

Opioid Overdose Response Program Implementation Guide



Table of Contents

Introduction	p.3
Developing an Opioid Overdose Response Program	p.4
Primary Steps	p.5
Plan	p.6
Assess Workplace Risk	p.6
Gain Cross-Organizational Buy-In	p.7
Develop Policies and Procedures	p.8
Provide	p.12
Train	p.13
Maintain	p.14
Ongoing Policy and Naloxone Maintenance	p.14
Ongoing Engagement	p.14
Next Steps to a Safe, Healthy, Well Workplace	p.15
Appendix: Opioids, Overdose, Naloxone, Recovery Definitions	p.16



Introduction

In <u>2022</u>, nearly one in 10 people who died at work died from an overdose. Overdose deaths happen in all workplaces, across all employee demographics, industries and occupations. On average, the <u>largest death rates</u> have been in the construction, manufacturing, and the trade, transportation and utilities industries.

Workplaces are a critical partner in saving lives from opioid overdose—and not just at the worksite. In fact, training people to recognize and respond to a potential opioid overdose at work not only improves workplace safety but can impact the community because workers take these skills off-the-job, too. While not specific to just workplaces, 65% of overdose deaths had at least one potential opportunity for intervention and nearly half (43%) of overdose deaths had another person present.

This guide is meant to help you gain confidence and competence in addressing opioid overdose in your workplace. You can use this guide alongside the Workplace Wellbeing Hub and Respond Ready Workplace resources. There are many ways your organization can prevent and respond to overdose. This guide provides an example process you can use to create an opioid overdose response program and connects you with resources you may need as you develop your program.

"An overdose can happen anywhere, to anyone. We need stakeholders in every community across the country to help ensure preventable deaths are avoided. Organizations and businesses—big or small, public or private—should be ready to help keep their employees, customers and communities safe. To help more Americans save lives, we are encouraging leaders to commit to train employees on opioid overdose reversal medications [naloxone], keep the medications in first aid kits and distribute medications to employees and customers so they might save a life at home, work or in their communities. Together we can save lives and beat the overdose crisis."

The White House Challenge to Save Lives from Overdose
March 2024

Developing An Opioid Overdose Response Program

There are many ways to develop and implement an opioid overdose response program at your workplace. Now that multiple naloxone products are available over-the-counter, it's the perfect time to start. A program can run the spectrum from basic stocking of naloxone and training of employees to a comprehensive <u>recovery supportive workplace</u>. This implementation guide offers suggestions for how your workplace could develop a program.

Basic Components	Advanced Components
 Naloxone is available onsite, alongside other first aid materials Select staff are trained in how to recognize and respond to an opioid overdose emergency Have naloxone policies and procedures regarding storage, access, ongoing training 	 Naloxone is available onsite in multiple, accessible locations—including those used by the general public when applicable All staff are trained how to recognize the signs of a possible opioid overdose and how to act during an opioid overdose emergency Have naloxone policies and procedures regarding storage, access, ongoing training Have post-overdose response policies and support for staff responding to an opioid overdose at the workplace Have recovery supportive post-overdose response policies and support for staff who overdose at work Provide naloxone to staff to carry with them to respond to an opioid overdose emergency in their personal or community lives



Primary Steps

These steps can help guide your organization in developing an opioid overdose response program at your workplace. There is overlap across each step and the steps are meant to serve as a general guidance. Your organization may choose to go through the implementation process differently. Or to adopt some pieces rather than others.

Plan:

- Assess workplace risk
- Gain cross-organizational buy-in
- Develop policies and procedures

Provide:

• Have naloxone easily available across your workplace

Train:

 Train workers on the signs of an opioid overdose and how to use naloxone

Maintain:

Evaluate the program and set it up for long-term success



PLAN: There are three fundamental components to this step—assess workplace risk, gain cross-organizational buy-in and develop policies and procedures. As you plan your program, you can use this <u>FAQ document</u> to help answer common questions that might come up throughout this process.

Assess workplace <u>risk:</u> People in every workplace, industry and occupation group are at risk for an opioid overdose. Understanding your organization's level of risk can help garner buyin across your workplace. A higher level of potential risk may mean you need to incorporate additional components of a <u>Recovery Supportive Workplace</u> and offer more support, resources and <u>benefits</u> to help prevent opioid use, misuse, addiction and overdose.

Use data across your industry and community to assess your risk:

Accommodation and food services Agriculture, forestry, fishing, and hunting Arts, entertainment, and recreation Construction 6.0 Education services Finance and insurance Healthcare and social assistance Information Management, administrative, and waste services Manufacturing Mining 60.9 Other services (except public administration) Professional, scientific, and technical services Public administration Real estate, rental, and leasing Retail trade Transportation and warehousing Utilities Wholesale trade 60 90 150 Drug overdose death rate per 100,000 workers cedents aged 16-64 in 46 states and New York City with paid civilian usual industries is show age using 10-year age categories. National Health Interview Survey administrative, support, e combined to align with the Current Population Survey's management, administrative, and w TES: The overall drug overdose death rate among 25 100,000 workers. Death rates are directly standardiz-nagement of companies and enterprises industry gross specifical Notes in this report for more information. URCE: National Center for Health Statistics, National cs, National Vital Statistics System, Mortality, 2020

Figure 2. Drug overdose death rates among U.S. decedents aged 16–64, by usual industry group: 46 states and New York City, 2020

NATIONAL VITAL STATISTICS REPORT, Vol. 72, No 7, August 2023

Resources to use while exploring your workplace risk can include:

- Substance Use Cost Calculator
- o SUDORS dashboard
- Public Health Alerts: many local public health departments offer opportunities to sign up for alerts when overdose levels spike in your area, find your local public health department here
- o Injury Facts Overdose Data
- Risk Assessments for Public Spaces

If your workplace engages with the public, this is an additional risk for opioid overdose you will need to factor into your policy and the amount of naloxone you keep at your worksite(s).

Use internal data to assess your risk:

While large-scale industry and community-level data are helpful in understanding your general risk, collecting and analyzing your own data can help, too. Track and analyze your employee support programs, like your <u>EAP</u>. Also, review job hazard analysis data to look for general job stressors, injury associated with prescription opioid use and other risks. Other useful data to track might be your healthcare costs, workers' compensation costs, employee turnover or absenteeism. *Include a data collection and analysis component to your policy, too.*

Additional risk assessment resources:

- o NIOSH Risk Assessment Webpage
- o Opioid Risk Assessment, Industrial Safety Trainers (Canadian resource)
- SAMHSA Overdose Prevention and Response Toolkit

Gain cross-organizational buy-in: Two concrete steps to assure cross-organizational buy-in are forming a working group and communicating regularly across your organization.

Form a working group including representatives from across the organization and greater community to help develop your opioid overdose procedures. As you work to set up your working group, reference this <u>buy-in memo template</u> to help recruit members and interest.

Working group participants could include:

- Human resources staff
- EHS/Occupational health staff
- DEI committee representation
- Health and safety committee representation
- Workplace first responders
- Union representatives
- Employees across all levels of the organizations, including shifts, if applicable
- Recovery group or recovery community representatives find an initiative near you

Your working group should mirror your worker population, include diverse perspectives, meet at inclusive times and provide intentional opportunities for multiple-level buy-in across your organization.

- People with lived experience
- Public health
- Legal representation (if not as a formal part of your working group, consider having legal representation for reviewing policies and procedures as you develop them)

Along with developing a working group, it is important to regularly communicate with staff and offer additional opportunities to participate in the opioid overdose response planning process. Be sure to communicate across your organization transparently, intentionally and consistently. Adapt information to meet the needs of non-English speaking or reading workers or the general literacy level needs of the workforce.

Communication and engagement could include:

- Communication via multiple methods (newsletter, text message, email, signage, etc.) about any opportunities for workers to engage with the opioid overdose response planning and implementation process
- Offer concrete opportunities for all workers to provide insight about their opioid overdose response needs, outside of the formal workgroup
- Provide multiple pathways for workers to review and respond to the proposed policies and procedures
- Inform workers regularly about any workplace changes
- Relay information, meeting notes and outcomes of the workgroup to all workers
- Provide information about opioid overdose and naloxone in safety talks, newsletters, emails, during employee training sessions, onboarding, workplace manuals, safety manuals, company websites, posters, etc.
- Update staff about anti-stigma language changes across the organization

Develop policies and procedures: After you have assessed your risk, gained buy-in and incorporated diverse and inclusive input, it is time to focus on policies and procedures. Your organization can create a unique policy or incorporate opioid overdose response and naloxone into your existing emergency preparedness or other policies. As you develop your policies and procedures, it's important to be mindful of local, state and federal laws. Work with a legal professional and reference this

Find opioid overdose response <u>policy</u> <u>samples</u> in the Workplace Wellbeing Hub.

<u>state-by-state report</u> and the <u>accompanying one-pager</u> to determine how to best prepare your workplace.

Note: the policy components below are framed around nasal spray naloxone. If your organization chooses to supply another type of naloxone product, you should adjust your program accordingly.

Policy and Procedure Component: Recommended quantities of naloxone

- The minimum quantity of naloxone doses you should have readily available per opioid overdose event is two (regardless of product and strength). A person experiencing an opioid overdose may need more than one dose of naloxone. Nasal spray naloxone typically comes as a two-pack.
- The number of two-packs your workplace should have on site depends on your workplace needs. There are varying first aid kit and emergency response regulations and guidelines across regions and industries, making conducting your workplace-specific risk assessment critical.
- OSHA recommends that the number of first aid kits should account for the nature of the industry, number and concentration of employees and the workplace's specific risk factors.
- You could base the amount of naloxone necessary at your site on the number of first aid kits. Or you can identify the most appropriate number of opioid overdose response kits you should have in your organization.
- The recommended number of doses per opioid overdose response kit should be related to opioid exposure or incidents, type of industry, specific risk factors, number of employees and even distance between different high-risk activities.
- In industries with inherent risks, such as lone workers or small groups, it's particularly crucial to consider the inclusion of naloxone in each first aid kit or other accessible locations. In scenarios where there is a regulation requiring a first aid kit per work team or vehicle, include naloxone in these kits.
- If your risk assessment determines your risk for opioid overdose is high, you may need more than one two-pack per each naloxone storage area.
- While the United States does not yet have specific naloxone requirements, other countries
 have some examples to follow. In <u>Ontario, Canada</u>, there's a <u>requirement</u> for workplaces at
 risk of opioid overdoses to provide at least one naloxone kit for every 50 employees. This
 approach emphasizes the importance of readiness to address potential opioid overdose
 emergencies and could serve as a benchmark for your workplace.

Policy and Procedure Component: Naloxone storage and maintenance

- Follow the product label and instructions to ensure proper storage and maintenance of naloxone.
- Store at room temperature. Naloxone should not get too hot or too cold.
- Naloxone typically expires after four years. (It still may be effective after the expiration date. Expired naloxone may be better than no naloxone, if you are not able to replace the expired naloxone ahead of its expiration date.)
- If your organization has a current policy regarding how often your first aid kits or other emergency response equipment are checked for restocking or expiration dates, adding naloxone to this routine may be the easiest solution.

The minimum amount of naloxone you should have available in case of an opioid overdose event is two doses (naloxone nasal spray typically comes in a two-pack).

Policy and Procedure Component: Opioid overdose response kit supplies

Your opioid overdose response kit can be part of an existing first aid kit or a separate kit. Either way, opioid overdose response materials should be easily accessible to workers.

Basic Components

Naloxone (minimum two doses) and instructions for use

- Personal protective equipment (PPE), such as gloves
- CPR-related PPE, such as masks and face shields
- OSHA first aid kit requirements
- Any additional first aid kit components your workplace maintains

Advanced Components

- Multiple packs of naloxone
- AEDs
- Nonemergency-related resources, including information about naloxone, opioid overdose, recovery, harm reduction resources, employee assistance program information and other workplace-provided worker support
- Harm reduction resources, such as:
 - Fentanyl test strips
 - Information about clean needle exchanges
 - Xylazine test strips
 - Where to get naloxone for personal or community use

Learn more about <u>OAK boxes</u> and what could be included in your opioid overdose response kit

Policy and Procedure Component: Opioid overdose and naloxone administration training Your policy should address the following:

- Number of workers needing training to respond to an opioid overdose emergency
- Identification of any specific staff or job category that should be trained on how to use naloxone
- Frequency of staff training
- Number of workers who should be trained at each worksite or during each shift
- Protocols for post-overdose support, both for the victim of the overdose and for employees impacted by the incident
- Staff responsible for checking the opioid overdose response kits and replacing naloxone and other components regularly
- Coordination with emergency response and communication with EMS procedures
- Plan for regularly reviewing and updating the policy to ensure effectiveness and relevance

Policy and Procedure Component: Record management

Your workplace should identify how, when and where to document or record the following:

- Opioid overdose emergencies, workplace response and outcomes—If you don't already
 have a documentation plan for opioid overdose emergency, you will need to develop one.
 An example is the sample <u>use report</u> in the linked template that includes documentation of
 incidents requiring naloxone.
- Where and when naloxone was purchased or how it was obtained (this is particularly important if your naloxone is not used prior to expiring and you need to replace it)
- When naloxone or overdose kits are checked and components replaced (this could coincide with your other procedures for checking and replacing first aid kit items)
- · Staff trained, when training occurred and who provided it
- Any additional data collection and analysis of overdose and response at your workplace

Is overdose an OSHA recordable?

OSHA currently does not have any letters of interpretation or frequently asked questions related to opioid overdose recordkeeping, recordability or requirements for naloxone in first aid supplies. Reference this document for NSC guidance on overdose reporting and recordability requirements.

PROVIDE: There is only one critical component to this step—have naloxone easily accessible across your workplace. Remember to refer to the risk assessment and your policy to determine how many doses of naloxone you should have available. No prescription is needed for the over-the-counter naloxone products. Depending on the amount of naloxone your workplace needs, there are multiple ways to get it.

- 1. Purchase bulk orders of 12 or more boxes of Narcan[®] via NSC and Emergent webpage
- 2. Purchase naloxone from a pharmacy or store, such as:
 - Walgreens
 - CVS
 - Walmart
 - Amazon
- 3. Obtain naloxone from your public health department:
 - Find your local public health department here
 - Find your state public health department here



- 4. Depending on how much naloxone you need, some harm reduction organizations may be able to help:
 - Nextdistro
 - NASEN
 - Stop Overdose
 - National Harm Reduction Coalition
 - Know the Dangers

Make naloxone available to all workers: Not only can your workplace include naloxone in its first aid kits and other accessible locations at work, you can provide naloxone to workers for personal or community overdose emergencies.

Note: if your workplace engages with the public, this is an additional risk for overdose you will need to factor into your policy and the amount of naloxone you keep at your worksite(s).

TRAIN: Once you have organizational buy-in, your policy is developed, and naloxone is available in your workplace, it's time to make sure staff are trained on how to recognize and respond to an opioid overdose emergency.

The goal of providing opioid overdose response and naloxone administration training is to help staff gain competence and confidence that they can recognize a possible opioid overdose and respond effectively.

During implementation of the training, ensure you communicate or reiterate specific company policies

NSC offers a free, comprehensive opioid overdose response eLearning that includes handsonly CPR and naloxone administration training.

and procedures regarding naloxone administration, such as where naloxone is located at the worksite. Remember to refer to the training components of your policy at this step. Ideally, all employees should be trained on how to recognize an opioid overdose and how to administer naloxone.

Along with training workers directly in opioid overdose recognition and naloxone response, your organization can provide worker <u>training</u> to engage workers, gain buy-in and create a cohesive safety culture. Additional training and education could include anti-stigma and recovery supportive workplace trainings and resources, such as:

- Anti-stigma resources, like those from <u>Shatterproof</u> or the <u>Canadian Centre on Substance</u> <u>Use and Addiction</u>
- Training and resources related to <u>Recovery Friendly Workplaces</u> and <u>Recovery Ready Workplaces</u>
- No Shame pledge and resources from <u>SAFE Project</u>



MAINTAIN: Now that you've established buy-in, created a policies and procedures, trained staff and stocked naloxone, it's time to **evaluate your opioid overdose response program and set it up for long-term success.**

Ongoing policy and naloxone maintenance:

- Review your opioid response policies in your yearly safety or HR policy reviews
- Check the doses of naloxone available in your monthly, quarterly or other regularly scheduled safety checks and inspections
- Document when the naloxone expires and make a plan to replace it if it is not used before then. Make this its own unique safety task or include it as part of your building maintenance checks, first aid checks, equipment checks or some other routine you have already established that works for your organization.
- Consider nonpunitive ways staff can let your organization know when naloxone is removed from the kit—which might be an indication that workers need training or resources about opioid misuse prevention and personal access to naloxone
- When creating your data reporting plan for documenting naloxone use onsite during an opioid overdose emergency or suspected opioid overdose, make sure it can be included in your EHS management system or other way to document your organization's ongoing opioid overdose and naloxone needs
- Review your previous steps on a regular basis to ensure that there hasn't been a change in your workplace needs or to address gaps in your opioid overdose response plan
- Use the <u>Plan Do Check Act</u>, <u>Plan Do Study Act</u> or <u>SWOT</u> analysis process for continuous quality improvement of your opioid overdose response program

Ongoing engagement:

- Don't disband your working group—use the group to maintain or improve your organization's anti-stigma culture, collect feedback on your opioid overdose policy, maintain and improve organizational buy-in, and establish ongoing communication paths across various levels of your organization
- Incorporate anti-stigma, substance use, mental health and naloxone trainings into your regular offerings for professional development, toolbox talks, trainings and more
- Advance your workplace's commitment to engaging in recovery supportive efforts—collaborate with community organizations, local public health departments, recovery centers or advocates, explore recovery supportive workplace organizations and collaborate with other workplaces in your area that also are working to address substance use and overdose

The bigger picture: Create a workplace culture that empowers employees to come forward about substance use and mental health concerns. This extends beyond the creation of an opioid overdose response policy and requires ongoing effort.

Next steps for a safe, healthy and well workplace:

- Naloxone does not prevent or fully address the overdose crisis—it can save lives during an emergency
- Explore holistic prevention efforts in the <u>NSC Workplace Wellbeing Hub</u>, <u>Total Worker Health</u>, <u>Surgeon General's Guide to Workplace Mental Health and Wellbeing</u> or other resources
- Address your workplace procedures and policies that might put workers at risk for musculoskeletal disorders and pain—which puts them at risk for opioid use
- Provide comprehensive post-incident support: Along with any other safety incident, if a non-fatal overdose or a fatal overdose occurs at your workplace, it is important to support staff mental health and wellbeing. Responding to, witnessing or hearing about an overdose incident may cause trauma.

It is important to offer benefits for workers, including:

- Employee Assistance Plans (EAP)
- Paid time off or flexible leave for staff receiving mental health treatment or support
- Substance use, mental health and peer to peer supports through organizations like <u>Youturn Health</u>
- Healthcare coverage for mental health, substance use and related care, treatment, and support

Your workplace has the power to save lives by responding to opioid overdose emergencies with naloxone, preventing substance misuse and supporting recovery.

If you are interested in learning more about what you and your workplace can do, visit Respond Ready Workplace or the Workplace Wellbeing Hub.

Appendix: Opioids, Overdose, Naloxone, Recovery Definitions

Opioids:

- A group of drugs developed to help people recover from injuries and surgery and to manage chronic or acute pain
- Made from natural and synthetic chemicals found in or derived from poppy plants
- There are many types of opioids, and they can be used legally or illegally
- All opioids work similarly in the body by attaching to neuroreceptors in the brain
- Are a leading cause of addiction (second only to alcohol), non-fatal overdose and fatal overdose

Overdose:

- · A toxic amount of a substance that can be deadly if untreated
- The powerful opioid fentanyl causes most overdoses
- Fentanyl is being added to fake pills (counterfeit pills that look like pharmacy-made pills) and mixed or "cut" into other opioids (like heroin) and non-opioids (like xylazine and cocaine)
- Anyone can experience an overdose
- Certain risk factors increase the likelihood of experiencing an overdose and/or dying from an overdose



Just 2 milligrams of fentanyl the size of 3 grains of rice—can cause an overdose.

Naloxone:

- Naloxone is an opioid overdose reversal medication
- Narcan® and RiVive[™] are common brand names available over-the-counter
- Naloxone temporarily blocks opioids from attaching to neuroreceptors in the brain, allowing a person to breathe normally again
- Naloxone will not harm a person not having an opioid overdose

Recovery:

- 50 million Americans consider themselves in recovery, "a process of change through which people improve their health and wellness, live self-directed lives and strive to reach their full potential"
- Recovery is unique to each person. It might include formal treatment or not. It could be a
 combination of formal care, faith-based care, peer-support, self-care and more. Some
 people might need to stop using substances completely and others might be able to reduce
 their use to non-problematic amounts or infrequent occasions.
- Workplaces can support workers in recovery by creating <u>recovery supportive policies</u> and offering recovery supportive benefits (also referred to as recovery ready and recovery friendly)