Naloxone Law Enforcement Officer Policy - DRAFT*

1. Purpose.
To establish guidelines and regulations governing utilization of naloxone (Narcan) used by Cleveland Division of Police. The objective is to treat and reduce the injury and fatality from opiate overdoses.

2. Policy.
It is the policy of the Cleveland Division of Police that all officers are required to be initially trained in the use of naloxone by [?? Project DAWN / or other agency].

3. Training.
   a) Initial Training
All participating officers will receive initial training that will include, at minimum, an overview of Ohio Revised Code Section 2925.61(D) that permits law enforcement use of naloxone, patient assessment (e.g., signs/symptoms of overdose), distinguishing different types of overdose, rescue breathing, the use of intra-nasal and/or intra-muscular naloxone as detailed in the standing order, and follow-up care. Upon completion of training, officers will have their training recorded.

   b) Continuing Education
Officers participating in the Cleveland Division of Police’s Overdose Prevention Program will receive training refreshers during their yearly continuing education by the County Emergency Management Staff [or other agency as approved?].

The Cleveland Division of Police will deploy its naloxone kits in the following primary locations:
   • Desk Sergeant / Booking area
   • One in each patrol car & K-9 Units
   • Drug Control Unit
   • Law Enforcement Department Commander Office

4.1 Naloxone Use.
When deploying the naloxone kit officers will: (1) maintain universal precautions; (2) perform patient assessment; and (3) determine unresponsiveness, absence of breathing and/or lack of pulse; and (4) update the dispatcher that the patient is in potential overdose state. The dispatcher will then update the Fire Department and ambulance service if not already done to arrange transport to Emergency Department. Officers shall follow the protocol as outlined in the naloxone training in accordance with regional health authority guidelines.

4.2 Maintenance/Replacement
First Line Maintenance

   a) An inspection of the naloxone kit shall be the responsibility of the personnel assigned the equipment and will be done each shift.
   b) Missing or damaged naloxone kits will be reported to the department naloxone coordinator.
   c) Where any condition necessitates the naloxone kit shall be taken off line and be submitted for replacement to the department naloxone coordinator.
   d) Upon administering naloxone.
5. Documentation/Naloxone report
Upon completing the medical assist, the officer will submit a report detailing the nature of the incident, the care the patient received and the fact that the naloxone was deployed. The report will be forwarded to the department naloxone coordinator who will maintain the data. These records must be completed for statistical value of the naloxone program. The document shall be retrievable via hardcopy and electronically.

Good Samaritan Policy - DRAFT**

It is the policy of the Cleveland Division of Police that encouraging witnesses and victims of drug overdoses to seek medical assistance is in the best interests of the citizens of the city.

1. Officers responding to a drug overdose will not arrest or charge the person who, in good faith, seeks medical assistance for someone experiencing a drug-related overdose for drug possession or possession of drug paraphernalia if evidence of these crimes was gained as a result of seeking medical assistance.

2. Officers responding to a drug overdose will not arrest or charge the person who experiences a drug-related overdose and is in need of medical assistance for drug possession or possession of drug paraphernalia if evidence of these crimes was gained as a result of the overdose and the need for medical assistance.

Background & Rationale
**States (34 states and the District of Columbia) that currently have similar good Samaritan overdose immunity laws:

- The laws require the belief in “good faith,” which excludes seeking help during the execution of an arrest or search warrant.
- Other stipulations that have been included are staying on scene until help arrives and cooperating with emergency personnel when they arrive.
- Scope of what offenses are covered with immunity vary by state.
- States with immunity laws:
  - New Mexico (1st state to pass)
  - Alaska
  - Hawaii
  - Washington
  - Oregon
  - California
  - Nevada
  - Utah
  - Colorado
  - North Dakota
  - Minnesota
  - Wisconsin
  - Illinois
  - Arkansas
  - Louisiana
  - Mississippi
  - Tennessee
  - Alabama
  - Kentucky
  - Georgia
  - Florida
  - West Virginia
  - Virginia
  - North Carolina
  - Maryland
• Pennsylvania
• Delaware
• Connecticut
• New York
• Vermont
• Rhode Island
• Massachusetts
• New Hampshire

Other Information
• The following recommendations were made by the CDC after examining the increase in unintentional fentanyl-related drug overdose deaths in Ohio:
  • Consider means for expanded access and use of naloxone to community members and first responders when feasible, including potential liability protections for community people administering naloxone.
  • Consider means to reduce barriers to members of the community calling 9-1-1 to report an overdose such as recognition of an overdose, Good Samaritan laws (i.e., fear of arrest if a person calls) and stigma around opioid use disorder.
• The DOJ Bureau of Justice Assistance released a Law Enforcement Naloxone toolkit to support law enforcement agencies in establishing naloxone programs: https://www.bjatraining.org/tools/naloxone/Naloxone-Background