



AN RIALTÓIR CÓGAISÍOCHTA
THE PHARMACY REGULATOR

Programme Specification for the
Diagnosis and Treatment of Suspected Narcotic
(i.e. Opioid) Overdose and
the Supply and Administration of Naloxone
Training Course

Version 1.2

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Part One

Accreditation Standards for CPD Programmes and Courses for Pharmacists

[Accreditation Standards for CPD Programmes and Courses for Pharmacists](#) apply to the educational programme for the Diagnosis and Treatment of Suspected Narcotic (i.e. Opioid) Overdose and the Supply and Administration of Naloxone¹. These standards should be referred to when accrediting this education and training programme.

Part Two

Course Requirements for the Diagnosis and Treatment of Suspected Narcotic (i.e. Opioid) Overdose and the Supply and Administration of Naloxone

In addition to the standards referred to above, the accreditation of an education and training programme for the Diagnosis and Treatment of Suspected Narcotic (i.e. Opioid) Overdose and the Supply and Administration of Naloxone should be dependent on the programme demonstrating the following specific points:

Programme Content

- Incorporation of the relevant legislative basis for the supply and administration by pharmacists of Naloxone in emergency situations (Medicinal Products (Prescription and Control of Supply) Regulations (Amendment) (No 2) 2015 (SI 449 as amended), including amendments to the Eighth Schedule of Medicinal Products which may be supplied and administered by authorised persons pursuant to Regulation 4B of the Medicinal Products (Prescription and Control of Supply) (Amendment) Regulations 2011), the management of any associated adverse reaction and PSI guidance for pharmacists on the Safe Supply and Administration of Prescription-only Medicines for the Purposes of Saving Life or Reducing Severe Distress in an Emergency as approved by the Council of the PSI.
- Incorporation of the current national guidance on the administration of Naloxone in an emergency situation in Ireland
- Incorporation of stated learning objectives and outcomes in line with requirements identified below.
- The content is current and relates to national guidelines on suspected opioid overdose treatment, self-harm and resuscitation.

Programme Delivery and Learning Methods

¹ Accreditation Standards for CPD Programmes and Courses for Pharmacists came into effect on 21 June 2018. Training Programmes accredited prior to this date have been accredited against The Generic Interim Accreditation Standards for Formal Programmes of Learning for Pharmacy in Ireland

- The training should consist of both theoretical and practical application guided by the programme content, deliverables and learning outcomes
- Practical skills should be taught by competent instructors working within the harm reduction services in a professional capacity. At least one instructor should have relevant experience in setting up and delivering an emergency service for the supply and administration of Naloxone.
- Sufficient practical sessions are provided to ensure skills competence in the administration of Naloxone in an emergency situation.

Learner Assessment

- Participants must be assessed on their skills competence to:
 - Respond appropriately to an emergency situation including assessing and communicating with the patient/representative
 - Administer Naloxone products competently
 - Carry out necessary follow up (alerting emergency services, documenting patient details and procedure carried out, counselling of patient/representative on services available to them)
- Post learning assessment should also be conducted to ensure the learning outcomes are met

Part Three

Indicative Desired Programme Content and Deliverables

The aim of the training is to enable pharmacists to diagnose and treat suspected opioid overdose and to supply and administer naloxone in emergency situations competently and safely. Pharmacists must complete all relevant training, in addition to this module, as set out by the Council of the PSI, in order to supply and deliver Naloxone in emergency circumstances.

The following indicative learning outcomes are a general guide for training providers as to an appropriate scope of the curriculum content for the programme.

The learning outcomes have been broadly divided into three key areas:

- 1) Principles of Harm Reduction and Opioid Overdose ,
- 2) Preparation for Delivering a Pharmacy-Based Naloxone Service,
- 3) Supply and Administration of Naloxone in an Emergency Situation.

It is recommended that the learning outcomes be achieved through a blended learning format including an online component and face-to-face session(s).

Key Area 1: Principles of Harm Reduction and Opioid Overdose

The following is a general guide for course providers on the learning outcomes that participants would be expected to attain on successful completion of a module in this area:

- Describe high risk patient groups, to include polydrug users, alcohol use, age, post-detoxification, rehabilitation, prison
- Where appropriate, give details of the patient education that could be provided to service users in the long term prevention and management of opioid overdose
- Explain how to recognise signs and symptoms of suspected opioid overdose and assess patients appropriately giving a diagnosis.
- Describe national policy, guidelines and agencies involved in the management and treatment of suspected opioid overdose.
- Explain the mechanism of action, dose, cautions, side effects and routes of administration for naloxone as well as the potential for no effect in the case of additional overdose of other substances

Key Area 2: Preparation for Delivering a Pharmacy-Based Naloxone Service and the Management of Supply

The following is a general guide for course providers on the learning outcomes that participants would be expected to attain on successful completion of a module in this area:

- Discuss the role of the pharmacist in the treatment of suspected opioid overdose and the supply and administration of naloxone
- Describe the legal, regulatory, and liability issues involved in supplying and administering naloxone
- Describe the procurement, storage, handling and disposal of naloxone products
- Describe the duty to determine whether it is appropriate to supply – identification of factors constituting an emergency
- Where possible, identify the relevant persons to be notified of the supply and the dose given
- Outline the key principles in the provision of education to patients, representatives or listed organisations on suspected opioid overdose and the treatment of this with naloxone
- Give details of the agencies and health care professionals involved in suspected narcotic overdose and onward referral (being able to clearly articulate the patient journey and follow up needed)
- Give details of the preparation of the pharmacy practice setting for appropriate response to an emergency situation, including appropriate staff accreditation/training and briefing
- Identify the key points to be addressed in written policies and procedures for:
 - The diagnosis and treatment of suspected opioid overdose and the supply and administration of naloxone service (that details the patient pathway (to include onward referral and follow up after the event)
 - Staff referral and communication including training on the presentation of patients in emergency situations

- Consent (consent includes refusal and implied² consent, whereby the pharmacist is satisfied that they have implied consent through the interaction with the person or the circumstances in which the medicine is to be administered)
- Transport, storage, handling and disposal of naloxone, including sharps and clinical waste disposal where relevant
- Documentation and record-keeping requirements
- In addition, outline how the pharmacy site is prepared for the service including:
 - Compliance with PSI guidance for pharmacists on the Safe Supply and Administration of Prescription Only Medicines for the Purposes of Saving Life or Reducing Severe Distress in an Emergency
 - Plans for performing appropriate on site ‘dummy runs’/drills with superintendent pharmacist/supervising pharmacist and the entire pharmacy team

Key Area 3: Administration of Naloxone in an Emergency Situation

The following is a general guide for course providers on the learning outcomes that participants would be expected to attain on successful completion of a module in this area:

Pre-administration

- Assess the patient for signs and symptoms of suspected opioid overdose
- If possible determine name of patient and type of suspected opioid
- Ensure patient comfort and safety
- Explain emergency procedures and engage the assistance of the pharmacy team

Administration

- Demonstrate the principles of safe medication administration
- Select appropriate dose of naloxone
- Demonstrate skill preparing and administering the medication, in line with the relevant route of administration
- Ensure sufficient practice with route of naloxone delivery/trainer equipment to ensure skills competence in delivery of Naloxone in an emergency situation
- Monitor the patient for response and vital signs and treat as appropriate .

Post-administration

- Explain the system in place to record/document the diagnosis and treatment of suspected opioid overdose and the supply and administration of naloxone

² Regulation 10A 1(h) of Medicinal Products (Prescription and Control of Supply) Regulations 2003, as amended.

- Refer the patient to another regulated health professional for additional care as needed. Where possible, notify other health providers (including the patient's usual prescriber) and agencies with appropriate details as required (including information on adverse drug reactions)
- Briefly explain to the patient the steps following naloxone administration, including: hospital management, blood tests, referral to a harm reduction specialist
- Describe the steps in place to follow up on the patient after the event
- Conduct a debriefing with the pharmacy team after the event and ensure that adequate supports are in place for self-care
- Reflect on the delivery of the service and obtain feedback to ensure continuous quality improvement
- Communicate in clear, understandable language with patient(s), their agents, other health providers and agencies as required

References

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(All websites accessed 11/03/2019)

