Frequently asked questions

Distribution of community based naloxone kits

This document provides guidance on distribution of community based naloxone kits by Alberta Health Services (AHS), Recovery Alberta and former AHS organization staff to the public.

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

- 1. What is naloxone?
- 2. What is a community based naloxone kit?
- 3. Is there a policy for community based naloxone kit distribution at AHS?
- 4. What is the difference between community based naloxone kit distribution and naloxone administration?
- 5. Should my program/setting be distributing community based naloxone kits?
- 6. Who can distribute community based naloxone kits?
- 7. How does my program/setting procure community based naloxone kits?
- 8. <u>Do I have to document in the patient health record when I provide someone with a community based naloxone kit?</u>
- 9. <u>Do I have to report distribution of community based naloxone kits to the Community</u> Based Naloxone Program?
- 10. <u>Can I provide community based naloxone kits to people who are not patients of my program/setting?</u>
- 11. How do I get trained to distribute community based naloxone kits?
- 12. What education should I provide to people receiving community based naloxone kits?
- 13. What is important to know about VanishPoint® syringes?
- 14. Can I provide a community based naloxone kit to a minor or youth?
- 15. <u>Can I use a community based naloxone kit to respond to suspected opioid poisoning</u> while working?
- 16. How should we store community based naloxone kits?
- 17. What should I do with expired community based naloxone kits?
- 18. Who can I contact if I have more questions?



1. What is naloxone?

Naloxone is a fast-acting medication, classified as an opioid antagonist, used to temporarily reverse the effects of opioid poisoning, including symptoms of respiratory and/or central nervous system depression. Naloxone will displace opioids and bind to the same receptors that opioids bind to in the brain and nervous system. Naloxone will only act on opioid receptors and will have no effect or ability to reverse poisoning from drugs that are not opioids (e.g., stimulants, benzodiazepines, psychedelics).

Naloxone by itself is not harmful, but for individuals who have opioid dependence, naloxone may cause withdrawal symptoms, which include pain, muscle aches, agitation, anxiety, nausea/vomiting, diarrhea, runny nose and watery eyes, dilated pupils and chills. Withdrawal can be extremely uncomfortable and painful. It is important to wait 2 to 3 minutes between doses of naloxone and provide rescue breathing in between doses to minimize risk of precipitating withdrawal.

If a person is experiencing suspected poisoning from polysubstance use (multiple drugs), naloxone may help with reversing opioid effects, if opioids were taken. This may present new signs of poisoning from other psychoactive substances once the opioid effects are reversed. Emergency support should be engaged when responding with naloxone as individuals must be monitored closely and observed closely for changes in their condition.

2. What is a community based naloxone kit?

A community based naloxone kit's a small portable kit containing materials that can be used to respond to opioid poisoning in the community. Other programs and regions may refer to it as a take home naloxone kit, overdose response kit or simply a naloxone kit. Each kit contains:

- 3 vials of naloxone (each vial is 1 dose)
- 3 safety syringes
- 3 alcohol pads
- 1 pair of rubber gloves
- 1 barrier mask (for rescue breathing)
- An information pamphlet explaining how to respond to opioid poisoning with naloxone
- 3. Is there a policy for community based naloxone kit distribution at AHS? The Distribution of Community Based Naloxone Kits Policy provides guidance on distribution of community based naloxone kits without an authorized prescriber's order in order to prevent opioid poisoning, it outlines education and training requirements for distribution of community based naloxone kits.



- 4. What is the difference between community based naloxone kit distribution and naloxone administration? Community based naloxone kit distribution is the provision of naloxone kits to the public for personal use. This includes patients or people at risk and their families and friends. The intent is for the kits to be used in case of suspected opioid poisoning in the community. Naloxone administration is the response to suspected opioid poisoning with
 - for personal use. This includes patients or people at risk and their families and friends. The intent is for the kits to be used in case of suspected opioid poisoning in the community. Naloxone administration is the response to suspected opioid poisoning with naloxone. It is activating a call for emergency support, opening the individual's airway and providing rescue breaths as needed, and administering naloxone medication via either intramuscular injection or intranasal spray.
- 5. Should my program/setting be distributing community based naloxone kits?

 Many people are impacted by substance use and may be at risk of opioid poisoning.

 Alberta is experiencing a toxic drug crisis that has seen thousands of people die from illegal drugs contaminated strong opioids and other toxic substances. All AHS programs/settings are encouraged to assess the risks and needs of the patients and families they serve to determine whether it is appropriate to distribute community based naloxone kits. AHS programs or settings that wish to distribute community based kits should establish a process with appropriate leadership approvals and review the resources on the Community Based Naloxone Program website at ahs.ca/naloxone.
- **6.** Who can distribute community based naloxone kits?

 Any staff who have been given approval and completed training to distribute community based naloxone kits may provide kits as part of their work duties. An authorized prescriber's order is not required to distribute a kit.
- 7. How does my program/setting procure community based naloxone kits?

 Program/settings will need to register with the Community Based Naloxone (CBN)

 Program by visiting ahs.ca/naloxone and following the steps in the Community Based

 Naloxone Program Guide Distribution Site Manual and completing the Community Based

 Naloxone Partner Registration. Once registered, sites that procure medications from AHS Pharmacy Services may order community based naloxone kits from AHS Pharmacy Services will need to order kits through the Community Based Naloxone Kit Order Request.
- 8. Do I have to document in the patient health record when I provide someone with a community based naloxone kit?

 Follow your site-specific process for documentation. If appropriate, document distribution of community based naloxone kits in the patient health record. This may



include number of kits provided, education provided, and where applicable, additional assessments/interventions for other needs and referrals initiated. Non-patients may receive kits and documentation is not required in this circumstance, except to record the numbers of kits distributed as per the Community Based Naloxone Program reporting requirement. Sites that receive community based naloxone kits from AHS Pharmacy Services will not need to track distribution numbers for reporting.

- **9.** Do I have to report distribution of community based naloxone kits to the Community Based Naloxone Program?
 - Programs registered with the Community Based Naloxone Program are expected to complete a monthly report that tracks numbers of community based naloxone kits distributed and reversals reported using community based naloxone kits. This assists in quality assurance of the program. AHS and former-AHS programs/settings that receive community based naloxone kits from AHS Pharmacy Services are exempt from this reporting requirement as reporting is done by AHS Pharmacy Services. For additional questions or support with reporting, please contact the CBN Program at naloxone.kit@ahs.ca.
- **10.** Can I provide community based naloxone kits to people who are not patients of my program/setting?
 - Members of the public who are not patients may receive a community based naloxone kit if they request one or it is evident that they are likely to experience or witness opioid poisoning. They do not need to be registered as a patient and provision does not need to be documented. This is part of the AHS commitment to reduce barriers to accessing kits and to prevent opioid poisoning related deaths.
- 11. How do I get trained to distribute community based naloxone kits? All staff who will be distributing community based naloxone kits shall complete the required elearning module available on MyLearningLink ("Community Based Naloxone Trainin for Kit Distribution"). Staff should regularly assess their competency and comfort level to provide training on poisoning prevention, recognition and response training. If further support and education is required, please speak with your clinical educator or manager. Your program/setting may also arrange group training for staff. Training should include prevention of opioid poisoning, recognition of signs of opioid poisoning, activation of emergency response or calling 911, rescue breathing and CPR (as required), preparation and administration of naloxone dose, evaluation of effects of administration, follow up care for the patient and responder, and storage of naloxone. Additional resources to support your learning can be found at ahs.ca/naloxone.



12. What education should I provide to people receiving community based naloxone kits?

Offering and providing education on opioid poisoning response with a community based naloxone kit is essential. People may refuse this education and that is also okay. They may still receive a kit without training and may visit the Community Based Naloxone Program website at ahs.ca/naloxone for training resources they can review on their own. Education provided 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 the need to administer naloxone
- How to prepare the naloxone injection
- Awareness of the safety mechanism in the VanishPoint® syringe
- How to landmark on the thigh or deltoid and administer an intramuscular injection
- When to give additional doses of naloxone
- How and when to put someone in the recovery position
- What to tell the person after opioid poisoning reversal
- What to do after the opioid poisoning reversal, including safe disposal of the naloxone kit and kit replacement
- Proper storage of naloxone
- 13. What is important to know about VanishPoint® syringes?

VanishPoint® syringes are the safety-engineered syringes found in community based naloxone kits. They prevent the reuse of needles and needlestick injury, thus, preventing 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 tamperproof 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.

14. Can I provide a community based naloxone kit to a minor or youth? An individual under the age of 18 can be assessed and considered a 'mature minor,' and can 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 Community Based Naloxone Program has a Mature Minor Assessment for Naloxone Kit <u>Distribution</u> to help decide if a youth fits the mature minor criteria.



15. Can I use a community based naloxone kit to respond to suspected opioid poisoning while working?

Community based naloxone kits are intended for use by members of the public. Staff who encounter suspected opioid poisoning at work are expected to use naloxone procured for emergency response and not the black community based naloxone kits. Naloxone for the workplace is procured vials or as red naloxone kits. However, should staff encounter someone experiencing suspected opioid poisoning with only a community based naloxone kit readily available to respond, this kit may be used to avoid a delay in emergency response. The Naloxone Administration Policy Suite provides direction for the administration of naloxone for suspected opioid poisoning without an authorized prescriber's order within AHS workplace settings. The policy suite removes barriers for staff to respond to a suspected opioid poisoning and prevent death or further harm. The first response process should be engaged and care transferred to the responding team or persons.

16. How should we store community based naloxone kits?

Naloxone should be stored away from light and between 15 to 30° Celsius. It has been known to freeze in extreme cold. Naloxone can remain stable after being frozen and thawed, as well as during extreme heat cycles, however, it is always best to store the medication as recommended for optimal efficacy. Vials can be removed from the kit and kept close to the body (in clothing pockets) for those who carry community based naloxone kits outdoors for long periods of time in the winter. Avoid storing kits in backpacks or cars in extreme weather. Replace kits immediately when you know they have been out of the appropriate temperature range. However, naloxone that has been stored outside the recommended temperature range may still have some effectiveness so it can be used if there is no other naloxone available. See Injectable Naloxone Storage Recommendations for more information.

- 17. What should I do with expired community based naloxone kits? Naloxone expiries should be checked regularly as part of the Workplace Health and Safety assessments. Expired community based naloxone kits can often be repurposed. Here are your options for handling expired kit items:
 - Discard items: naloxone spray and vials can be returned to a pharmacy or disposed of in a sharps container with syringes, while the rest of the kit can be disposed of in regular waste bins.
 - Reuse items: entire kits can be reused for training purposes, or separate components can be used for training or as back up supplies (if not used). Training kits should always be labelled clearly so that they are not mistakenly used for emergencies (e.g., "EXPIRED - FOR TRAINING ONLY")



Do not dispose of expired kits doses until replacements have been received as expired naloxone may still be effective to use if there is no other naloxone available. For more information, see **Expired Naloxone Kits**.

18. Who can I contact if I have more questions?

For practice questions, contact the AHS HPSP <u>Professional Practice Consultation</u> <u>Service</u> by emailing <u>practice.consultation@ahs.ca</u>.

For more information about naloxone, contact AHS Harm Reduction Services at harm.reduction@ahs.ca.

