



STATE OF WASHINGTON  
DEPARTMENT OF SOCIAL AND HEALTH SERVICES  
Home and Community Living Administration  
P.O. Box 45600 • Olympia, Washington 98504

September 16, 2025  
Amended January 29, 2026

HCLA: NH #2025-043

**REQUIREMENTS FOR NURSING HOMES KEEPING NALOXONE (NARCAN) IN STOCK**

Dear Nursing Home Administrator:

**This Dear Provider Letter (DPL) supersedes DPL NH: #2019-009.**

Residential Care Services (RCS) wants to remind facility providers of the importance of resident/client safety and having **naloxone** (a medication that rapidly reverses an opioid overdose) in long-term care facilities, including for those who are prescribed painkillers.

In 2019, the Department of Health (DOH) issued a **statewide standing order** in accordance with [RCW 69.41.095\(5\)](#), which authorized the use of naloxone **to any eligible person or entity**. This standing order was [updated on April 22, 2024](#). As a result, long-term care programs have participated in the naloxone standing order program and are administered to residents when appropriate.

RCS strongly recommends keeping naloxone in the facility in an event of an emergency for when an opioid is prescribed or based on the history of the resident. A facility and its providers *are required to meet the needs of all of its residents, including in emergency situations*. If the facility seeks to use the statewide standing order and purchase naloxone:

- Naloxone can be administered by anyone.
- Naloxone can be stored on the premises of a facility, home, or provider office.
- Facilities must have written policies and procedures on the proper response to an opioid-related overdose and administering naloxone.
- Written instructions are available at: [www.doh.wa.gov/naloxoneinstructions](http://www.doh.wa.gov/naloxoneinstructions).
- Facility staff must follow the informed consent process by ensuring staff members honor a resident/client's wish not to take certain medications.
- Staff members are shielded from civil or criminal liability if they act in good faith when administering this drug.
- **While some forms of naloxone are over the counter, entities may use the statewide standing order to receive and dispense prescription naloxone, as needed. If there are questions about the standing order or about naloxone distribution, email DOH at [naloxoneprogram@doh.wa.gov](mailto:naloxoneprogram@doh.wa.gov).**
- If a resident has a specific order for naloxone, the facility must follow the specific facility entity regulations regarding medications. Nursing home requirements for naloxone's use and availability depend on the resident population, medications prescribed, comprehensive care plans, emergency preparedness and facility assessment.

The following federal regulations are some examples of how naloxone is required to have in nursing homes:

**Federal requirements related to the use of naloxone:**  
**F689 – Accident Hazards**

ALTSA Provider Letter: **IMPLEMENTATION OF SENATE BILL (SB) 5672: HOME CARE AIDE CERTIFICATION REQUIREMENTS AND EXTENSION OF DEADLINES**

January 29, 2026

Page 2

- Facility staff should be prepared to address emergencies related to substance use by providing increase monitoring, maintaining and having knowledge of administering opioid reversal agents like naloxone...

**F697 – Pain Management**

- The facility must ensure that residents receive the treatment and care in accordance with professional standards of practice, the comprehensive care plan, and the resident's choices, related to pain management.

**F740 – Behavioral Health Services**

- Ensuring that the necessary care and services are person-centered and reflect the resident's goals for care, while maximizing the resident's dignity, autonomy, privacy, socialization, independence, choice, and safety;
- The behavioral health care needs of those with a SUD or other serious mental disorder should be part of the facility assessment under §483.71 (F838) and the facility should determine if they have the capacity, services, and staff skills to meet the requirements as discussed in F741.

**F741 – Sufficient/Competent Staff – Behavioral Health Needs**

- The intent of this requirement is to ensure that the facility has sufficient staff members who possess the basic competencies and skills sets to meet the behavioral health needs of residents for whom the facility has assessed and developed care plans.
- The facility must consider the acuity of the population and its assessment in accordance with §483.71. This includes residents with mental disorders, psychosocial disorders, or substance use disorders (SUDs), and those with a history of trauma and/or post-traumatic stress disorder (PTSD), as reflected in the facility assessment F755.

Thank you for your continued commitment to resident health and safety. If you have any questions, please contact your local Field Manager with Residential Care Services or the RCS Policy Unit at [RCSpolicy@dshs.wa.gov](mailto:RCSpolicy@dshs.wa.gov).

Sincerely,



Amy Abbott, Director  
Residential Care Services

DSHS: *"Partnering with People"*

**Attachments:**

- SAMHSA Opioid Overdose Prevention Toolkit: Information for Prescribers at <https://library.samhsa.gov/sites/default/files/overdose-prevention-response-kit-pep23-03-00-001.pdf>.