



IR31

**OPIOID OVERDOSE RESPONSE  
(NALOXONE)**

IR31

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**POLICY**

1. The seizure and handling of drugs for evidentiary or destruction purposes puts Delta Police Department (Department) employees at an increased risk of opioid exposure. Employees should be mindful that any substance seized in powder, liquid or pill form may contain opioids.
2. Naloxone (brand name Narcan©) may be administered to temporarily reverse the effects of an opioid overdose to allow for medical intervention. The Department stocks naloxone intranasal spray kits as an additional tool in support of public and employee safety.

**REASON FOR POLICY**

3. The purpose of this policy is to provide direction in the utilization of naloxone by Department employees acting in the course of their duties. The objective is to reduce injuries and fatalities to members of the public as well as police members due to opioid related overdoses or inadvertent exposure.

**RELATED POLICIES**

- EA30 – Reportable Incidents of Injuries or Death (B.C. Police Act)
- IP42 – Drug Handling

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Opioid Overdose Response (Naloxone)

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## DEFINITIONS

4. For the purpose of this Policy, the following definitions will apply:

**Opiate/Opioid:** a medication or drug that is derived from the opium poppy. Opioids are synthetic drugs that mimic the effect of an opiate.

**Naloxone:** Naloxone, (in nasal form Narcan®), is an antidote to opioid overdose. Taking too much of opioid drugs (e.g. morphine, heroin, methadone, oxycodone, and fentanyl) can make breathing slow down or stop. Naloxone reverses this effect and restores normal breathing and consciousness.

## PROCEDURES

### Administering Naloxone

5. Employees may use intranasal naloxone spray (spray) to resuscitate another employee in the event of accidental contact with an opioid which results in an overdose.
6. In emergent situations, an employee may, if safe to do so, administer the spray to a member of the public if an opioid overdose is suspected, and British Columbia Ambulance Service (BCAS) or Delta Fire attendance is not imminent.
7. Employees are expected to view the naloxone training video (located on the Intranet) and make themselves familiar with the locations of naloxone kits.
8. Any employee who has completed the naloxone training may carry and administer the spray while on-duty, except in emergent situations, in which case any employee, regardless of training, may administer the naloxone spray.
9. If an employee administers the spray to another employee or a member of the public, the employee shall ensure BCAS and/or Delta Fire attends to assume care of the spray recipient, and remain on-scene until relieved by BCAS and/or Delta Fire.
10. In situations where known or suspected opioids are seized and/or processed, two employees, one with ready access to a spray, must be present.



**Responsibilities**

11. The Operational Skills Unit (OSU) shall ensure all authorized and required employees complete intranasal naloxone spray training.
12. The Quartermaster is responsible for:
  - a) issuing spray to members;
  - b) tracking inventory of spray;
  - c) ordering replacement stock in a timely manner, including holding a surplus of stock and monitoring expiry dates; and
  - d) informing the OSU 60 days prior to expiry of sprays.
13. Employees issued with personal spray kits and supervisors of units holding spray kits are responsible for:
  - a) ensuring that the issued spray is maintained within temperature range indicated on the spray storage container;
  - b) monitoring expiry dates of issued spray, and notifying the OSU 60 days prior to the expiry date;
  - c) advising their supervisor when spray has been administered, as soon as practicable; and
  - d) submitting expired spray to the Property and Exhibits Unit for disposal.
14. Supervisor is responsible for advising the Duty Officer if the spray is administered to an employee, as soon as practicable.

**Reporting requirements**

15. If the spray was administered to an employee, the administering employee shall complete Form 74 (Intranasal Naloxone – Post Administration Report) and Form 75 (Incident Report) and submit the same to the Inspector, Human Resources.
16. If the spray is administered to any person other than an employee, members must complete the PRIME template for spray administration and apply appropriate UCR coding to the file.



17. If the recipient of naloxone administered by an employee dies, the Duty Officer must be notified immediately.
18. The Duty Officer is not required to notify the Independent Investigations Office (IIO) of an incident involving serious harm or death where a member provided immediate medical care, including administering naloxone spray, except in the following circumstances:
  - a) where there has been any use of force by a member prior to or after the administration of the spray; or
  - b) where a person dies or suffers serious harm while detained or in the member's custody.

\*Revised Dates:  
08 February 2017  
16 April 2018