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**POLICY AND PROCEDURE**

SUBJECT/TITLE:	Overdose Education and Naloxone Distribution Program - Personally Furnishing/Distributing Naloxone for Naloxone Furnishers and Responders
APPLICABILITY:	Naloxone Furnishers and Overdose Responders (Public health staff and partnering agencies)
CONTACT PERSON & DIVISION:	Overdose Prevention Program Manager - OPHII
ORIGINAL DATE ADOPTED:	10/01/2019
LATEST EFFECTIVE DATE:	07/17/2023
REVIEW FREQUENCY:	5 Years
BOARD APPROVAL DATE:	N/A
REFERENCE NUMBER:	900-005

**A. PURPOSE**

The intent of this document is to outline the procedures for Canton City Public Health (CCPH) to conduct a community-based overdose education and naloxone distribution program (OENDP) and provide multi-agency oversight of naloxone distribution through partnered agencies in Stark County. This document will outline CCPH procedures as well as procedures that must be adopted by partnering agencies to receive a stock of naloxone from CCPH and personally furnish/distribute naloxone, pursuant to CCPH’s policies. The term *distribute* will be used hereinafter.

CCPH and partnering agencies will be trained to become Naloxone Furnishers to distribute naloxone and train Overdose Responders (ORs) to administer naloxone to individuals experiencing an opioid overdose. Naloxone is an opioid antagonist which is used to reverse the effects of an opioid overdose. It is a non-controlled substance.

This policy and procedure, as well as the Partnership Agreement and each partner’s individualized Standard Operating Procedures (SOPs) will serve as guidance for operations of CCPH’s OENDP. All OENDP activities will be conducted in accordance with these documents.

**B. POLICY**

Ohio law (ORC 3715.50) permits any person or government entity to purchase, possess, personally furnish, and distribute an overdose reversal drug (ORD) without a prescriber-authorized protocol if all the following conditions are met:

- The overdose reversal drug is in its original manufacturer's packaging.
- The overdose reversal drug's packaging contains the manufacturer's instructions for use.
- The overdose reversal drug is stored in accordance with the manufacturer's or distributor's instructions.

For outside agencies interested in distributing naloxone through their current work, the following requirements must be met to receive stock of naloxone under CCPH’s policy. Partnering agencies must:



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1. Enter into a Partnership Agreement that defines the agreed-upon roles and responsibilities of the agency ([900-005-01-F: Partnership Agreement](#)). Prior to the receipt of naloxone stock and initiating distribution, this agreement will be reviewed with someone from CCPH OENDP staff. To arrange a review with Public Health, call (330-438-4646) during business hours, or email: [mstreetman@cantonhealth.org](mailto:mstreetman@cantonhealth.org).
2. Have staff or volunteers trained as Naloxone Furnishers and enter those person's names onto your training log. CCPH will coordinate training with "Train the Trainer" session(s) for your agency. Upon completion of training, staff will receive a *Certificate of Completion*.
3. Each agency will create site-specific Standard Operating Procedures ([900-005-02-F: Standard Operating Procedures](#)) and be willing to meet with CCPH program staff to review inventory and distribution procedures at any time while CCPH is supplying naloxone to the agency.
4. Failure to follow approved procedures or report timely or accurate data will result in the termination of the partnership agreement.

### C. BACKGROUND

Drug overdose has become the leading cause of injury death both in Ohio and across the nation since 2007—surpassing deaths from motor vehicle crashes for the first time on record. The Ohio Department of Health has reported that almost 75% of those deaths involve opioids such as heroin, fentanyl or prescription pain medication. One way to prevent fatal opiate overdose is to provide naloxone to people who are at risk of opiate overdose. Naloxone is a medication called an "opioid antagonist" used to counter the effects of opioid overdose. Specifically, naloxone is used in opioid overdoses to counteract life-threatening depression of the central nervous system and respiratory system, allowing an overdose victim to breathe normally. Naloxone is a nonscheduled (i.e., non-addictive), prescription medication. Naloxone only works if a person has opioids in their system; the medication has no effect if opioids are absent. Naloxone can be administered by minimally trained laypeople. Naloxone has no potential for abuse. It is a temporary drug that wears off in 20-90 minutes.

Since 2012, the Ohio Department of Health (ODH) has been providing overdose education and naloxone overdose prevention kits through an initiative called Project DAWN (Deaths Avoided With Naloxone) Legislative changes over the past decade have increased access to naloxone. Once reserved for First Responders and medical personnel, naloxone has become more widely available to the general public. Effective April 6, 2023, Ohio law (ORC 3715.50) permits any person or government entity to purchase, possess, personally furnish, and distribute an overdose reversal drug (ORD) without a prescriber-authorized protocol if all the following conditions are met:

1. The overdose reversal drug is in its original manufacturer's packaging.
2. The overdose reversal drug's packaging contains the manufacturer's instructions for use.
3. The overdose reversal drug is stored in accordance with the manufacturer's or distributor's instructions.

To this end, on April 6, 2023, CCPH rescinded their standing orders/protocol signed by the Medical Director that was previously required to personally furnish naloxone and allow outside agencies to distribute naloxone pursuant to a protocol. This policy replaces that protocol.

### D. GLOSSARY OF TERMS

**Naloxone Trainer:** An individual who provides training to Naloxone Furnishers.

**Overdose Education and Naloxone Distribution Program (OENDP):** OENDPs provide overdose prevention and response education and take-home overdose reversal kits containing naloxone to individuals who complete an



established training and who are at-risk for opioid overdose or who could potentially assist someone experiencing an opioid overdose according to established program criteria.

**Project DAWN (Deaths Avoided With Naloxone):** An Ohio Department of Health (ODH) program that supports local agencies in providing overdose prevention and response education and training opioid overdose responders in accordance with established program policies.

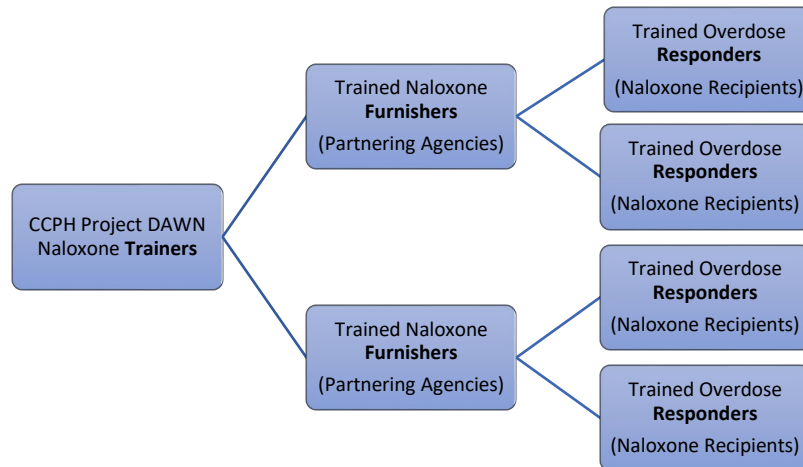
**Trained Naloxone Furnisher:** An individual trained by Project DAWN Naloxone Trainers who is authorized to conduct opioid overdose response trainings and furnish naloxone to overdose responders.

**Trained Overdose Responder (OR):** A person who has successfully completed an opioid overdose response training and received an overdose reversal kit.

**Opioid Overdose Response Training:** A training curriculum which instructs an opioid overdose responder on prevention and reversal of opioid overdoses, including the importance of contacting emergency medical services, providing rescue breathing, and administering naloxone. This training is facilitated by naloxone furnishers.

**Opioid Antagonist:** An FDA-approved drug that negates or neutralizes, in whole or in part, the pharmacological effects of an opioid in the body. The opioid antagonist permitted under these guidelines is limited to intranasal naloxone.

## E. Training



**Figure 1: Flow chart of training for distributing naloxone pursuant to CCPH’s policy.**

### Naloxone Furnishers

CCPH OENDP staff have become certified Project DAWN Naloxone Trainers, able to provide ‘Train-the-Trainer’ instruction. All Naloxone Furnishers will attend a mandatory training conducted by CCPH/Project DAWN Naloxone Trainers. The training will be approximately one hour in length and will cover all elements of how to train Overdose Responders and distribute naloxone. The trainings may be in small groups or conducted one-on one, in-person or virtually. The duration of the training will depend on the number of responders in the class and their familiarity with drug administration and overdose.



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Upon successful completion of the training, the trained individual will receive a *Certificate of Completion as a Trained Naloxone Furnisher*.

**Intake Documentation and Risk Assessment**

An intake form will be completed for each Overdose Responder prior to or during the training session ([900-005-03-F: Naloxone Intake Form \(Version 3.5 Last update: 02/07/2023\)](#)). The Trained Naloxone Furnisher will review this information and will ensure that the form is completed accurately.

**Overdose Responders (ORs)**

OENDP Naloxone Furnishers are responsible for training Overdose Responders (ORs) at the time of naloxone kit distribution. The Project DAWN kit will contain an instructional pamphlet (attached to the medication box) that will serve to reinforce these training steps. ORs will be encouraged to share these items with family and friends so that they may be better able to assist them in an overdose situation.

The training curriculum can include the following topics:

- Risk factors for opioid overdose
- Strategies to prevent opioid overdose
- Signs and symptoms of opioid overdose
- Response to opioid overdose, including calling 911 and administering rescue breathing
- Procedures for assembling and administering naloxone
- Information on naloxone, including possible adverse reactions
- Proper storage of naloxone
- Expiration date of distributed product
- Procedure for reporting an overdose reversal
- Procedure for obtaining a replacement dose of naloxone
- Information on where to obtain a referral for substance abuse treatment

All individuals to whom naloxone is distributed **must** be specifically instructed to summon emergency services as soon as practicable either before or after administering naloxone.

**Distribution of Naloxone Kits**

ORs who complete the training shall be issued a naloxone kit by the Trained Naloxone Furnishers. Each kit shall include:

Option #1	Option #2	Option #3	Option #4
Two (2) doses of 4mg Narcan® nasal spray One face shield One pair nitrile gloves One storage pouch	Two (2) doses of 4 mg Narcan® nasal spray	Two (2) dose of 8mg Kloxxado® nasal spray One face shield One pair nitrile gloves One storage pouch	Two (2) doses of 8 mg Kloxxado® nasal spray

\*A generic version of 4 mg naloxone is available for order and distribution



## Storage, Record-Keeping, and Administrative Requirements

Records of receipt shall include ([900-005-05-F: Receipt of Stock](#)):

- Description of naloxone received
- Kind and quantity of naloxone received
- Name and address of the person from whom naloxone is received

Records of inventory ([900-005-04-F: Naloxone Inventory Log](#)):

- Number/Count of naloxone added/subtracted to agency inventory
- Date that naloxone is added/subtracted to agency inventory
- Lot # of naloxone kits that are added/subtracted from agency inventory
- Expiration date of kits that are added/subtracted from agency inventory
- Signature of naloxone furnisher who is adding/subtracting from agency inventory
- Total naloxone kit balance in inventory

Each box of naloxone will be securely stored in a locked cabinet at the partnering agency's choice of site and in a manner consistent with the manufacturer's guidelines, including storing at controlled room temperature, 59°F to 77°F (15°C to 25°C). Excursions permitted between 39°F to 104°F (4°C to 40°C). Do not freeze. Protect from light ([900-005-02-A: How to Store Naloxone](#)).

As naloxone is to be stored at controlled room temperature, in the event a partnering agency cannot maintain controlled room temperature (either hot (above 77°F) or cold (below 59°F) temperature), the partnering agency will contact CPH OENDP staff to make arrangements for the naloxone to be picked up at and stored at CPH until the extreme temperature variation is restored to room temperature.

## Data Tracking Procedures

A Project DAWN Naloxone Intake Form shall be completed for each OR who receives training and a naloxone kit. All forms will be securely stored, either digitally or as a hard copy. No identifying or personal health information is collected on forms.

## Fee Policies

ORs who complete the training and/or receive a naloxone kit have no obligation to pay any out-of-pocket costs or fees.

## F. CITATIONS & REFERENCES

1. Project DAWN Toolkit and Attachments. Available <https://odh.ohio.gov/know-our-programs/project-dawn/project-dawn>
2. ORC 3715.50 Overdose reversal drug definitions, 4/6/2023, <https://codes.ohio.gov/ohio-revised-code/section-3715.50>
3. State of Ohio Board of Pharmacy, Distribution of Overdose Reversal Drugs in Ohio (Comprehensive Guide), 4/4/2023,



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<https://www.pharmacy.ohio.gov/documents/pubs/naloxone/resources/distribution%20of%20overdose%20reversal%20drugs/distribution%20overdose%20reversal%20drugs%20in%20ohio.pdf>

### G. CONTRIBUTORS

The following staff contributed to the authorship of this document:

1. Amanda Archer, MPH, Epidemiologist II
2. Diane Thompson, RN, MSN, Director of Nursing
3. Jon Elias, MD, Medical Director
4. Michelle Streetman, Overdose Prevention Program Manager

### H. APPENDICIES & ATTACHMENTS

900-005-01-A: How to Partner with CCPH for Naloxone Distribution

900-005-02-A: How to Store Naloxone

### I. REFERENCE FORMS

900-005-01-F: Partnership Agreement for a Partnering Agency - TEMPLATE

900-005-02-F: Standard Operating Procedures for Partnering Agency- TEMPLATE

900-005-03-F: Project DAWN Naloxone Intake Form

900-005-04-F: Naloxone Inventory Log

900-005-05-F: Receipt of Naloxone Stock- TEMPLATE

### J. REVISION & REVIEW HISTORY

Revision Date	Review Date	Author	Notes
04/06/2023		M. Streetman	Revisions made to reflect legislative changes enacted (ORC 3715.50) 04/06/2023.

### K. APPROVAL

This document has been approved in accordance with the “800-001-P Standards for Writing and Approving PPSOGFs” procedure as of the effective date listed above.