

# Clackamas County Leave Behind Naloxone Policy

## BACKGROUND

- Overdose is the leading cause of accidental death in the United States. Over 75,000 people died from opioid overdose in 2021. In Oregon, the number of deaths from opioid ODs has more than tripled from 2019 to 2022.
- In 2023, the Oregon Legislature enacted HB 2395 which permits “a law enforcement officer, a firefighter, [and] an emergency medical services provider” to distribute naloxone and any necessary medical supplies to “an individual [and] family members of an individual” ... “who has experienced an opioid overdose or is likely to experience an opioid overdose” and “any other individual who requests one or more kits”.
- The law specifically protects against any civil and criminal liability in the distribution of naloxone.
- Providing overdose prevention, recognition, and response education to patients, their friends and family and our communities is a crucial harm reduction intervention that saves lives. EMS is in a unique position to intervene as substance use disorder patients often receive EMS services but refuse transport.

## Policy

- EMS agencies are encouraged to stock naloxone delivery devices intended for layperson use in the event of opioid overdose and deploy them on units responding to calls for service.
- Clackamas County Public Health Department has committed a no-cost ready supply for distribution to agencies.
- Under the direction of the EMS Medical Director, all licensed EMS personnel are authorized to leave naloxone with a patient or responsible adult that:
  1. Has suffered an overdose, regardless of whether they are transported or refuse transport per standard protocol; **or**
  2. Is at risk for overdose (consider medical history and medications i.e. high dose or long-term opiate use), even if a call does not specifically involve an opioid overdose; **or**
  3. For a patient, if naloxone was used prior to EMS arrival, to resupply friends, family, or bystanders.
- Nothing in this policy shall affect standard patient assessment, care, and refusal procedures. Personnel responding to overdose calls should continue to recommend transport to patients. If a patient declines transport, personnel shall assess for level of consciousness, capacity to refuse, and document refusals per standard protocol and procedure.

## Procedure

- EMS personnel shall provide instruction on the indications and proper technique for usage of the device to the recipient.
- If naloxone is left with the patient or other responsible adult during a patient care encounter, EMS personnel shall record the dispensing of the medication in the PCR flowchart under “Other” as “Leave Behind Narcan Kit”.
- If naloxone is dispensed outside of a 911 patient care response (e.g. community paramedic visit), providers should document the encounter per their agency’s policies.
- If a patient, friend, family, or community member is unwilling to provide identifying information, that should not be a barrier or a reason to not distribute naloxone.
- Supply/resupply orders for each agency can be placed through the County website:
  - <https://www.clackamas.us/publichealth/naloxone>