions about the Community Based Naloxone Program?

The Alberta Health Services (AHS) Harm Reduction Services Team (HRST) was created in May 2018 to provide community and organizational support with naloxone kit distribution and a harm reduction approach to care. The team is focused on enhancement of the CBN Program and supporting implementation of harm reduction services across the province in all areas of service delivery. The CBN Program is operated by the HRST. Any questions related to CBN can be sent to naloxone.kit@ahs.ca. Emails are checked frequently and forwarded to the most appropriate team member, usually a zone lead, who will be able to provide individualized support to pharmacy staff.

11. What is harm reduction and how do I find harm reduction services in my community? Harm reduction refers to policies, programs, and practices that aim to promote safety and reduce harms associated with the use of psychoactive substances without necessarily reducing the substance use itself. It is an evidence-based, ethical, and compassionate public health response to substance use. Harm reduction services such as needle distribution, supervised consumption services, and naloxone programs benefit individuals who use substances, their family and the community they live in. If you are interested in providing further harm reduction services, learning more about your local resources, or have any questions about any other harm reduction issue, you can contact the HRST at harm.reduction@ahs.ca or visit mww.ahs.ca/harmreduction. The informAlberta.ca Directories may also be helpful. The Harm Reduction Directories that list low barrier and low cost resources that accept people who use substances or provide harm reduction services can be found below by AHS Zone:

- Alberta Wide
- North Zone
- Edmonton Zone
- Central Zone
- Calgary Zone
- South Zone