

Overdose Response Practice Drill

Why You Should Participate

- When faced with an overdose, it is important to act quickly and confidently.
- Practicing your response to an overdose will help keep your skills sharp and ready.
- Expansion of access to naloxone has saved lives. However, even if you've had naloxone training, it is important to refresh those skills on a regular basis through practice and [online training](#). Regular overdose drills can help, just as earthquake and fire drills are used to maintain knowledge and preparedness.

How to Participate

- Follow the attached guide to plan and conduct your drill.
- Encourage others to participate - get your colleagues, co-workers or others involved.
- Plan a time and place for your drill and let your team know.
- Use the feedback form below to report on your drill and assist in refining your response plan.

Where to Get More Information

Specific questions about overdose drills can be directed to Marika.Sandrelli@fraserhealth.ca (604) 219-2028 or Erin.Gibson@fraserhealth.ca (604) 362-2811.

For information about overdose response, please go to www.fraserhealth.ca/overdose

For information about how to access naloxone and training, go to www.towardtheheart.com

The following pages contain a toolkit to help you plan your own overdose drill.

OVERDOSE RESPONSE DRILL: PARTICIPATION CHECKLIST

Before the Drill

- Gather the necessary equipment
 - A naloxone training kit that includes naloxone
 - A flesh lump (like those used in CPR training)/orange to simulate giving naloxone
 - If you need practice supplies, contact Erin - Erin.Gibson@fraserhealth.ca or (604) 362-2811
 - Check the expiry date on your naloxone – while you will not be using naloxone in the drill, it is a good habit to regularly check expiry dates and replace six months prior to expiry
- Develop your overdose drill scenario
 - Determine where the drill will occur (choose somewhere where an overdose might occur)
 - Decide how you will raise the alarm and what the alarm will sound like.
 - Designate someone to play the role of the person overdosing and plan how they will play this role (unresponsiveness)
 - Plan how you will proactively work with or reassure observers who are not aware this is a drill (notices should be posted advising visitors or local residents that a practice drill will take place at the specified time and place)
- Prepare staff for the drill
 - Ensure all staff (including admin and site security) are familiar with your overdose response plan and the upcoming drill – note the time, date and location
 - Assign specific staff to roles (delegate tasks; (pretend to) call 9-1-1; meet fire/EHS at door; breaths; naloxone; crowd control)
 - Review **Key Refresher Tips for Overdose Reversal Using Naloxone** (below)
 - Watch **The First Seven Minutes**: <https://youtu.be/xPntWemg5Pc>

During the Drill

- A summary of the steps in responding to an opioid overdose are found in the below **Key Refresher Tips** document – remember, each task can be assigned to a different staff member

After the Drill

- Debrief with the team and the person playing the overdose role
 - Identify aspects that went well and areas for improvement
 - Support anyone impacted negatively by the drill
- Develop/adapt your Overdose Response Site Plan. If you do not have one, consider creating one; here is information to support you <https://towardtheheart.com/forb-sites>
- Please complete and submit the attached feedback form and email to Marika.Sandrelli@fraserhealth.ca This is important:
 - to guide you and your team through a debriefing process
 - to be counted as a participant in the exercise
 - to identify and arrange support for additional overdose response needs
- Plan to action any items that came out of the debrief or feedback form that would improve the site's overdose response including developing/adapting your site's Overdose Response Plan

OVERDOSE DRILL FEEDBACK FORM

Site Name _____ Community _____
Contact Name _____ Drill Date _____
Contact Email _____ Number of Participants _____

Please use the following questions to debrief and assess strengths and areas for improvement.

- | Y | N | N/A | |
|--------------------------|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Were the overdose response supplies easily located? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Was someone designated to do crowd control? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Did the person designated to phone 911 know the site address? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Was someone designated to do rescue breathing? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Was there a debrief with staff after the drill? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Did staff who DID participate in the drill have the skills/knowledge to respond to an overdose? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Do staff who did NOT participate in the drill have the skills/knowledge to respond to an overdose? |

LESSONS LEARNED

What worked well?

What needs improvement?

Are there any ways Fraser Health can support you in improving your preparedness for an overdose?

Please complete and submit this form by email to Marika.Sandrelli@fraserhealth.ca

KEY REFRESHER TIPS FOR OVERDOSE REVERSAL USING NALOXONE

TOPIC ESSENTIAL KNOWLEDGE

RECOGNITION OF OPIOID OVERDOSE

- SIGNS & SYMPTOMS**
 - **Key features: UNRESPONSIVENESS, FEWER THAN 12 BREATHS PER MINUTE**
 - **Potential presentations of overdose include extreme muscle rigidity, seizures, and other uncontrolled movements**
 - May also observe: (1) Slow, shallow breathing; (2) blue lips/ fingernails; (3) snoring/gurgling sound
 - **Naloxone only works for opioid overdose** (e.g. heroin, morphine, fentanyl, oxy, dilaudid, T3, methadone) – NOT for non-opioid depressants like alcohol or benzos **BUT if you don't know what someone took, naloxone won't harm them**

RESPONDING TO AN OPIOID OVERDOSE

- IMPORTANCE OF CALLING 9-1-1**
 - May require more medical interventions than you can provide
 - 9-1-1 can help walk you through response including chest compressions if required
 - **Good Samaritan Drug Overdose Law** provides some legal protection for individuals who seek emergency help during an overdose.
- CLEAR AIRWAY & VENTILATE**
 - Tilt head, lift chin up, plug nose and make a seal over the mouth, giving **ONE BREATH EVERY FIVE SECONDS** throughout the response **until person is breathing again** or until paramedics arrive
- GIVE I.M. NALOXONE**
 - **SWIRL AMPOULE** so all medication gets to the bottom – **otherwise only giving half a dose**
 - **AMPOULE MUST BE CRACKED OPEN AT THE SILVER OPC DOT** (One Point Cut)
<https://youtu.be/3o-E26rmWA?t=2m10s> - practice ampoules may be designed differently.



- EVALUATE EFFECTS (for 3 min.) & GIVE MORE NALOXONE IF NEEDED**
 - **Continue to give breaths FOR 3-5 MINUTES** (40 breaths equals approximately 3 minutes) OR until they are breathing again on their own.
 - **If no response after 3-5 minutes, can give another dose of naloxone**
 - **Continue breaths** until the person is breathing on their own OR until paramedics arrive
- AFTERCARE**
 - Overdosing can be an out of control frightening experience
 - Person may not remember overdosing – explain what happened
 - If person does NOT go to hospital try to have someone monitor them at least 2 hours and do NOT allow them to take more opioids (could overdose again)

Naloxone is light and heat sensitive. Please do not store in vehicle.

Training: <http://www.naloxonetraining.com/>

Videos: <http://towardtheheart.com/naloxone-training>