

# OFFICE OF THE CHIEF OF POLICE

## NOTICE

1.11

March 29, 2023

**TO:** All Department Personnel

**FROM:** Chief of Police

**SUBJECT:** NALOXONE HYDROCHLORIDE (NARCAN) PROGRAM - REVISED

The purpose of this Notice is to revise procedures related to the Naloxone Hydrochloride (Naloxone) nasal spray program (opioid antagonist, commonly distributed under the trade name “NARCAN”). These revisions establish the training criteria and the requirement to equip Naloxone in a location accessible to all field personnel. This Notice supersedes Office of the Chief of Police Notice, *Naloxone Hydrochloride (NARCAN) Program*, dated December 18, 2018.

The Centers for Disease Control and Prevention (CDC) designates opiate overdose as a major public health concern in the United States. Overdose rates have increased roughly five-fold since 1990 and resulted in an average of 115 opioid-related deaths a day in 2018. The CDC attributes the rise in drug overdose deaths to higher use of prescription painkillers and increasing numbers of overdoses of cocaine, heroin, and prescription sedatives. Each day, more than 1,000 people are treated in emergency rooms for not using prescription opioids, as directed.

### **PROCEDURE:**

- I. TRAINING.** Prior to Departmental use and deployment of Naloxone in the field, Department personnel shall complete Department-approved Naloxone training from an approved Department trainer. For purposes of this Notice, a Department-approved trainer is a person who has received “train the trainer” instruction and is First Aid trained via the California Commission of Peace Officer Standards and Training (POST), or who holds a current Emergency Medical Technician (EMT) certification.

**Note:** All Department personnel, including civilians, may provide training once they complete the Department-approved training. Additionally, all trained Department personnel, including civilians, may administer Naloxone.

Initial training shall be in person and consists of a Department-approved video, presentation, competency verification for skill sets and procedures, skill sheet, and written examination. Annual training does not need to be in person (i.e., Department-approved training video).

- II. ALL TRAINED PERSONNEL RESPONSIBILITIES.** All Department personnel assigned to a geographic Area/division who have been trained and are equipped with Naloxone shall adhere to the following procedures:

- A. REQUIREMENT TO EQUIP.** Department personnel who have successfully completed the necessary Department training on the use of Naloxone shall be issued one Naloxone pack and shall secure it in an accessible location while working field operations. For the purposes of this Notice, a Naloxone pack consists of one box containing two nasal cartridges of Naloxone.
- B. EQUIPMENT MAINTENANCE.** Officers shall ensure the Naloxone cartridges are:
- Stored in a cool location defined as a controlled room temperature of 59°F to 77°F (15°C to 25 °C). Short exposures to temperatures between 4°C to 40°C are permitted (39°F to 104°F). Do not freeze. Protect from light;
  - If a cartridge is nearing its expiration date, the Department employee shall notify their training coordinator and exchange the cartridge no sooner than seven calendar days before the expiration and no later than the date of expiration; and,
  - If lost or damaged, an officer shall notify their supervisor as soon as they become aware of the lost or damaged cartridge.
- C. ADMINISTRATION.** When trained and equipped Department personnel encounter a subject suffering or perceived to be suffering from an opioid overdose, and elect to provide immediate medical intervention, prior to the arrival of emergency medical services, personnel shall:
- Ensure that a Rescue Ambulance has been requested;
  - Deploy the Naloxone in accordance with Department training; and,
  - If Naloxone is deployed, dispose of any used Naloxone cartridge(s) in the Rescue Ambulance's biohazard container and obtain a Naloxone replacement cartridge(s) from their Training Coordinator.
- Example:** An officer administers one dose of Naloxone and then obtains a replacement of the one Naloxone cartridge from their Training Coordinator.
- Note:** A Department employee's decision whether or not to administer Naloxone shall not be the sole basis to initiate a complaint or frame an additional allegation of negligence. No adverse employment action shall arise from a deviation of any Naloxone policy, procedure or training, unless the allegation(s) involve serious misconduct.
- D. DOCUMENTATION.** Department personnel shall document the administration of Naloxone to a subject who is not in custody on a Narcan Deployment Report (see attached form set). The report can be accessed through the Department Homeless Coordinator's Office (DHC) User Guide application, available through a Department mobile device or the Department's Local Area Network (LAN). Officers shall answer all questions within the report to include the following:

Source of Activity, Descriptors, Observations that an overdose has likely occurred, any visible effect the medication had on the subject, witness information, and identifying information of Los Angeles Fire Department personnel. In addition, Department personnel shall document the deployment of any Naloxone on a subject in custody under the “Medical Treatment/Injuries” heading of an Arrest Report, Form 05.02.00.

**Note:** The officer submitting the report will automatically receive a copy of their submission via Department email. That email shall be forwarded to the Watch Commander and Area Training Coordinator.

**E. DISTRIBUTION.** The Narcan Deployment Report or a copy of the Arrest Report shall be provided to the Watch Commander to be included as an attachment to the Watch Commander’s Daily Report, Form 15.80.00.

**F. LIABILITY.** California Civil Code Section 1714.22(f) provides that persons who are trained in accordance with the requirements of California Health and Safety Code Section 1797.197, and who act with reasonable care and good faith in administering Naloxone to a person experiencing or suspected of experiencing an opioid overdose shall not be subject to professional review, liable in a civil action, or subject to criminal prosecution for such administration.

**III. SUPERVISOR’S RESPONSIBILITIES.** Supervisors who are assigned to a geographic Area/division equipped with Naloxone shall:

- Remind Department personnel who are equipped with Naloxone that they must have already completed Department-required training and that they must read and adhere to any relevant applicable policies and procedures published by the Department on updated procedures;
- When notified of any missing or damaged equipment, investigate for evidence of gross negligence or willfulness in accordance with Department Manual Section 4/282, and ensure that appropriate reports and/or corrective actions are taken; and,
- Ensure that Department personnel maintain and have the Naloxone pack readily available during assigned field duties.

**IV. WATCH COMMANDER’S RESPONSIBILITIES.** Watch commanders assigned to a geographic Area/division equipped with Naloxone shall:

- Ensure Department personnel adhere to the policies and procedures regarding the use and deployment of Naloxone. This should be accomplished through annual training of Department personnel (i.e., roll call training, supervisory training, divisional training days, or by the Department-approved training video);

- Assign a supervisor to investigate any evidence of grossly negligent or willful damage or loss of Naloxone cartridges; and,
- Attach the original Narcan Deployment Report or a copy of any Arrest Report documenting the use of Naloxone to the Watch Commander's Daily Report.

**V. TRAINING COORDINATOR'S RESPONSIBILITIES.** Training coordinators assigned to a geographic Area/division equipped with Naloxone shall:

- Ensure that Department personnel in their Area/division receive Department-approved Naloxone training prior to its deployment and use in the field;
- Document the training and the acknowledgment of training for each Department personnel in the Department Learning Management System (LMS) Naloxone;
- Provide annual training of Department personnel in the use and deployment of Naloxone through roll calls, supervisory training, divisional training days, and formal in-service training or by viewing the Department-approved training video;
- Evaluate Naloxone cartridges that are being issued to ensure the expiration dates located on the bottom of the boxes are not expired prior to issuance;
- Notify the Naloxone Program Coordinator of any Naloxone cartridges that are expired or near the printed expiration date;
- Deliver all expired medication to the Naloxone Program Coordinator for exchange;
- Forward a copy of all Narcan Deployment Reports and Arrest Reports, which document the deployment of Naloxone, to the Naloxone Program Coordinator; and,
- Request additional Naloxone packs through their commanding officer to the Naloxone Program Coordinator using Supply Form, 15.11.00. Once approved by the Naloxone Program Coordinator, collect additional Naloxone packs at Supply Division.

**VI. COMMANDING OFFICER'S RESPONSIBILITIES.** Area/division commanding officers assigned an Area/division equipped with Naloxone shall ensure personnel adhere to this Notice.

**VII. BUREAU/GROUP COMMANDING OFFICER RESPONSIBILITIES.** Bureau/group commanding officers assigned to a bureau/group equipped with Naloxone shall ensure compliance with this Notice.

**VIII. NALOXONE PROGRAM COORDINATOR.** The Department Homeless Coordinator, or their designee, shall have the ancillary duty as the Department Naloxone Program Coordinator and shall:

- Coordinate prescription medication storage with the Department's Supply Division;
- Ensure that the Areas/divisions are supplied with valid medication;
- Replace expired Naloxone cartridges;
- Review Narcan Deployment Reports and Arrest Reports documenting Naloxone usage to track program implementation and success; and,
- Track Naloxone usage and report accordingly.

**AUDIT RESPONSIBILITY:** The Commanding Officer, Audit Division, shall review this directive and determine whether an audit or inspection shall be conducted in accordance with Department Manual Section 0/080.30.

If you have any questions regarding this matter, please contact the Unified Homeless Response Center or the Department Homeless Coordinator's Office at (213) 486-6633.



MICHEL R. MOORE  
Chief of Police

Attachment

DISTRIBUTION "D"

## View results

Respondent

15 Jacob Underwood

09:13

Time to complete

1. Date and Time of Naloxone Hydrochloride (NARCAN) Deployment:

03/30/2017 1200 Hrs

2. Complete incident number:

1703300012345

3. Location of deployment:

2nd St. / Spring St.

4. Officer who deployed and partner Officer:

Officer Smith #40001, partner Officer Johnson #39000

5. Radio Call Code and comments:

Radio Call of 390M at 2nd St. / Spring St.

6. Description of Subject:

Male/White, wearing a brown jacket, blue jeans, and no shoes.

7. Observation that an overdose had likely occurred:

*(EX: -We observed a depleted hypodermic needle with an orange cap and a burnt spoon lying on the ground next to the Subject.  
-We observed an empty orange pill bottle with a label that read "oxycodone")*

A. We observed a depleted hypodermic needle with an orange cap and a burnt spoon lying on the ground next to him.

8. Any visible effect the medication had on the Subject:

*(EX: Based on the above observations, we administered one dose of Naloxone Hydrochloride.  
-we observed the subject's chest begin to rise and fall  
-we heard the subject begin to breathe again and/or we observed the subject begin to stir.)*

We observed the subject's chest begin to rise and fall and heard breathing sounds.

9. Witness information:

(EX: Sarah Kimber Cell# 213-486-6050)

Wit- Kimber, Sarah Phone(213) 486-6050

10. Rescue ambulance information:

-RA# \_\_\_\_\_

-Paramedic #1: \_\_\_\_\_

-Paramedic #2: \_\_\_\_\_

-We advised Paramedic \_\_\_\_\_ Naloxone was administered at \_\_\_\_\_ hours.

-RA # transported to \_\_\_\_\_ California Hospital.

RA 368, Paramedic John #45974, and EMT Ken #99987, responded. We advised time and dosage of NARCAN deployment. RA 368 transported to California Hospital.

11. What was the result of your deployment of NARCAN:

(EX: Subject recovered, deceased, other...)

Subject was transported and DR. Smith stated subject would recover.