

# **Practice Update**

Date:	February 8, 2017
To:	All Staff
From:	Angela De Smit: Chief Operating Officer, North East and Executive Lead, Professional Practice Dr Sandra Allison, Chief Medical Health Officer
Re:	Practice Support for Opioid Overdose Response

# **Public Health Emergency**

- There were 914 deaths due to opioid overdose in the province of BC in 2016. There is no question that these tragic deaths have had an impact at many levels within our communities.
- Northern Health overdose prevention information: <u>Overdose Prevention</u>

#### Fentanyl

- Fentanyl is a strong synthetic opioid found in a variety of illicit substances. The use of illicit fentanyl and fentanyl analogues with unknown degrees of potency is largely responsible for the sudden increase in deaths around BC.
- For more information on fentanyl and its analogues visit: Overdose Prevention

#### Take Home Naloxone Kits

- Naloxone is an effective antidote to opioids; it works by reversing the effects of opioid overdose.
- The Take Home Naloxone (THN) program provides kits free of charge to clients at risk.
- The THN program is in most communities. For a full list of sites see <u>Take Home Naloxone Sites</u>.

#### **Summary of Key Points**

- Northern Health now supports all staff to administer naloxone and first aid in cases of suspected opioid overdose.
- For both dispensing and administration of naloxone, it is important to discuss your role in carrying out these activities with your program manager/ direct supervisor.
- All staff carrying, administering, or dispensing naloxone must complete the appropriate education (see below). The average time to complete the <u>Learning Hub</u> education is one hour.
- When any NH employed staff choose to administer naloxone and first aid, whether during working or non-working hours, potential liability concerns are covered by either NH liability insurance or the Good Samaritan Act.
- An order is required to administer naloxone to an inpatient in an inpatient area of a hospital. Anticipatory
  (prn) orders should be obtained for naloxone for all inpatients who are prescribed an opioid or are at risk
  of an opioid overdose.
- Staff who respond to a suspected opioid overdose outside of a hospital must call 911 and initiate rescue breathing.
- Staff who discover a suspected opioid overdose in a hospital setting must activate the usual emergency
  response and initiate rescue breathing.

# Scope of Practice: Nursing

# Administration:

- RNs, RPNs and LPNs may administer naloxone, without an order, for the purpose of treating suspected opioid overdose:
  - outside of a hospital setting
  - for persons anywhere on hospital property who are not inpatients, and
  - o for inpatients who are not at the time in an inpatient area of the hospital.
- The RN, RPN or LPN must follow this Clinical Practice Standard: <u>Naloxone Administration in the</u> <u>Management of Suspected Opioid Overdose</u> and complete the <u>Learning Hub module</u>: Naloxone Administration

#### An order is still required for naloxone administration for inpatients in inpatient areas.

#### Dispensing:

- RNs and RPNs may dispense a Take Home Naloxone kit without an order from NH sites or programs (including hospital sites) to clients at risk of an opioid overdose or to family and friends of those who are at risk for overdose.
- LPNs may dispense a Take Home Naloxone kit without an order from NH sites or programs outside of a hospital to clients at risk of an opioid overdose or to family and friends of those who are at risk for overdose. An LPN requires an order from a physician to dispense a kit from a hospital setting.
- All nurses must follow this Clinical Practice Standard: <u>Dispensing and distribution for persons at risk of</u> opioid overdose: Take Home Naloxone Kits
- All nurses who dispense the kits must also complete the <u>Learning Hub module</u>: Distributing and Dispensing Take Home Naloxone Kits.

All nursing regulatory colleges support the administration and dispensing of naloxone. Please see your college's website for further information.

# Scope of Practice: Allied Health Professionals, Unregulated Care Providers and Support Services Staff:

(Occupational Therapy, Physiotherapy, Social Work, Dietitians, and unregulated care providers (e.g. recreation therapy, life skills and community home support workers and support services staff)

#### Administration:

- Recently the provincial government announced a change to the Health Professions Act (HPA) that allows any health care professionals, to assess and treat suspected opioid overdose with naloxone and first aid: <u>Health Professions Act</u>
- The settings in which naloxone administration may occur include:
  - outside of a hospital setting
  - $\circ$  for persons anywhere on hospital property who are not inpatients, and
  - $\circ$  for inpatients who are not at the time in an inpatient area of the hospital
- The Colleges of OTs, PTs and SWs have recognized the changes to the HPA and have announced their
  intention to support registrants to administer naloxone for opioid overdose. In order to administer
  naloxone, registrants are responsible for acquiring the necessary training, adhere to clinical practice
  standards, and maintain current knowledge of policies, legislation, programs and issues related to this
  competency.

- Unregulated care providers or support services staff whose work may involve an encounter with a person at risk of opioid overdose should be trained and prepared to use naloxone in response to a suspected opioid overdose.
- Northern Health supports all allied health professionals, unregulated care providers and support services staff to consider their need to take this competency training in order to reduce the risk of death as a result of an opioid overdose. Staff must follow the Clinical Practice Standard: <u>Naloxone Administration in</u> the Management of Suspected Opioid Overdose
- and complete the <u>Learning Hub module</u>: Administration of Naloxone

# Dispensing and/or Distributing:

- At this time, NH will support the distribution of Naloxone Kits by social workers who have the appropriate training and competencies: <u>Learning Hub module</u>: <u>Dispensing and Distribution of Take Home Naloxone</u> <u>Kits.</u>
- Social Workers who distribute Take Home Naloxone Kits must follow this Clinical Practice Standard: <u>Dispensing and Distribution for Persons at Risk of Opioid Overdose: Take Home Naloxone Kits</u>
- All other allied health professionals or unregulated care providers should refer at risk clients to a <u>Take</u> <u>Home Naloxone Site</u>.

Professional colleges are in the process of developing statements to support this regulatory change. Please contact your college with specific questions about their current position.

# For more information, please contact:

Clinical and Take Home Naloxone Program Questions: <u>Reanne.Sanford@northernhealth.ca</u>

Scope of Practice and Professional Standards: <u>ProfessionalPractice@northernhealth.ca</u>