

Administrative Policy No. 09.19

Subject: Administering Opioid Overdose Medication

Information Contact: DSHS Chief Risk Officer
360-902-7794

Authorizing Source: [RCW 69.41.095](#)
[RCW 69.50.315](#)

Effective Date: May 21, 2019

Approved By: **ORIGINAL SIGNED BY MARK ELIASON**
Senior Director, Policy and External Relations

Purpose

To establish requirements governing the administration of opioid overdose medication by trained employees within DSHS. The objective is to treat and reduce deaths due to opioid-related overdoses.

Scope

This policy applies to all DSHS employees. Once a DSHS employee is trained, he or she may voluntarily administer Naloxone during work hours and on worksite premises when an individual is in need of medical attention for suspected overdose of opioids. All employees must follow the procedures below when administering an overdose medication.

Definitions

Agency coordinator – Means a person who has been designated to provide guidance and supervision for trained employees who are equipped with Naloxone; to oversee training and services coordination; and to oversee quality assurance and reporting.

Building POC – Means the building point of contact is an administrator or appointed individual of the lead DSHS administration in the building responsible for maintaining medication and ensuring proper reporting procedure.

Medical director – Means a physician who is responsible for oversight of an opioid antagonist administration program, including providing for or ensuring the medical control of trained first

responders; development, implementation, and evaluation of medical protocols; oversight of quality assurance activities; and compliance with the pharmacy quality assurance commission.

Opioid – Means containing or derived from opium, including heroin, morphine, fentanyl, oxycodone, hydrocodone, or compounds with similar physiological impacts or chemical properties.

Protocols – Mean written or electronically recorded instructions, prepared by a prescriber, for distribution and administration of a drug by designated and trained staff or volunteers of an organization or entity, as well as other actions and interventions to be used upon the occurrence of clearly defined clinical events in order to improve patients' timely access to treatment

Policy

The possession and administration of Naloxone is designated through the agency's medical director. All employees approved to administer opioid overdose medication must receive the required training.

Procedure

1. Upon notice of an overdose event call, or have another call, 911 for emergency personnel support.
2. Remove kit from secured location and check to ensure that it has not expired.
3. Locate trained volunteer willing and available to assist, only trained volunteer employees should administer Naloxone.
4. Locate individual in need of assistance within or adjacent to work location.
5. Conduct patient assessment and, if appropriate, administer medication per manufacturer's instructions.
6. Step back from patient after administering dose.
7. Remain with individual until emergency personnel arrive.
8. Keep device for records and contact DSHS enterprise risk management office (ERMO) safety office for proper coordination and disposal through DSHS medical director.

Training

1. All volunteer DSHS employees must receive initial training that includes at a minimum:
 - a. An overview of RCW 69.50.315 and RCW 69.41.095, the state laws that permit an authorized person to use opioid overdose medication to assist another person at risk of experiencing an opioid-related overdose;

- b. Patient assessment, including signs and symptoms of opioid-related overdose;
 - c. Universal precautions;
 - d. Rescue breathing;
 - e. Seeking medical assistance;
 - f. Administration of the medication;
 - g. The potential side effects of the medication;
 - h. Use of Naloxone on pediatric patients;
 - i. Building safety committees will ensure documentation, storage of and proper disposal of expired medication; and
 - j. When you can and when you should not administer the medication in the work area.
2. All employees issued opioid overdose medication must receive annual training and be approved by a supervisor.
3. Upon successful completion of training, the DSHS medical director will prescribe Naloxone or similar medication to the facility and write standing orders for authorized employees to be able to get approved medication for their office or facility.
4. The DSHS medical director will identify an individual to be the agency coordinator for the opioid overdose medication administration program. Responsibilities include:
 - a. Facilitate user training for employees.
 - b. Maintaining training records for personnel by using the agency learning management system.
 - c. Ensure the supply, integrity, and expiration dates of the Naloxone kits.

Maintenance and replacement

1. Medication kits must be kept and used in a manner consistent with proper storage guidelines for temperature and sunlight exposure per manufacturer instructions.
2. Building point of contact (POC) is responsible for ensuring used, lost, damaged, or expired medication is reported and replaced through standard procedure.
3. Expired Naloxone must be properly disposed of according to protocols established by the agency medical director.

Documentation

1. The DSHS employees will submit an incident response report through standard procedure detailing the following:
 - a. The nature of the incident;
 - b. The care the patient received; and
 - c. The fact that Naloxone was administered.

2. The building POC will ensure the incident response report details the following:
 - a. Who administered the Naloxone;
 - b. The nature of the incident;
 - c. The care the patient received; and
 - d. The fact that Naloxone was administered.

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