

## **Question and Answers:**

### **Director of Licensing Standard of Practice: Preventing Opioid Overdose Deaths**

#### **Are all Licensed Residential Care Facilities to implement this Standard of Practice?**

The Standard of Practice applies to all facilities that “provide care to persons who are at risk of an opioid drug overdose.” This means you (facility operator) must assess your current population regularly to determine if a resident(s) is at risk. It also means that admission screening must now include reviewing residents for an opioid use disorder and risk for an opioid overdose. This should be documented as per the facility’s protocols.

#### **How do we know if our residents are at risk of an opioid overdose?**

Residents using illicitly acquired drugs including opioids such as Heroin, OxyContin, Morphine and Fentanyl, as well as stimulants such as Cocaine and Crystal Meth are considered at risk of opioid overdose due to contamination of the illicit drug supply with Fentanyl and related compounds. Residents with a history of opioid disorder or addiction, including those undergoing treatment or on substitution therapy with Methadone and Suboxone are also considered at risk of opioid overdose because of the relapsing nature of addiction.

Residents should be screened for these risks in the same way that they are screened for tobacco and alcohol use. As an example, residents could be asked “Do you use street drugs (other than marijuana) or prescription drugs that are not prescribed to you? Have you been diagnosed with an opioid use disorder or been treated with Methadone or Suboxone?” Residents should be informed that you are asking these questions so that the facility is prepared to support them in the event of an overdose.

#### **Can I opt out of this Standard of Practice?**

No, if your facility has a person or persons in care with an opioid use disorder, and/or those who are at risk of overdose, you cannot opt out of this Standard of Practice. Doing so would be cited as non-compliance with the Residential Care Regulation.

#### **Where can facility operators access training and a supply of Naloxone?**

Naloxone is available for purchase at pharmacies in British Columbia; please work with your Supervising Pharmacist. Some facilities may also be candidates for BCCDC’s Facility Overdose Response Box Program.

As per the Standard of Practice and Residential Care Regulation, the responsibility for ensuring the appropriate training and the supply of Naloxone is the facility’s Medication Safety Advisory Committee and Supervising Pharmacist.

Information and resources within VCH can be found at our website:

<http://www.vch.ca/your-health/health-topics/overdose-prevention-and-response/>

An overdose prevention checklist and protocol can be found here:

<http://www.vch.ca/media/Overdose-Prevention-Checklist.pdf>

Other resources for Naloxone can be found at BCCDC's Naloxone Program and the College of Pharmacists of British Columbia:

<https://towardtheheart.com/naloxone/forb>

<http://www.bcpharmacists.org/naloxone>

**What does it mean to have qualified staff available at all times to administer Naloxone when the person(s) in care is on premises and/or off the premises and under the care of the facility staff?**

This requirement is the same as for first aid in the Residential Care Regulation. The Standard of Practice is adding the requirement that facility staff have access to Naloxone and are trained in its administration.

In addition, staff must be awake and available to give Naloxone at all times.

**What should we do if the person in care is away from the facility and not in our care?**

Facilities should work with Take Home Naloxone programs in the community to ensure that clients are provided with an opportunity to receive a Take Home Naloxone kit and be trained in its use. Facilities with a physician, nurse practitioner, registered nurse, registered psychiatric nurse and/or social worker can apply to become Take Home Naloxone sites so that they can train their clients and provide them with Take Home Naloxone kits.

**How should the use of Naloxone be documented, and how should it be stored at the facility?**

Naloxone must be accessible to the staff for administration. Your Medication Safety Advisory Committee (MSAC) will need to develop the appropriate policies and procedures around documentation and storage which is in compliance with the Residential Care Regulation and College of Pharmacists of BC – Residential Care Facilities and Homes Standards of Practice.

**There is now a requirement to report the administration of Naloxone. How is this to be done?**

Report the overdose and use of Naloxone to Licensing in the same manner as all other Reportable Incidents - **immediately** to your Licensing Officer. In the report, select "Poisoning" and detail the circumstances and actions taken as outlined in the Standard of Practice.

**Who can I contact if I have more questions?**

Please contact your Licensing Officer.