



2020

GUIDELINES REGARDING SOCIAL WORK AND THE USE OF NALOXONE

New Brunswick Association of Social Workers

Adopted by the Board of Directors September 18, 2020



Guidelines Regarding Social Work and the Use of Naloxone

Social workers practice in different contexts and may work in isolation. Among the wide variety of individuals with whom social workers are called to intervene, some may use drugs and have behaviors related to opioid overdose. Opioids are a class of drugs often prescribed to treat pain. Like other drugs, they can be misused and found on the streets. Recreational use of opioids, or other drugs laced with opioids, can lead to dependence, overdose, and death.

There is an ongoing opioid epidemic in North America, New Brunswick included¹. No one is immune to experiencing an opioid overdose. With fentanyl, a particularly potent and toxic opioid², appearing more frequently both as a standalone drug and present with other drugs, there is an increasing need for community public health measures to minimize the harm associated with opioid use.

As stated by the Government of Canada (Appendix A), Naloxone (Narcan) is an opioid antagonist that temporarily prevents or reverses the effects of opioids. Naloxone is safe for all ages; it only affects the body if there are opioids in the system and causes no effect otherwise. You cannot use Naloxone improperly and it does not create dependence. It is safe to keep a naloxone kit on hand³.

Social workers can administer Naloxone when an overdose is reasonably suspected, as long as they are competent in doing so and there are no other qualified health professionals present.

The New Brunswick Association of Social Worker's (NBASW) role is to regulate the profession. From the NBASW's perspective, it is not contrary to the profession of social work for a social worker to administer Naloxone to a client in an emergency. However, this would have to be done in an emergency where no other qualified health professionals are present.

Social workers must allow qualified health professionals to administer Naloxone when they are in the immediate vicinity. However, social workers who are not working with other health professionals present or close by may administer Naloxone intranasally or intramuscularly to someone experiencing an actual or reasonably perceived drug overdose.

¹ Government of New Brunswick (n.d.). Opioid use disorders exist in New Brunswick. Retrieved from https://www2.gnb.ca/content/gnb/en/corporate/promo/opioids_new.html

² Government of New Brunswick (2019). Dangerous drug furanyl-fentanyl causing concern in province. Retrieved from https://www2.gnb.ca/content/gnb/en/departments/health/news/news_release.2019.03.0185.html

³ Government of Canada (n.d.). Naloxone: Save a life (fact sheet). Retrieved from <https://www.canada.ca/en/health-canada/services/publications/healthy-living/naloxone-save-a-life-fact-sheet.html>



Additionally, social workers who are off duty can administer Naloxone to someone experiencing an actual or reasonably perceived drug overdose with legal protection under the Volunteer Emergency Aid Act⁴.

Naloxone is a life-saving emergency intervention that is safe and temporarily reverses the effects of opioid overdoses. It is up to each social worker to decide whether the administration of Naloxone is something they are comfortable doing in an emergency.

The NBASW reminds social workers of their obligation to practice within their limits and skills. Social workers who work apart from other health professionals or who are concerned by the ongoing opioid epidemic may take training to administer Naloxone, obtain a Naloxone kit, and should stay up to date on the latest recommendations and best practices regarding Naloxone. The Government of New Brunswick recognizes the importance of Naloxone and has developed a Naloxone Training Video⁵ and provincial toolkit⁶ (Appendix B and Appendix C).

The NBASW encourages social workers working with at-risk populations to have discussions about Naloxone and encourage them to obtain training and carry a Naloxone kit of their own. Social workers should be aware of the organizations in their region that provide Naloxone kits, either free or at cost.

The NBASW encourages social work employers to provide social workers with in-person training regarding Naloxone administration. The NBASW also invites members to have discussions with their employers regarding specific workplace policies and procedures surrounding emergency first aid interventions, such as Naloxone administration.

⁴ Government of New Brunswick (2016). Volunteer emergency aid act. Retrieved from <https://www.gnb.ca/legis/bill/FILE/58/2/Bill-25-e.htm>

⁵ Government of New Brunswick (2018). Naloxone Training Video. Retrieved from https://www.youtube.com/watch?v=SR_siU-zJoQ&feature=youtu.be

⁶ Government of New Brunswick (n.d.). Provincial opioid toolkit. Retrieved from https://www2.gnb.ca/content/gnb/en/corporate/promo/opioids/Provincial_Opioid_Toolkit.html

Naloxone: Save a Life

What is naloxone?

Naloxone (pronounced na-LOX-own) is a fast-acting drug used to **temporarily reverse the effects of an opioid overdose**. Naloxone can restore breathing within **2 to 5 minutes**.

Why does naloxone work only temporarily?

Naloxone is active in the body for only **20 to 90 minutes**, but the effects of most opioids can last longer. This means that the **effects of naloxone are likely to wear off before the opioids are gone from the body**, which could cause breathing to stop again. Naloxone may need to be used again, depending on the amount, type or method of consumption of the opioids (e.g., oral, injection).

An **overdose is always an emergency**. Even if naloxone has been administered, **always call for help**.

TIP: If you or someone you know is using opioids, make sure to carry naloxone with you. It's available without a prescription and can be picked up at most pharmacies or local health authorities.

Is naloxone safe for everyone?

Yes, naloxone is **safe for all ages**. It works only if you have opioids in your system. It is safe to keep on-hand because it cannot be improperly used and does not create dependence.

How is naloxone helping to address Canada's opioid crisis?

Naloxone has been used to successfully reverse thousands of opioid overdoses across Canada. It is used by first-responders such as paramedics and firefighters. Take-home naloxone kits are also available to anyone who may be at risk of an overdose or who is likely to encounter one. Take-home naloxone kits are **available without a prescription** and can be picked up at **most pharmacies or local health authorities**.

In Canada, two types of take-home naloxone kits are available:



Naloxone Nasal Spray is sprayed directly into the nose where it is absorbed. It starts to take effect in 2 to 3 minutes.



Injectable Naloxone is injected into a muscle in your body: the upper arm, thigh or buttocks are best. It starts to take effect in 3 to 5 minutes.

Naloxone Saves Lives. Get a Kit.

- ✓ Naloxone temporarily reverses the effects of an opioid overdose to help restore breathing
- ✓ If you think someone is experiencing an opioid overdose, call 9-1-1 or your local emergency help line, then give naloxone by following the directions on the kit
- ✓ Take-home kits are available at most pharmacies or local health authorities; no prescription is needed
- ✓ Kits expire and should be replaced after 18 to 24 months

**KNOW
MORE**

DRUGS: GET THE FACTS.
KNOW THE RISKS.

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Government
of Canada

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du Canada

Canada

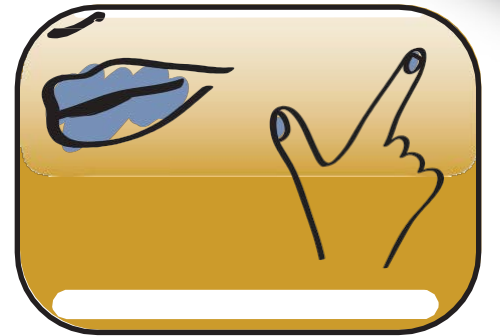
Get the facts at Canada.ca/Opioids

Opioid Overdose Signs & Symptoms

Breathing will
be slow or
absent



Lips and nails
are blue



Person is not
moving



Person may
be choking



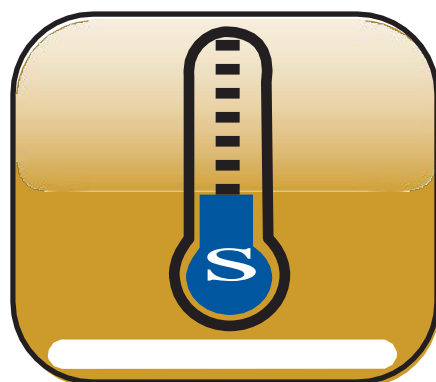
You can hear
gurgling sounds
or snoring



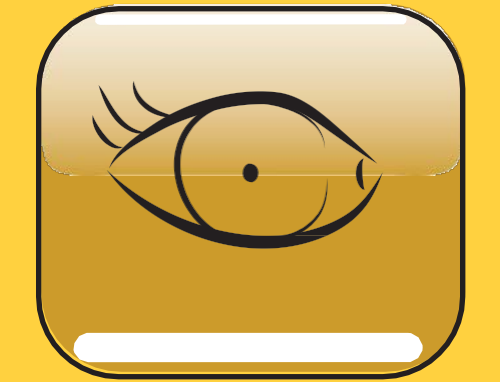
Can't be
woken up



Skin feels cold
and clammy



Pupils
are tiny



OVERDOSE SURVIVAL GUIDE

TIPS TO SAVE A LIFE



Overdose Prevention and Response

www.gnb.ca/opioids

New Brunswick
Nouveau Brunswick

PREVENTION

Overdose is most common when:

- Your tolerance is lower; you took a break, were in detox/treatment or jail, or you are new to use.
- You have been sick, tired, run down, dehydrated or have liver issues.
- You mix drugs; prescribed or not, legal or illegal.
- The drugs are stronger than you are used to; changes in supply, dealer, or town.

To prevent overdose:

- Know your health status and your tolerance.
- Do not mix drugs and alcohol. If you do mix, choose to use drugs before alcohol.
- Be aware; using drugs while on prescribed medications can increase overdose risk.
- Don't use alone. Leave door unlocked. Tell someone to check on you.
- Do testers to check strength. Use less. Pace yourself.
- Talk to an experienced person or a trusted healthcare provider about reducing risk.
- Know CPR and get trained on giving naloxone.
- Choose a safer route of taking drugs.

THE RECOVERY POSITION

Keep the airway clear



Hand supports head.

Knee stops body from rolling onto stomach.

Stay with person. If you must leave them alone at any point, or if they are unconscious, put them in this position to keep the airway clear and prevent choking.

Call 911 for help.

OVERDOSE?

TAKE CHARGE.

TAKE CARE.

OPIOIDS / DEPRESSANTS (e.g., opioids: morphine, dilaudid, heroin / depressants: alcohol, GHB, benzodiazepines)

Feels and looks like:

- Person cannot stay awake.
- Can't talk or walk.
- Slow or no pulse.
- Slow or no breathing, gurgling.
- Skin looks pale or blue, feels cold.
- Pupils are pinpoint or eyes rolled back.
- Vomiting.
- Body is limp.
- **No response to noise or knuckles being rubbed hard on the breast bone.**

In case of opioid overdose:

- Stay with person. Use their name. Tell them to breathe.
- Call 911 and tell them person is not breathing.
- When paramedics arrive tell them as much as you can about drugs and dose.
- Use naloxone if available. Naloxone only works on opioid overdose.
- After naloxone a person might feel withdrawal. Do not take more drugs. Sick feeling will go away when naloxone wears off (30 – 75 minutes). Be aware: overdose can return.

SAVE ME

Stimulation – Can you wake them up? If not, **call 911.**

Airway – Make sure there's nothing in their mouth that stops them from breathing.

Ventilate – Breathe for them. (Plug nose, tilt head back, and give 1 breath every 5 secs).

Evaluate – Are they any better? Are you trained to give naloxone?

Muscular injection – Inject 1cc of naloxone into a *muscle*.

Evaluate and support – Is the person breathing on their own? If they're not awake in 5 minutes, another 1cc dose is needed. Tell the person not to use any more drugs right now — wait at least 2 hours.

This is proven to work. Other remedies can actually be harmful.

STIMULANTS (e.g., cocaine, methamphetamine, ecstasy)

Feels and looks like:

- Fast pulse or no pulse.
- Short of breath.
- Body is hot/sweaty, or hot/dry.
- Confusion, hallucinations, unconscious.
- Clenched jaw.
- Shaky.
- Chest pain.
- Seizures.
- Vomiting.
- Cannot talk or walk.

There are **NO** medications to safely reverse a stimulant overdose.

Assessment: Are they experiencing A or B?

A: MENTAL DISTRESS/OVERAMP

Associated with sleep deprivation, crashing, anxiety, paranoia. If a person is conscious and you are sure this is not medical in nature, they may just need support and rest.

WHAT TO DO:

- Keep calm. Stay with person. Use their name.
- Give water or fluid with electrolytes. Do not overhydrate.
- Place cool, wet cloths under: armpits, back of neck, and head.
- Open a window for fresh air.
- Get them comfortable. Move away from activity.
- If aggressive/paranoid suggest they close their eyes, give person space.
- Encourage person not to take any other substances.

If you're not comfortable with the situation, call 911.

B: PHYSICAL DISTRESS/ACUTE STIMULANT TOXICITY

Medical attention is required immediately if person has:

- Jerking or rigid limbs.
- Rapidly escalating body temperature and pulse.
- In and out of consciousness.
- Severe: headache, sweating, agitation.
- Chest pains.

WHAT TO DO:

- **Call 911.**
- Stay with person.
- Keep person: conscious, hydrated, calm.
- If heart has stopped do 'hands-only' CPR.
- **Tell medical professionals as much as possible so they can give the right treatment to prevent organ damage and death.**

EMERGENCY RESPONSE: call 9-1-1

for more information:

www.gnb.ca/opioids