

# NALOXONE GUIDANCE FOR RESIDENTIAL CHILD-CARING FACILITIES

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## What is Naloxone?

Naloxone is an antidote to opioid overdose. It is an opioid antagonist that is used to reverse the effects of opioids.

## Who can administer Naloxone?

Under the Good Samaritan law, any person in North Carolina can access, carry, and administer naloxone to reverse the effects of an opioid/opiate overdose. North Carolina's Good Samaritan law provides immunity from civil and criminal liability for people who administer or dispense naloxone when certain criteria are met. However, any staff at residential child-caring facilities should complete training prior to administering naloxone.

## What training is needed to be able to administer Naloxone?

All staff at residential child caring facilities should participate in training and education regarding the detection of and appropriate responses to an opioid overdose. All staff should familiarize themselves with the [SAMHSA Opioid Overdose Prevention Toolkit](#). This includes the recognition of opioid overdose symptoms, proper techniques for the administration of naloxone, and essential follow-up procedures.

The following websites offer training at no cost:

<https://www.getnaloxonenow.org/#home>

<https://www.redcross.org/take-a-class/opioidoverdose>

All staff should complete training from one of the two above-listed websites. Residential child caring facilities should maintain documentation of completion of training in personnel files.

## How can Naloxone be obtained?

In North Carolina there are several ways to obtain naloxone:

- [North Carolina Health Departments that Offer Naloxone | Naloxone Saves](#)
- [North Carolina Pharmacies that Offer Naloxone](#)
- [Naloxone Available through Syringe Exchange Programs | Naloxone Saves](#)
- Or a prescription from a medical care provider

## How should Naloxone be stored?

Store naloxone in a safe and quickly accessible location. Keep naloxone in a safe place where children and pets cannot reach it (i.e., office). It is important to store Naloxone at room temperature (59-77) and protect it from direct light. All staff at residential child caring facilities should know where the naloxone supplies are stored and how to access the supplies quickly.

*Similar to other life-saving supplies such as CPR masks and First Aid kits, Narcan should be stored in a secure area with relatively quick access by all staff.*

### **Can expired naloxone be used?**

If it is the only thing available, yes. Like most medications, the efficacy of naloxone may begin to decline past the expiration date and should be replaced. Naloxone supplies should be restocked within 3 days of expiration or deployment. Residential child caring facilities should keep a log of naloxone supplies that includes the following: date of receipt, expiration date, and disposal date.

### **When should 911 be called?**

An opioid overdose needs immediate medical attention. Evaluate the person for signs of an opioid overdose and administer naloxone. Contact 911 immediately.

### **The Five Steps for First Responders:**

#### **1. Evaluate for Signs of Opioid Overdose**

- The face is extremely pale and/or clammy to the touch.
- The body is limp.
- Fingernails or lips have a blue or purple cast.
- The person is vomiting or making gurgling noises.
- The person cannot be awakened from sleep or cannot speak.
- Breathing is very slow or stopped.
- The heartbeat is very slow or stopped.

#### **2. If an Opioid Overdose is Suspected**

- Call the person's name.
- Vigorously grind knuckles into the sternum (breastbone in middle of chest) or rub knuckles on the person's upper lip.
- If the person responds, assess whether he or she can maintain responsiveness and breathing.
- Continue to monitor the person, including breathing and alertness, and try to keep the person awake and alert.
- If the person does not respond, call 911, provide rescue breathing if person is not breathing on their own, and administer one dose of Naloxone.

#### **3. Administer Naloxone**

##### **a. Through the nose (intranasal)**

- Remove the nasal spray from the box. Peel back the tab with the circle to open it.
- Do not prime or test the nasal spray. It contains a single dose of naloxone and cannot be reused.
- Hold the nasal spray with your thumb on the bottom of the plunger and your first and middle fingers on either side of the nozzle.
- Lay the person on their back. Support the person's neck with your hand and allow the head to tilt back before giving the medicine.

- Gently insert the tip of the nozzle into one nostril of the person, until your fingers on either side of the nozzle are against the bottom of the patient's nose.
- Press the plunger firmly to give the dose. Remove the nasal spray from the person's nostril after giving the dose.
- Move the person to their side (recovery position) after giving the medicine.
- Watch the person closely. You may also give additional doses to the person every 2 to 3 minutes until the person responds or emergency medical assistance arrives.

**b. By injection (intramuscular)**

- Remove the safety guard.
- Inject the medicine into the outer thighs, through the clothing, if needed.
- Watch the person closely. Give a new naloxone injection every 2 to 3 minutes of symptoms return.

**4. Support the Person's Breathing**

- Provide ventilatory support.
  - Ensure the airway is clear.
  - Place one hand on the person's chin, tilt the head back, and pinch the nose closed.
  - Place your mouth over the person's mouth to make a seal and give two slow breaths.
  - Watch for the person's chest to rise (not the stomach)
  - Follow up with one breath every 5 seconds.
- Chest compressions
  - Place the person on his or her back.
  - Press hard and fast on the center of the chest.
  - Keep your arms extended.

**5. Monitor the Person's Response**

- Continue resuscitation while waiting for Naloxone to take effect.
- Most people respond by returning to spontaneous breathing within 2-3 minutes of Naloxone administration.
- It is essential to get the person to the emergency department because Naloxone has a relatively short duration of effect and overdose symptoms may return.
- A person should be monitored for at least 4 hours from the last dose of Naloxone.

**What happens after Naloxone is administered?**

After 911 has been contacted and the child has received necessary medical care, the child's parent or guardian shall be notified as soon as possible of the incident, but no later than within 24 hours. Although the category of "overdose" is not listed in 10A NCAC 70I .0614 for Critical Incident Reporting, the residential child care facility shall complete a Critical Incident Report [DSS-5281 \(CIR\)](#) and submit it to their assigned NCDSS Program Consultant, copying [Sandra.craig@dhhs.nc.gov](mailto:Sandra.craig@dhhs.nc.gov) within 72 hours of the incident per Critical Incident Reporting guidelines.

**What are some additional resources?**

[How to Respond to an Opioid Overdose | HHS.gov](#)

[Preventing, Recognizing, and Treating Opioid Overdose | SAMHSA](#)

[Syringe and Naloxone Access | NCDHHS](#)

[Naloxone Distribution - North Carolina Opioid Settlements \(ncopioidsettlement.org\)](#)