# NALOXONE POLICY

# 404.1 PURPOSE AND SCOPE

Sheriff's Office personnel are occasionally the first responders to a person who is experiencing or suspected of experiencing an opioid-related overdose. The purpose of this policy is to establish procedures to govern an "Overdose Prevention Program" through the deployment of Naloxone by Shasta County Sheriff's Office personnel. The objective is to reduce injuries and fatalities resulting from opioid overdoses, in the instances where emergency medical personnel have not yet arrived.

The initial phase of the "Overdose Prevention (Naloxone) Program" will be a trial phase of sixmonths. At the end of this trial phase, the program's effectiveness will be evaluated by personnel from the Shasta County Public Health and the Shasta County Sheriff's Office (to include union representation).

## 404.2 POLICY

It is the policy of the Shasta County Sheriff's Office that Deputies shall be trained to administer Naloxone in accordance with mandated training guidelines as determined and established by the Shasta County Public Health pursuant to Health & Safety Code 1797.197 and California Civil Code 1714.22.

(a) Deputies who are trained in accordance with mandated training guidelines shall deploy with Naloxone kits in the field. However, the Deputy will retain the discretion to administer or not administer Naloxone to persons experiencing or suspected of experiencing opioid-related overdoses. There is no legal obligation to administer Naloxone.

(b) Deputies who administer Naloxone, are protected from civil and criminal liability if they "act with reasonable care" and "in good faith". This is accomplished by administering Naloxone according to established training protocol.

(c) If a Deputy has a valid reason for not participating in the program, such as religious objections, the Deputy will be excused with the approval of his/her Division Commander.

## 404.3 PROGRAM COODINATOR

The Patrol Captain will serve as the Department's Program Coordinator and will work in collaboration with the SPHD. The Program Coordinator will designate Program Managers at each participating patrol location to provide support to the Program Coordinator. The Program Managers will be responsible for tracking, storage, maintenance, replacement of Naloxone kits, and reporting to the Program Coordinator.

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#### 404.4 TRAINING

#### 404.4.1 INITIAL TRAINING

Deputies may not administer Naloxone without the completion of mandated training by SPHD. All Deputies at participating patrol locations will receive initial training that will include, at a minimum, an overview of California Civil Code 1714.22, patient assessment (signs/symptomology of overdose), universal precautions, rescue breathing, seeking medical attention, and the use of intra-nasal Naloxone. Upon completion of training, Deputies will have their training recorded with the Program Coordinator.

#### 404.4.2 CONTINUING TRAINING

Deputies will receive refresher training as deemed appropriate by SPHD

#### 404.5 NALOXONE DEPLOYMENT

The Shasta County Sheriff's Office will deploy Naloxone kits in patrol locations and other areas as deemed appropriate by the Sheriff or the Sheriff's designee.

#### 404.6 NALOXONE KITS

Naloxone kits will include at a minimum: gloves, mask, eye protection, atomizer, and Naloxone. Deputies at participating patrol locations shall check out a Naloxone kit and deploy with the kit during their tour of duty. If no kits are available, the Deputy must notify his/her supervisor.

#### 404.6.1 NALOXONE STORAGE

Naloxone kits must be returned to the sub-station or administrator at the end of shift and will not be kept in patrol vehicles for extended periods of time.

#### 404.7 NALOXONE USE

Deputies who have completed mandated Naloxone training by SPHD are authorized to administer Naloxone when they reasonably believe someone is experiencing an opioid-related overdose.

Personnel will treat the incident as a medical emergency and shall follow these steps when performing this intervention:

- (a) Confirm emergency personnel are responding;
- (b) Maintain universal precautions;
- (c) Perform patient assessment;
- (d) Determine unresponsiveness;
- (e) Update dispatch of potential overdose state;
- (f) Follow Naloxone use protocol;

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(g) Immediately notify responding emergency medical personnel that Naloxone has been administered; and

(h) Notify the patrol Sergeant.

#### 404.8 DOCUMENTATION / NALOXNE REPORTS

Upon completion of the incident, Deputies will submit an Information Report detailing the nature of the incident, the care the patient received and the fact Naloxone was deployed.

#### 404.8.1 REPORTING RESPONSIBILITY

The area patrol sergeant will be responsible to ensure the Information Report is completed and submitted to the local Program Manager in a timely manner. The local Program Manager will ensure the Information Report is forwarded to the Program Coordinator.

#### 404.9 MAINTENANCE AND REPLACEMENT

The daily inspection of Naloxone kits will be the responsibility of Deputies who are assigned the kit for field deployment. The maintenance and replacement of Naloxone kits will be the responsibility of the Program Manager (or their designee) assigned to each patrol location where the kits are used. Used, lost, or damaged Naloxone kits will be reported to the immediate supervisor and returned to the local Program Manager for replacement.