

# Naloxone

## 434.1 PURPOSE AND SCOPE

Redding Police personnel are occasionally the first responders to a person who is experiencing or suspected of experiencing an opioid-related overdose. The purpose of this policy is to establish procedures to govern an "Overdose Prevention Pilot Program" through the deployment of Naloxone by Redding Police Department personnel. The objective is to reduce injuries and fatalities resulting from opioid overdoses, in the instances where emergency medical personnel have not yet arrived.

The initial phase of the "Overdose Prevention Pilot Program" will be a trial phase of six months. At the end of this trial phase, the program's effectiveness will be evaluated by personnel from the Shasta County Public Health and the Redding Police Department.

## 434.2 POLICY

It is the policy of the Redding Police Department that officers shall be trained to administer Naloxone in accordance with mandated training guidelines established by the Sierra Sacramento Valley EMS Authority and Shasta County Public Health Department pursuant to Health & Safety Code 1797.197.

- (a) Officers who are trained in accordance with mandated training guidelines shall deploy with Naloxone kits in the field. However, the officer will retain the discretion to administer or not administer Naloxone to persons experiencing or suspected of experiencing opioid-related overdoses. There is no legal obligation to administer Naloxone.
- (b) Pursuant to Civil Code section 1714.22, officers who administer Naloxone, are protected from civil and criminal liability if they "act with reasonable care" and "in good faith." This is accomplished by administering Naloxone with established and approved training protocol.

## 434.3 PROGRAM COORDINATOR

The Field Operations Division Commander will serve as the Department's Program Coordinator and will work in collaboration with Shasta County Public Health. The Program Coordinator may designate a Program Manager to provide support to the Program Coordinator. The Program Coordinator or his/her designee will be responsible for tracking, storage, maintenance, replacement of Naloxone kits, and reporting Naloxone usage to the appropriate agencies.

## 434.4 TRAINING

Officers may not administer Naloxone without the completion of the Department approved training. The initial training will include, at a minimum, an overview of California Civil Code 1714.22, patient assessment (signs/symptomology of overdose), universal precautions, rescue breathing, seeking medical attention, and the use of intra-nasal Naloxone. Upon completion of

## *Naloxone*

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training, officers will have their training recorded with the Program Coordinator and Training Sergeant. Officers will receive update training as deemed appropriate by the Program Coordinator.

### **434.5 NALOXONE KITS**

Naloxone kits will include at a minimum: gloves, mask, eye protection, atomizer, and Naloxone. Officers authorized to carry these kits shall have them either on their person or available in their assigned vehicles.

### **434.6 KIT STORAGE**

At the beginning of each patrol shift, a shift supervisor will issue a Naloxone kit for each beat officer who has completed the Department approved training. At the end of each shift, the Naloxone kits are to be returned to the shift supervisor. Kits will not be stored in patrol vehicles for extended periods of time.

### **434.7 NALOXONE USE**

Officers who have completed the required Naloxone administration training are authorized to administer Naloxone when they believe someone is experiencing an opioid-related overdose. Personnel will treat the incident as a medical emergency and shall follow these steps when performing this intervention:

- (a) Confirm emergency personnel are responding;
- (b) Maintain universal precautions;
- (c) Perform patient assessment;
- (d) Determine unresponsiveness;
- (e) Update SHASCOM of potential patient overdose condition;
- (f) Follow Naloxone use protocol;
- (g) Immediately notify responding emergency personnel that Naloxone has been administered; and
- (h) Notify patrol sergeant.

### **434.8 DOCUMENTATION OF NALOXONE DEPLOYMENT**

Upon deployment of Naloxone, Officers shall complete a police report. Naloxone usage shall be documented along with the notification of the usage to responding EMS personnel and the shift supervisor. When detailing the nature of the incident, the care the patient received and the fact Naloxone was deployed shall be included. Prior to the end of shift, a Naloxone Utilization Patient Care Report shall be completed and provided to the on-duty shift supervisor and the Program Coordinator.

# Redding Police Department

RPD Policy Manual

## *Naloxone*

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### **434.9 MAINTENANCE AND REPLACEMENT**

The daily inspection of Naloxone kits will be the responsibility of the officer deploying the kit. The maintenance and pre-placement of Naloxone kits will be the responsibility of the Program Coordinator or his/her designee. Used, lost, expired, or damaged Naloxone kits will be reported to the shift supervisor and returned to the local Program Manager for replacement.