

OFFICE OF THE CHIEF OF POLICE

NOTICE

1.11

December 18, 2018

TO: All Department Personnel

FROM: Chief of Police

SUBJECT: NALOXONE HYDROCHLORIDE (NARCAN) PROGRAM

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 the Naloxone in a location accessible to all field personnel. This Notice supersedes Office of Operations Order No. 7, *Naloxone Hydrochloride (NARCAN) Program*, dated November 20, 2017.

The Center 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 a 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 on 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 his or her 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 his or her supervisor as soon as he or she becomes 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 his or her Training Coordinator.

Example: An officer administers one dose of Naloxone, and then obtains a replacement of the one Naloxone cartridge from his or her 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 on a subject who is not in custody on an Employee's Report, Form 15.07.00. Officers shall include in the narrative of the Employee's Report: the 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 or

Contact. 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 (See attached Employee’s Report Exemplar).

- D. DISTRIBUTION.** The original Employee’s Report or a copy of the Arrest Report shall be provided to the watch commander to include as an attachment to the Watch Commander’s Daily Report, Form 15.80.00.
- E. 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;
- Attach the original Employee’s Report or a copy of any Arrest Report, documenting the use of Naloxone to the Watch Commander’s Daily Report; and,
- Forward a copy of the Employee’s Report or Arrest Report, documenting the administration of Naloxone, to the Area/division training coordinator.

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 acknowledgement 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;
- Document the annual training update in the Department LMS;
- Provide regular briefings to the watch commanders and commanding officers regarding deviations in policies and procedures and the corrective actions taken;
- 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 Employee's 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 his or her 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 Employee's 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.

Should you have questions regarding this matter, please contact the Department Homeless Coordinator, Office of Operations, at (213) 486-6050.

A handwritten signature in black ink, appearing to be 'Michel R. Moore', written over the printed name.

MICHEL R. MOORE
Chief of Police

Attachment

DISTRIBUTION "D"

EMPLOYEE'S REPORT

15.07.00 (04/62)

DR _____

SUBJECT

Naloxone Hydrochloride (NARCAN) Deployment - EXEMPLAR

DATE & TIME OCCURRED

03-30-17 1500

LOCATION OF OCCURRENCE

2nd Street/Spring Street

DIVISION OF OCCURRENCE

CENTRAL AREA

TO: (Rank, Name, Assignment, Division)

Captain Timothy Harrelson, Patrol Commanding Officer, Central Area

DATE & TIME REPORTED

03-03-17 1500

DETAILS: (IF MORE SPACE IS NEEDED GO TO NEXT PAGE)

1: SOURCE OF ACTIVITY:**Example:**

On 03/30/2017, at approximately 1200 hours, my partner Officer Smith, Serial No. 40001, and I, Officer Johnson, Serial No. 39000, were assigned to Central Area Patrol. We responded to a radio call of an intoxicated man (390 male) at 2nd Street and Spring Street.

2: DESCRIPTORS:**Example:**

We observed a male white wearing a brown jacket, blue jeans, and no shoes.

3: OBSERVATIONS THAT AN OVERDOSE HAD LIKELY OCCURED:**Example:**

- a) We observed a depleted hypodermic needle with an orange cap and a burnt spoon lying on the ground next to him;
- b) We observed an empty orange pill bottle with a label that read "oxycodone;"
- c) We observed a piece of tin foil with a trail of black tar like residue and burn marks; and/or,
- d) We observed punctures on his arm.

4: ANY VISIBLE EFFECT THE MEDICATION HAD ON THE SUBJECT:**Example:**

Based on the above observations, we administered one dose of Naloxone Hydrochloride.

- a) We observed the subject's chest begin to rise and fall;
- b) We heard the subject begin to breathe again; and/or,
- c) We observed the subject begin to stir.

5: WITNESS INFORMATION:**Example:**

Sarah Kimber (Cell Phone: 213-486-6050)

6: IDENTIFYING INFORMATION OF LAFD OR HOSPITAL STAFF ASSUMING RESPONSIBILITY FOR MEDICAL TREATMENT FOLLOWING THE CONTACT:**Example:**

RA368, Paramedic John, Serial No. 45974, and EMT Ken, Serial No. 99987, responded. We advised them of the time and dosage of Naloxone Hydrochloride we administered. RA368 transported to California Hospital.

DATE & TIME TYPED	DIVN. RPTG.	CLERK	EMPLOYEE(S) REPORTING	SERIAL NO.	DIVN.
SUPERVISOR APPROVING			SERIAL NO.		