

This resource was created to help facilities implement the Nursing Home Naloxone Policy & Procedure Toolkit created by IPRO QIN-QIO. This checklist provides an overview for a process to successfully implement select toolkit contents.

ND MISUSA

Scan this QR Code or click the link to the Nursing Home Naloxone Toolkit, IPRO-QIN-QIO Resource Library:



https://qi-library.ipro.org/2023/01/31/ nursing-home-naloxone-policy-andprocedure-toolkit/

Initial Discussions and Policy Review

- □ Communicate with facility executive leadership/director of nursing/medical director to assess for the opportunity to implement policies in the toolkit.
- □ Communicate with facility consultant pharmacist and provider pharmacy.
 - $\hfill\square$ Share the toolkit and review the contents.
 - □ Discuss what type of naloxone will be used (nasal spray or intramuscular injection).
- □ Customize "Tips for Overdose Reversal Using Naloxone" section of toolkit (see below to copy and paste tips depending on type of naloxone).
 - □ Specify the type of naloxone and how to use it (see links to training videos below).
- Review all necessary policy paperwork for the facility by completing the appropriate sections and obtaining the authorized signatures.

Determine Storage and Access

- □ Identify the location where naloxone will be kept (locked medicine box, on a medication cart, in an automated dispensing system, in a medication room), and who has access.
- Determine any deterrents that may impede someone from retrieving the naloxone and how you will address that in the case of an emergency (ex: CNA reports to RN regarding patient, RN has access to naloxone).

Education and Training

- □ Select who will be receiving the training (all staff, nursing staff, direct patient care staff, train-the-trainer).
- Decide whether staff must complete the competency training form. If yes, where will these be kept?
 Will new staff be trained? If yes, how?
- □ Training: Conduct in-service training for staff.
 - □ Highlight information that is relevant to the individuals receiving the training.
 - Provide a sample to visualize the type of naloxone that facility is using (nasal spray or intramuscular injection).

Customization for "Tips for Overdose Reversal Using Naloxone" section of toolkit:

Please copy and paste the correct form of naloxone into your "Tips" sheet.

Naloxone injection 0.4mg/mL given IM

- Inspect vial for particulate matter or discoloration. Solution should be clear.
- Use 1-1/2 inch needle for intramuscular injection. Inject deeply into anterolateral thigh or deltoid. Aspirate prior to injection to avoid injection into a blood vessel.
- May be repeated every 2 to 3 minutes per maximum recommended dose.

Naloxone (Narcan®) Nasal Spray

- Hold the naloxone nasal spray with your thumb on the bottom of the plunger and your first and middle fingers on either side of the nozzle. Place the individual in supine position, do not prime, insert the cone into the nostril, give a short vigorous push into the nostril.
- Administer one dose of naloxone intranasally in 1 nostril.
 - » If the individual does not respond in 2 to 3 minutes, or responds and then relapses into respiratory depression, administer additional doses of naloxone nasal spray, using a new nasal spray with each dose.
 - » Additional doses of naloxone nasal spray may be given every 2 to 3 minutes until emergency medical assistance arrives.

Additional Resources

How to use Naloxone:

https://towardtheheart.com/naloxonetraining (SAVE ME Steps for NaloxoneTraining.com)



University of Rhode Island Training Module:

https://rise.articulate.com/share/Snxog2zqD1_ VU5cxJsqs-b_xUHBbATUm#/

Naloxone Nasal Spray Video:

https://www.youtube.com/watch?v=xa7X00_ QKWk



CMS State Operations Manual Appendix PP Guidance to Surveyor for Long Term Care Facilities, Rev. 211, 2/3/23 (cms.gov) (Pages 338 & 413 reference naloxone):

https://www.cms.gov/medicare/ provider-enrollment-and-certification/ guidanceforlawsandregulations/downloads/ appendix-pp-state-operations-manual.pdf

How to Respond to an Overdose Resource:

https://www.canva.com/design/ DAFbyaShQcc/5VuuupDuD8uK_ZgMzIPpNA/ view?utm_content=DAFbyaShQcc&utm_ campaign=designshare&utm_ medium=link2&utm_source=sharebutton



This material was prepared by IPRO and modified by Alliant Health Solutions, a Quality Innovation Network – Quality Improvement Organization (QIN – QIO) under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services (HHS). Views expressed in this material do not necessarily reflect the official views or policy of CMS or HHS, and any reference to a specific product or entity herein does not constitute endorsement of that product or entity by CMS or HHS. Publication No. 12SOW-AHS-QIN-QIO-TOI-NH-3728-05/10/23



Quality Innovation Network -Quality Innovation Network -Quality Improvement Organizations CENTERS FOR MEDICARE & MEDICAID SERVICES SIGULITY IMPROVEMENT & INNOVATION GROUP

www.quality.allianthealth.org

