

**Storage and Administration of Opioid Antagonists in Schools:
Guidelines for Local and Regional Boards of Education
Connecticut State Department of Education
October 1, 2022**

Legislation enacted in 2022, established a number of conditions for the administration of opioid antagonists in schools, and directed the Connecticut State Department of Education, in consultation with the Departments of Consumer Protection and Public Health (collectively “Departments”), to develop guidelines (“Guidelines”) on the storage and administration of opioid antagonists in schools for use by local and regional boards of education (hereinafter “Board” or “Boards”). This legislation amended Connecticut General Statutes (C.G.S.) [Section 10-212a](#) to authorize school nurses and “qualified school employees” to administer opioid antagonists for the purpose of emergency first aid to students who experience an opioid related overdose. See [Public Act 22-80](#), Section 7 and C.G.S. Section 10-212a(g) (Appendix 1).

Boards which choose to authorize the administration of opioid antagonists should develop policies and procedures for the storage and administration of opioid antagonists which implement the provisions of C.G.S. Section 10-212a(g) and Regulations of Connecticut State Agencies [Sections 10-212a-1 through 10](#), as applicable. The administration of the opioid antagonist then must comport with C.G.S. Section 10-212a and align with and follow the respective Board’s policies and procedures.

To that end, and in accordance with Section 10-212a, the Departments are providing these Guidelines for the use by Boards in adopting their own policies and procedures. Furthermore, Boards that have already authorized the administration of opioid antagonists as emergency first aid and adopted policies and procedures with respect to the storage and administration of opioid antagonists are advised to review these Guidelines and the amended statute to ensure that their policies and procedures are consistent with C.G.S. Section 10-212a(g).

The Connecticut State Department of Education recommends that all Boards provide for an opioid antagonist to be available and maintained at all schools in their school district.

- 1. Definitions:** The Departments recommend that the terms “opioid antagonist,” “qualified school employee,” and “qualified medical professional” be given the meanings set forth in C.G.S. Section 10-212a(g)(3). (See Appendix 1)
- 2. Authority for Maintenance and Administration of an Opioid Antagonist:** Boards should adopt policies and procedures -- incorporating, for example, a standing order of the Board’s medical advisor or the authorization of the Superintendent of Schools – that expressly authorize the school nurse or in the absence of the school nurse a qualified school employee to maintain opioid antagonists for the purpose of administration of emergency first aid to students who experience an opioid related drug overdose.
- 3. Selection of Qualified School Employees:** Boards should adopt policies and procedures for the selection, by the school nurse, in conjunction with the building principal, of qualified school employees who may administer opioid antagonists in the absence of the school nurse. The school nurse, in conjunction with the building principal, shall determine and select a

sufficient number of qualified school employees to ensure that there shall be at least one qualified school employee on the grounds of the school during regular school hours in the absence of the school nurse.

- 4. Designation of Regular School Hours:** Boards should define and publicize the regular school hours of all the schools where opioid antagonists will be maintained to ensure that there will be a school nurse, or a qualified school employee at the school in the absence of the school nurse, during such hours. Boards should also clarify what hours are not included in such regular school hours (e.g., after-school events such as athletics or extracurricular activities, etc.) where opioid antagonists and/or school nurses and qualified school employees will not be available, and what actions should be taken during such hours (e.g., calling 9-1-1).
- 5. Notification of School Nurse Availability:** Boards should adopt procedures for notification of qualified school employees when the school nurse is not available for the administration of the opioid antagonist so that the qualified school employee may be prepared to administer the antagonist if necessary.
- 6. Notification to Qualified School Personnel Authorized to Administer an Opioid Antagonist:** Boards should adopt procedures for notification of qualified school employees of the statutory requirement that a qualified school employee may administer an opioid antagonist only in situations where the school nurse is absent or unavailable.
- 7. Ensuring Proper Training of School Nurses and Qualified School Employees:** Boards should adopt policies and procedures to ensure that a school nurse or a qualified school employee does not administer an opioid antagonist unless the school nurse or qualified school employee has completed a program in the distribution and administration of an opioid antagonist developed by the Department of Education, Department of Public Health, and Department of Consumer Protection.
- 8. Notification of the Identity of Qualified School Employees Authorized to Administer an Opioid Antagonist:** Boards should adopt procedures for notification of all school personnel of the identity of qualified school employees authorized to administer an opioid antagonist in the absence of the school nurse.
- 9. Notifications to Parents/Guardians on Policies Regarding the Administration of Opioid Antagonists and Parental/Guardian Refusal:** Boards should adopt procedures for: 1) notifying parents and guardians of Board policies authorizing the administration of an opioid antagonist as emergency first aid to students who experience an opioid related overdose; and, 2) parents and guardians to notify the school nurse or other school representative if the opioid antagonist should not be administered to their child.
- 10. Notification to School Staff Regarding Parental/Guardian Refusal:** Boards should adopt procedures to ensure that school nurses, qualified school employees and other personnel with a need to know are notified of the students whose parents or guardians have indicated that the opioid antagonist should not be administered to their child.

- 11. Storage of Opioid Antagonists:** Boards should adopt policies for the storage of opioid antagonists to ensure that the opioid antagonist is stored in a secure manner, stored under conditions which will not impair its effectiveness prior to it being administered, and stored in a location where it can be obtained in a timely manner if administration is necessary.
- 12. Ordering and Replenishing the Supply of the Opioid Antagonist:** Boards should adopt policies for the timely ordering of the opioid antagonist and the procedures for determining the expiration date of the opioid antagonist to ensure that a sufficient supply is available to meet the needs of the school district.
- 13. Actions to be Taken Following the Administration of the Opioid Antagonist:** Boards should specify the actions to be taken by the school nurse or other school personnel when an opioid antagonist is administered to a student, including, but not limited to, the following: calling 911; notifying the student's parent(s) or guardian(s); notifying the Superintendent and other administrators; notifying the school medical advisor; and other notifications as determined by the Board to be necessary.
- 14. Recordkeeping:** Boards should specify the records to be maintained with respect to the administration of opioid antagonists, including, but not limited to, records pertaining to the completion of the training required for a school nurse or other qualified school employee to enable them to administer the opioid antagonist and the records to be kept with respect to the administration of an opioid antagonist.

Appendix 1
Connecticut General Statutes Section 10-212a(g)

(g) (1) A school nurse or, in the absence of a school nurse, a qualified school employee may maintain opioid antagonists for the purpose of emergency first aid to students who experience an opioid-related drug overdose and do not have a prior written authorization of a parent or guardian or a prior written order of a qualified medical professional for the administration of such opioid antagonist. A school nurse or a school principal shall select qualified school employees to administer such opioid antagonist under this subdivision, and there shall be at least one such qualified school employee on the grounds of the school during regular school hours in the absence of a school nurse. A school nurse or, in the absence of such school nurse, such qualified school employee may administer such opioid antagonist under this subdivision, provided such administration of the opioid antagonist is in accordance with policies and procedures adopted pursuant to subsection (a) of this section. Such administration of an opioid antagonist by a qualified school employee shall be limited to situations when the school nurse is absent or unavailable. No school nurse or qualified school employee shall administer such opioid antagonist under this subdivision unless such school nurse or qualified school employee completes a training program in the distribution and administration of an opioid antagonist developed by the Department of Education, Department of Public Health and the Department of Consumer Protection, or under an agreement entered into pursuant to section 21a-286. The parent or guardian of a student may submit a request, in writing, to the school nurse and school medical advisor, if any, that an opioid antagonist shall not be administered to such student under this subdivision.

(2) Not later than October 1, 2022, the Department of Education, in consultation with the Departments of Consumer Protection and Public Health, shall develop guidelines for use by local and regional boards of education on the storage and administration of opioid antagonists in schools in accordance with the provisions of this subsection.

(3) For purposes of this subsection, (A) “opioid antagonist” means naloxone hydrochloride or any other similarly acting and equally safe drug approved by the federal Food and Drug Administration for the treatment of a drug overdose, (B) “qualified school employee” means a principal, teacher, licensed athletic trainer, licensed physical or occupational therapist employed by a school district, coach or school paraprofessional, and (C) “qualified medical professional” means (i) a physician licensed under chapter 370, (ii) an optometrist licensed to practice optometry under chapter 380, (iii) an advanced practice registered nurse licensed to prescribe in accordance with [Section 20-94a](#), or (iv) a physician assistant licensed to prescribe in accordance with [Section 20-12d](#).