TALLAHASSEE POLICE DEPARTMENT GENERAL ORDERS

Proudly Policing Since 1841	SUBJECT Emergency Opioid Intervention Program		
	CHIEF OF POLICE Signatu	EF OF POLICE Signature on file	
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AUTHORITY/RELATED REFERENCES

FS 381.887, Emergency Treatment for Suspected Opioid Overdose General Order 2, Chain of Command-General Management General Order 11, Communicable Disease Control

ACCREDITATION REFERENCES

CFA Chapter 14

KEY WORD INDEX

Application Protocols Audits and Inventories Authorization to Carry and Storage Protocols General Guidelines Inspection and Replacement Overdose Rescue Kits for Department Canines Training Protocols Procedure IV Procedure V Procedure II Procedure VI Procedure VII Procedure III

POLICY

The Department shall establish protocols for member utilization of Naloxone Hydrochloride to treat opioid-involved overdoses in circumstances where persons are exhibiting indications of a suspected opioid overdose. Members are responsible for adhering to established protocols in the administration of Naloxone Hydrochloride.

DEFINITIONS

Health Care Practitioner: The designated Department Medical Director who has oversight of health care related training, equipment and practices.

Naloxone Hydrochloride: An opioid antagonist for reversal of respiratory depression and other opioid effects in persons who have become affected by heroin, morphine, or other synthetic opioids. It is a colorless and odorless liquid.

Opioid: A medication or drug derived from the opium poppy or a synthetic narcotic which mimics the effect of an opiate (e.g., morphine, methadone, codeine, heroin, fentanyl, oxycodone, hydrocodone).

Overdose Rescue Kit (ORK): The Department-issued opioid antagonist delivery system which provides Naloxone Hydrochloride via the nasal passage.

PROCEDURES

I. GENERAL GUIDELINES

- A. The Department's Emergency Opioid Intervention Program (EOIP) is primarily intended for rescue of affected members but does not prohibit administration of Naloxone Hydrochloride to any affected person.
- B. The Chief of Police is responsible for selecting a health care practitioner to have medical oversight of the EOIP.
 - 1. The health care practitioner must be licensed to practice medicine within the State of Florida.
 - 2. The health care practitioner is expected to provide:
 - a. Recommendations to affected policy and procedures,
 - b. Advice and/or assistance in obtaining Naloxone Hydrochloride, and
 - c. Approval of training related to the EOIP.
- C. The Internal/External Affairs Bureau Commander or designee is responsible for coordinating with the health care practitioner concerning the EOIP and such coordination should include:
 - 1. Training,
 - 2. Equipment (i.e., ORK),
 - 3. ORK application protocols,
 - 4. Applicable statutes and regulations,

- 5. Review of this written directive, and
- 6. Review of specific medical cases involving the application of Naloxone Hydrochloride.
- D. The Internal/External Affairs Bureau Commander or designee is responsible for ordering and maintaining an adequate inventory of ORKs for the Department.
- E. FS 381.887 does not create a duty or standard of care for a person to administer Naloxone Hydrochloride.

II. AUTHORIZATION TO CARRY AND STORAGE PROTOCOLS

- A. Each unit or section with assigned ORKs is responsible for the protocols listed below.
 - 1. Determining the appropriate storage of the ORKs, and:
 - a. Being mindful of limitations issued by the manufacturer such as not leaving an ORK in a motor vehicle or other location potentially exposing the ORK to excessive heat or cold, and
 - b. Ensuring members are adhering to established storage protocols.
 - 2. Ensuring ORK serial numbers and expiration dates are included in a quarterly report (i.e. Line Inspection or email).
- B. All members who are issued an ORK shall have it readily available (excluding Special Investigations Section members in a plain clothes capacity) while:
 - 1. On duty,
 - 2. Working a special event, or
 - 3. Working secondary employment.
- C. When a member who is issued an ORK is in uniform, the ORK shall be carried either:
 - 1. On their uniform belt within a Department approved holster, or
 - 2. Kept in a pocket of their uniform or readily available at their workstation.

- D. The only authorized storage locations for an ORK issued to a member are:
 - 1. Inside the member's residence,
 - 2. Their Department mailbox,
 - 3. Their Department-assigned locker,
 - 4. Their workspace, or
 - 5. The Watch Commander's Office.

E. The Property and Evidence Unit will have ORKs readily available in the Temporary Evidence Storage Room and in the Property and Evidence Unit work area.

III. TRAINING PROTOCOLS

- A. Only members who have successfully completed Department-approved EOIP training are authorized to carry an ORK and administer Naloxone Hydrochloride.
- B. The Internal/External Affairs Bureau Commander or designee is responsible for providing initial and refresher EOIP training every two years, addressing the following:
 - 1. An overview of FS 381.887,
 - 2. Victim assessment to identify the signs and symptoms of opioid-involved overdose,
 - 3. Standard precautions and infection control when administering Naloxone Hydrochloride,
 - 4. Carrying and storage of the ORK,
 - 5. Application of the ORK,
 - 6. Reporting and notification requirements, and
 - 7. ORK replacement protocols.

IV. APPLICATION PROTOCOLS

When handling a situation where a person is suspected of an opioid-involved overdose, members are responsible for the following:

- A. Security and Assessment
 - 1. Members are responsible for reasonably assessing the safety of the scene and the medical needs of the victim or person in medical distress (and unless already on scene or enroute, requesting emergency medical services [EMS]).
 - 2. Members are responsible for utilizing appropriate precautions as outlined in General Order 11 (Communicable Disease Control).
- B. Medical Aid and Recovery
 - 1. If needed, members shall provide CPR/rescue breathing.
 - 2. Application of the ORK is not a replacement for CPR.
 - 3. Members shall apply the ORK in adherence to Department-approved EOIP training.
 - 4. Members should be cognizant the person may regain consciousness in an agitated or combative state.
 - 5. Unless prevented by trauma to the person, members should place the person in a recovery position and provide supportive care after an ORK application.
 - 6. Members are responsible for notifying responding EMS personnel of the application of Naloxone Hydrochloride.
- C. Transportation –

Members shall ensure a person who received Naloxone Hydrochloride is transported to a medical facility by ambulance when available and expedient.

D. Notifications and Reports –

Notifications

1. Members are responsible for making prompt notification to their immediate supervisor, or other supervisor if more appropriate, after an ORK application.

2. Members are responsible for obtaining a replacement ORK from the Watch Commander or the Internal/External Affairs Bureau Commander or designee. It is the responsibility of the Watch Commander to send an email to the Training Section email group making notification of the ORK application. The Watch Commander shall document the issuance of the replacement ORK in the watch office ORK binder.

<u>Reports</u>

- 3. Members involved in an ORK application are responsible for ensuring the incident is documented in a Department offense report completed by a member.
- 4. A separate offense report is not required as mandated in subsection 3 above when the circumstances surrounding the ORK application are adequately documented in a Department offense report of another classification (e.g., If an ORK application occurs during an arrest incident, documentation of the application in the arrest report is sufficient).
- 5. In addition to the requirements of subsections 3 and 4 above, when a member is the recipient of an ORK application, their immediate supervisor (or other supervisor if more appropriate) shall ensure the following documents are completed and forwarded to Employee Resources:
 - a. Accident/Incident Field Reporting Form (SA-731), and
 - b. First Report of Injury or Illness Form (DSF-F2-DWC-1).
- E. ORK Disposal –

Members are responsible for properly disposing of a used ORK in one of the following locations:

- 1. One of the Department's designated biohazard waste containers (Property and Evidence Unit's Temporary Evidence Storage Room or the Forensic Unit),
- 2. An EMS biohazard waste container, or
- 3. A biohazard waste container at a local hospital.

V. AUDITS AND INVENTORIES

- A. The Internal/External Affairs Bureau Commander or designee is responsible for administrative oversight of ORKs assigned to each unit or section and shall maintain inventory control of all Department ORKs, to include utilization, expiration, or damage information for each kit.
- B. The Internal/External Affairs Bureau Commander or designee is responsible for the completion of an <u>annual inventory</u> of all Department ORKs.
 - 1. The annual inventory shall include the following:
 - a. A summarization of the quarterly audits,
 - b. The total number of in-stock ORKs,
 - c. The number of utilizations for the previous year,
 - d. Each ORK's identifying number (e.g., lot number, serial number),
 - e. Expiration date for each ORK, and
 - f. Any other relevant information (e.g., damaged kits, training needs, amending of this written directive).
 - 2. The annual inventory shall be documented on a numbered memorandum from the member conducting the audit to their immediate supervisor.

VI. INSPECTION AND REPLACEMENT

- A. It is the responsibility of the member who has an ORK to provide their immediate supervisor with the identifying number (e.g., lot number, serial number) and expiration date of the kit on their quarterly inspection.
- B. A member with an ORK which is no longer useable is responsible for promptly notifying their immediate supervisor. The Watch Commander or the Internal/External Affairs Bureau Commander or designee are responsible for providing replacement ORK's to members.
- C. The Internal/External Affairs Bureau Commander is responsible for communicating with the affected Bureau Commander concerning the need to reorder ORKs because of pending expiration dates of currently issued ORKs (as determined by the audits and inventories described in Section V above).
- D. Whenever a Bureau Commander determines a need for ORKs to be issued to their bureau, it is their responsibility to communicate with the Internal/External

Affairs Bureau Commander regarding the procurement process (to include cost assignment).

VII. OVERDOSE RESCUE KITS FOR DEPARTMENT CANINES

- A. An ORK is authorized for utilization on a Department canine (K-9).
- B. K-9 Handlers are authorized to administer Naloxone Hydrochloride to a Department K-9 only after being trained to do so by the Department's contract veterinarian.
- C. Except as noted below, all portions of this written directive are applicable to K-9 Handlers carrying an ORK for a Department K-9. Not applicable protocols include:
 - 1. Medical Aid and Recovery (subsection IV B above),
 - 2. Transportation (subsection IV C above), and
 - 3. First Report of Injury or Illness Form (subsection IV D 4 b above).

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