

	ELGIN POLICE DEPARTMENT 151 Douglas Avenue Elgin, Illinois 60120	
Effective Date: 05/23/16	STANDARD OPERATING PROCEDURE	Revised Date: 04/09/25
Chief of Police: 	Narcan Administration/Overdose Fatalities, 42.7	
Cross Reference: SOP 101.1 Bloodborne Pathogens 20 ILCS 301/5-23		Policy Sections: 42.7.1 Use of Narcan 42.7.2 Supervisory Responsibilities 42.7.3 Required Documentation 42.7.4 Narcan Kits 42.7.5 Department Training and Documentation 42.7.6 Community Distribution of Narcan Appendix A: Overdose Reversal & Naloxone Administration Reporting Appendix B: Accidental Use Reporting Form Appendix C: Damaged or Lost Narcan Reporting Form Appendix D: Standing Order to Dispense & Administer Naloxone

PURPOSE

The purpose of this policy is to establish guidelines and regulations governing utilization of Narcan administered by the department and the responsibilities of supervisors when an overdose victim is transported to the hospital.

POLICY STATEMENT

It is the policy of the department to administer a Drug Overdose Prevention Program and to administer Narcan in accordance with the requirements established by the Illinois Department of Human Services (Division of Alcoholism and Substance Abuse) and the respective county health departments. The department recognizes the importance of investigating overdose fatalities and as such, will investigate incidents. These investigations often require a collaborative effort of multiple workgroups within the department and the coroner or medical examiner's office.

DEFINITIONS

Affiliated Prescribers: A healthcare professional, as defined in 20 ILCS 301/5-23, who may prescribe or dispense Naloxone.

Coroner: An elected or appointed public officer whose chief duty is to certify the cause of death.

Drug Overdose Responders: Police officers who have successfully completed the required training in drug overdose prevention as outlined by the Department of Human Services; these police officers are authorized to administer Narcan.

Medical Examiner: A medical examiner is a forensic pathologist, a medical doctor with subspecialty training, with particular expertise in investigating violent, sudden and unexpected, suspicious or unattended deaths.

Narcan: A prescription medication that can be used to reverse the effects of an opioid drug overdose; this is also referred to as Naloxone.

Opioids: Opioid drugs include, but are not limited to heroin, morphine, oxycodone, methadone, hydrocodone, and codeine.

Program Official: The administration lieutenant is designated as having the overall responsibility for the drug overdose prevention program in compliance with the guidelines established by the Illinois Department of Human Services.

Trainers: Police officers who have demonstrated competence in the content and skills of a drug overdose prevention program as approved by the designated program official, healthcare professional, and the Illinois Department of Human Services.

PROCEDURES

42.7.1 NARCAN KITS ISSUED TO OFFICERS

- A. To reduce the number of overdose deaths, police officers are issued one Narcan kit consisting of two atomizers (Narcan) for use in responding to overdose calls. It is recommended that at least one atomizer be carried on the officer's person to ensure accessibility for rapid deployment. The second atomizer shall be maintained in a location where it is easily accessible and maintained at the temperature range of 59 to 77 degrees Fahrenheit.
- B. After deployment of Narcan, the program official is responsible for obtaining a replacement kit from the approved healthcare prescriber.
- C. The shelf life of Narcan varies depending upon the manufacturer. The program official is responsible for the replacement of expired Narcan kits and all aspects of inventory control.

42.7.2 USE OF NARCAN BY RESPONDING OFFICERS

- A. Narcan may be administered by a drug overdose responder, when the responding police officer reasonably believes that a person is in an opioid overdosed state based on their training and any/or all the following observations/information:
 - 1. When advised by telecommunicators that a person has potentially overdosed.
 - 2. When observing drugs, drug paraphernalia or any other drug instruments associated with the subject or the scene.
 - 3. Where the victim is observed to be unresponsive, there is an absence of breathing and/or the victim has no pulse. Other signs of opioid overdose include lack of response to a sternal rub, shallow breathing, and bluish lips.
- B. Once the responding police officer has determined that the subject is in a potential opioid overdose state the police officer shall, as soon as practical:
 - 1. Notify the Emergency Communications Division that the subject is in a potential opioid overdose state and request an ambulance if one is not already enroute.
 - 2. Maintain universal precautions and protections from bloodborne pathogens and communicable diseases. Refer to Standard Operating Procedure 101.1 Bloodborne Pathogens and Infectious Disease to view the police department's exposure plan.
 - 3. When safe, deploy the Narcan in accordance with the training and protocol guidelines provided by the department.
 - 4. Inform responding fire department personnel that Narcan has been administered, the number of doses used, and how it was dispensed.
 - 5. Used administration devices shall be disposed of in the regular trash as there are no sharps present or significant potential for exposure.

42.7.3 REQUIRED DOCUMENTATION AFTER USE OF NARCAN

- A. The police officer shall complete a police report to describe the incident and to document that Narcan was administered. An emailed notification to include the police report number and

information included in the report narrative shall be sent to the program official. This practice ensures that the required documentation is submitted to Kane County on a timely basis.

- B. Upon receipt of the emailed notification, the program official shall complete the Overdose Reversal and Naloxone Administration Reporting Form. This form must be submitted to the Kane County Health Department within five business days from the date Narcan was administered. Refer to Appendix A to view this form.
- C. All accidental use, damaged or lost, and waste of Narcan shall be documented in a police report. Police officers shall also notify a supervisor when these instances occur.
 - 1. Upon receiving notification, the supervisor shall complete the designated form. Refer to the following appendices to view the associated forms: Appendix B: Accidental Use and Appendix C: Damaged or Lost Narcan.
 - 2. Completed forms will be routed to the program official who will forward the forms to the Kane County Health Department and the Records Division for inclusion in the police report.
- D. Police reports and associated forms shall be completed before the end of the shift.

42.7.4 SUPERVISORY RESPONSIBILITIES AFTER AN OVERDOSE

- A. Ensure the victim's family was offered the support services provided by a department chaplain.
- B. When an overdose victim is transported to the hospital for medical treatment and is unconscious or in otherwise critical condition, Patrol Division supervisors shall ensure the following takes place:
 - 1. A documented interview of subject(s) at the scene to include whether the subjects knew when the victim ingested the drugs, type of narcotics involved, and how the victim obtained the drugs which shall be included in the police officer's police report.
 - 2. The evidence collection process. If the victim is unconscious or in what is believed to be a critical condition, the evidence collection process shall include the collection of the victim's cell phone, narcotics, items of paraphernalia, and prescription medication. Whenever possible, the victim's cell phone shall be switched to airplane mode and an attempt to obtain the passcode to unlock the cell phone shall be made.
 - 3. Obtain the victim's status from the hospital staff by assigning an officer to confer with hospital staff as to the victim's status which shall be documented in the police report, to include the name of the hospital staff member who provided the update.
 - a. When the victim is unconscious or in critical condition, the patrol supervisor who was on-duty during the incident shall contact the hospital at the end of his/her shift to determine the condition of the victim.
 - b. If the hospital refuses to provide the condition of the victim, the supervisor shall document the refusal in a supplementary report.
 - 4. Notification to the Coroner or Medical Examiner's Office
 - a. When the supervisor is unable to determine the victim's condition, the supervisor shall contact the Kane County Coroner's Office or the Cook County Medical Examiner's Office, whichever is applicable, to provide notification that there is an overdose victim at the hospital.

- b. The Emergency Communications Division shall make notification to the supervisor if the victim's status changes to deceased.
 - c. Notification shall be made to the Coroner's Office or the Medical Examiner's Office when the victim is pronounced deceased.
- 5. Notification to the Major Investigations Division
 - a. Immediately provide notification to the Major Investigations Division lieutenant or sergeant.
 - b. Ensure any autopsy information is relayed to the Major Investigations Division.
 - c. The Major Investigations lieutenant shall ensure the following takes place:
 - 1. Triage any overdose reports where the subject is deceased to determine if there are investigative leads to pursue.
 - 2. If there are leads, the case shall be assigned to a detective for follow-up.
 - 3. If the subject is not deceased, the report shall be placed into the Collaborative Crisis Services Unit Report Queue.
- 6. Completion of police report.
 - a. A report shall be completed on all overdose incidents.
 - b. The report shall reflect the title of 'death investigation.'
- C. The sergeant assigned to the Collaborative Crisis Services Unit shall ensure the following takes place:
 - 1. Report of an overdose where the victim was transported to the hospital is assigned for follow-up as soon as possible.
 - 2. Ensure the assigned detective conducting follow-up contacts the hospital to determine the victim's status on their next working day.
 - 3. If the victim is later found to be deceased, the Major Investigations Division lieutenant or sergeant shall be notified and documented in the supplemental report.
 - 4. If the victim recovers, ensure follow-up with the victim and family members to determine available counseling, community resources, and other services they may be interested in.

72.7.5 DEPARTMENT TRAINING AND DOCUMENTATION

- A. Police officers will be required to successfully complete the basic Narcan training course as approved by the Illinois Department of Public Health prior to being issued and/or deploying Narcan. A Standing Order to Dispense and Administer Naloxone, an Illinois Department of Public Health form, shall be completed for each officer upon completion of training. Refer to Appendix E to view said form.
- B. Police officers will be required to take a refresher training class in order to retain their status at a minimum of every two years, in conjunction with CPR training during annual in-service training.
- C. In conjunction with the Training Division, the program official will maintain, as required by the Illinois Department of Human Services:

1. A training log of all drug overdose responders with their name and date of training completion.
2. A training log of all trainings with the dates and locations of the training, the name of the trainer, and the names of police officers in attendance.
3. List of all persons who are designated as trainers with verification by the health care professional of their training competence.
4. Records pertaining to Narcan acquisition and storage.
5. All required forms.
6. A log of current affiliated prescribers, which includes their licensing credentials and any required collaborative agreements.

72.7.6 COMMUNITY DISTRIBUTION OF NARCAN

- A. The department utilizes a Narcan vending machine to distribute Narcan to the community at no cost to the individual. The Narcan vending machine is in the department's lobby outside the CCSU office and is accessible to community members.
 1. The anonymity of the individual is important and there is no requirement to sign for the Narcan.
 2. The Narcan vending machine is owned and managed by an outside vendor and when inventory is low, the CCSU sergeant or designee is responsible for working with the vendor to request additional inventory.
- B. CCSU detectives may personally distribute Narcan to a community member during law enforcement activities.
 1. In these instances, the CCSU sergeant shall be notified in addition to documenting the distribution within the Narcan Distribution Log.
 2. The anonymity of the individual is important, and the log shall only contain the name of the officer distributing the Narcan, the date of distribution and the quantity given.
 3. The log shall be located within a secure folder located on the city's computer system and accessible only to CCSU members.

(Completed by the program official)

S.O.P. 42.7 Narcan Administration/Overdose Fatalities: Effective Date 05/23/16
Appendix A: Overdose Reversal & Naloxone Administration Reporting

APPENDIX B: ACCIDENTAL USE FORM
(Completed by a supervisor)



Kane County Narcan Program
1240 N. Highland Avenue
Aurora, IL 60506

ACCIDENTAL USE

In the event of an accidental use of Narcan, please complete this form and return to the Kane County Health Department: email to dawsondiane@co.kane.il.us or fax to 630-897-8138.

Kane County Narcan Program Notification Date: _____

Officer Reporting accidental use: _____

Site/Department Name: _____ /Phone: _____

Was the person who administered the accidental dose of Narcan a Police Officer? ___Yes ___No

Name of person who administered the Narcan: _____

If a police officer, name of department: _____

Was the person who received the accidental dose a Police Officer? ___Yes ___No

Name of person who received the accidental dose of Narcan: _____

If police officer, name of department: _____

If either or both of the named persons mentioned above are not Police Officers, please provide their name and address:

Name: _____

Address: _____

City, State, Zip: _____

Type of administration: ☐ Nasal ☐ Auto-Injector Quantity used: _____

Date of accidental administration: _____ Approx. time of administration: _____

Location of administration: (i.e. arm, thigh) _____

Was an internal report made? ___Yes ___No

Did the individual seek medical attention? ___Yes ___No

Comments: _____

Cr 04/15/16
Rv

APPENDIX C: DAMAGED OR LOST NARCAN REPORTING FORM
(Completed by a supervisor)



Kane County Narcan Program
Damaged or Lost Narcan Reporting Form

Effective July 2016 the Health Department will no longer collect expired or damaged Narcan. Please dispose of wasted, expired or damaged Narcan to your local EMT, Hospital or contracted source. You are still required to report any wasted, lost or damaged Narcan to the Kane County Health Department by completing this form and emailing to dawsondiane@co.kane.il.us or via fax at 630-897-8138.

(Reporting Date)

(Reporting Department)

(Name of Person Making Report)

(Phone #)

Description of items being reported: # Nasal Doses _____ # Atomizers _____

Do you need replenished doses? Yes / No # Nasal Doses _____ # Atomizers _____

We will contact you for pickup of replenishments once this form is received in our office.

Police Department Representative
Print

KCHD Narcan Representative
Print

Police Department Representative
Signature

KCHD Narcan Representative
Signature

For Office Use Only:

Contact date: _____



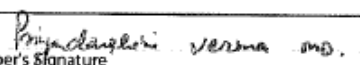
Pick up date: _____

Pick up time: _____

7/6/14
Rv 11/24/14, 09/24/15, 7/16
S:\Division of Disease Prevention\NARCAN\Forms\Working Copies\KCNP_002_Damaged or Lost Reporting Form.docx

1240 N. Highland Avenue
Aurora, IL 60506
630-208-3801

APPENDIX D: STANDING ORDER TO DISPENSE & ADMINISTER NALOXONE
(Sample of completed form)

	State of Illinois Department of Human Services - Division of Alcoholism and Substance Abuse
STANDING ORDER TO DISPENSE AND ADMINISTER NALOXONE	
Date: <u>Apr 23, 2018</u>	
Program Name: <u>Kane County Narcan Program</u>	Site: <u>Elgin Police Department</u>
Name of Trained Overdose Responder to Receive Naloxone: <u>Arnie Zabran</u>	
Date Completed Drug Overdose Prevention Training: _____	
Verification by Program Director of Completion of Drug Overdose Prevention Training	
Barbara Jeffers, MPH Program Director's Printed Name	 Program Director's Signature
	<u>Apr 23, 2018</u> Date
Prescriber to Verify that Overdose Responder has information on the indications for and Administration of Naloxone	
<input checked="" type="checkbox"/> Prevention of and Risks for Drug Overdose	
<input checked="" type="checkbox"/> Recognition of Drug Overdose	
<input checked="" type="checkbox"/> Rescue Breathing and Resuscitation	
<input checked="" type="checkbox"/> Call for Help	
<input checked="" type="checkbox"/> Naloxone Administration	
<input checked="" type="checkbox"/> No Response: Repeat in 2 - 5 Minutes	
<input checked="" type="checkbox"/> Follow-up: Provide Support to Recipient	
Standing Order	
Dispensed Naloxone: <input checked="" type="checkbox"/> 4mg. - 1 Prefilled Nasal Spray	Expiration Date: <u>September, 2019</u>
Dispensed Naloxone: <input type="checkbox"/> 2mg/2ml. - 2 Prefilled Syringes	Expiration Date: _____
Dispensed Naloxone: <input type="checkbox"/> 0.4 mg/ml. - 1 Vial and 2 Syringes	Expiration Date: _____
May Repeat RX Four (4) Additional Times	
Dispense Date: <u>4-13-18</u>	Expiration Date: <u>October, 2019</u>
Dispense Date: _____	Expiration Date: _____
Dispense Date: _____	Expiration Date: _____
Dispense Date: _____	Expiration Date: _____
 Prescriber's Signature	<u>Apr 23, 2018</u> Date
<u>Priyadarshini Verma, MD</u> Printed Name and Credential	
<input type="button" value="Reset Form"/> <input type="button" value="Print Form"/>	
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