Preparing for Opioid-Related Emergencies for K-12 Schools and Institutions of Higher Education

In October 2017, the President and acting U.S. Department of Health and Human Services (HHS) Secretary determined that a public health emergency exists nationwide. Opioids can help in the management of certain types of pain, but they pose serious health, financial, and social consequences when misused. According to the Final Report of the President’s Commission on Combating Drug Addiction and the Opioid Crisis:

In 2016, an estimated 239,000 adolescents aged 12 to 17 were current misusers of pain relievers (1.0% of adolescents), and 631,000 young adults aged 18 to 25 misused pain relievers in the past month (1.8% of young adults) ... Among adolescents aged 12 to 17, 152,000 (0.6%) had a pain reliever use disorder in the past year, and 291,000 young adults aged 18 to 25 (0.8%) and 1.3 million adults aged 26 or older in 2016 (0.6%) had a pain reliever use disorder in the past year (p. 24).

Prescription opioids can be misused or abused1 by an individual who takes
- another person’s opioid prescription, even if it is to relieve their own pain;
- an opioid medication in ways other than prescribed, such as taking it more often, taking more than the prescribed dose, snorting or injecting the drug, or mixing it with alcohol or other drugs not described as safe by a doctor or pharmacist; or
- the opioid prescription to get high.2

An opioid use disorder or addiction is rare with short-term medical use, but longer-term use can lead to opioid dependence, tolerance, and possibly addiction.3 One large dose of an opioid can slow or stop the breathing, leading to an overdose that can be fatal. Risks of overdose are increased when an opioid is taken with alcohol or sedatives.

Schools, school districts, and institutions of higher education (IHE) may find the threat of opioid misuse and abuse affects their population in several possible ways:
- Students may use or abuse opioids themselves, leading to issues with drug dependence, addiction, and even the potential for overdose.
- Parents, guardians, family members, or roommates of students may be dealing with addiction issues at home, with members of their household using or abusing opioids themselves (and parents and guardians may be unaware that opioids they have in the home are being taken by their children).
- Teachers, faculty, and staff may have opioid use or abuse issues.
• Use by any member of the educational community might bring drugs physically to the campus grounds (and in some cases, lead to drug dealing on or around the property).

• Corollary issues that result from drug use and abuse might affect school/IHE members or the community as a whole, such as increased property crimes, fighting, vandalism, and the presence of weapons, other drugs or alcohol, or discarded drug paraphernalia that affects the overall safety of the environment and students’ sense of safety.4

These and other potential issues that might arise from opioid misuse and abuse, with the status of the opioid crisis as a public health emergency, make it a threat that schools, school districts, and IHEs may want to consider addressing in their preparedness efforts. Due to the potential for loss of life, these entities may decide to focus on protocols to address an opioid overdose in their comprehensive high-quality emergency operations plan (EOP).

Planning for Opioid Emergencies

The Guide for Developing High-Quality School Emergency Operations Plans (School Guide) and Guide for Developing High-Quality Emergency Operations Plans for Institutions of Higher Education (IHE Guide) were developed in partnership with six federal agencies with roles and responsibilities in emergency preparedness, including the U.S. Departments of Education (ED); Justice (DOJ), led by the Federal Bureau of Investigation (FBI); Homeland Security, led by the Federal Emergency Management Agency; and HHS. The Guides provide a recommended six-step planning process that is cyclical and ongoing to help schools and IHEs create, review, or revise a high-quality EOP or component(s) of one. When developing activities, programs, and services to address an opioid overdose, a school, school district, or IHE planning team can progress through the six steps as follows.

Step 1: Form a collaborative planning team. The planning team will likely comprise a core planning team of school, school district, and IHE personnel; student or family representatives; and community partners. To address an opioid overdose incident, the planning team can seek the additional input of
individuals who have expertise in treating opioid overdoses directly; those with experience in treating drug or alcohol addiction, including opioids; and those with expertise in public health (including public health emergencies or public health campaigns). These may include campus health service providers or school nurses, first responders (including local/campus law enforcement, fire department, and emergency medical services [EMS]), occupational safety experts, public health professionals, emergency management, and Drug-Free Communities Support Program grantees, among others. This will enable the collaborative planning team to have the input needed to plan for opioid emergencies, such as an overdose. The Office of Safe and Healthy Students (OSHS) and REMS TA Center resource Collaboration: Key to a Successful Partnership provides guidance and suggestions on partnering with stakeholders in emergency preparedness.

Step 2: Understand the situation. Here, the planning team identifies threats and hazards to the whole school/higher ed community and their prevalence using a variety of formal and informal assessment tools, evaluates those risks, and prioritizes them for inclusion in the EOP. A planning team may be able to assess the extent of opioid misuse and abuse within their school/IHE community, and beyond, through several methods. Many schools and school districts administer annual or biennial student surveys that include questions on drug use, which can yield data to help inform an understanding of the prevalence of use at a site (e.g., the Youth Risk Behavior Surveillance System). IHEs can conduct their own surveys to determine the prevalence of drug use on or near their campus or look to other sources of data or information on drug-related emergencies, such as those provided by campus or local law enforcement, student health services, or more generalized data from the locality or state. Planning teams can also consult with student government or other student organizations to better understand the extent of the problem (and how to address it).

Other issues that may arise in an educational community due to a culture of prevalent drug use — such as fighting, property crimes, and weapons on campus — and their effects on student and staff perceptions of safety can be measured through Culture and Climate Assessments for
Schools or IHEs. ED provides several School Climate Surveys, which measure three domains of engagement, safety (including drug use in general), and the environment. Surveys are available for middle and high school students, instructional staff, non-instructional staff, and parents/guardians, and can be adapted for the higher ed community.

Step 3: Determine goals and objectives. After assessing the level of risk posed by threats and hazards, the planning team determines goals and objectives to achieve the best outcome for before, during, and after an incident. For example, when developing goals for addressing an opioid overdose, three of them may be as follows:

- **Before**: Prevent an opioid overdose from occurring.
- **During**: Respond to an opioid overdose.
- **After**: Offer recovery support to individuals who overdosed on an opioid.

Using the goal of preventing an opioid overdose from occurring as an example, possible objectives for K-12 schools could include the following:

- **Objective 1.1**: Foster a positive campus climate.
- **Objective 1.2**: Educate parents and guardians on the potential for children to misuse opioids, and how to properly store and dispose of their own prescription drugs to help prevent youth from accessing them.

Possible objectives for IHEs could include the following:

- **Objective 1.1**: Provide information at student orientation and registration on the dangers of opioid misuse and abuse, how to detect the issue in others, and how to get help.
- **Objective 1.2**: Ensure opioids are prescribed appropriately.
  - More information is available for IHEs in the guide [Opioid Prescribing in College Health](#).

Step 4: Plan development. In this step, the planning team identifies courses of action for accomplishing each of the previously identified objectives to address the what, who, when, where, why, and how. For example, a school planning team may address “Objective 1.1: Foster a positive campus climate” by determining how often a Culture and Climate Assessment would be conducted, how it would be conducted, and who is responsible for conducting the survey; analyzing the results; and using the data to help implement campus climate improvements.

Step 5: Plan preparation, review, and approval. Next, a draft EOP is written and circulated to obtain feedback from those responsible for implementing the document. Edits are made based on those comments, and approval is obtained from the appropriate leadership. School, school district, and higher ed planning teams have the flexibility to include information within their EOP that best meets the needs of the school/IHE and community partners who play a role in implementing the plan. Teams may choose to include opioid-related goals, objectives, and courses of action in an annex to the EOP such as an Alcohol/Drug Overdose Annex. Cross-cutting goals, objectives, and courses of action
action that could apply to a variety of medical emergencies could be included in a Public Health, Medical, and Mental Health Annex.

Step 6: Plan implementation and maintenance. The EOP is maintained via regular reviews and revised when needed. Further, individuals with roles outlined in the EOP are trained in their responsibilities, and exercises are conducted to test the ability of the school, school district, or IHE to continually prevent, protect, mitigate the effects of, respond to, and recover from an incident while protecting the school or higher ed community from a wide variety of threats or hazards. As a threat such as the opioid crisis changes (e.g., by the population most affected, or the types of drugs most prevalent), planning teams may need to update their plans accordingly.

Opioid-Related Preparedness Activities

As school, school district, and higher ed preparedness is comprised of five mission areas (for more information, see the archived OSHS and REMS TA Center Webinar Using the Five Preparedness Missions to Help Ready Your District and School for Emergencies and fact sheets on prevention, protection, mitigation, response and recovery), an awareness of each mission area, and what activities can be conducted under each area, can help stimulate ideas for what goals, objectives, and courses of action (see steps 3 and 4 above) are needed to create a comprehensive EOP. If the planning team decides a potential opioid overdose is a threat that needs to be addressed, members may want to consider the following activities that fall under the mission areas:

- **Prevention** is defined as the actions schools, school districts, and IHEs take to stop an event from occurring.
  - Integrate efforts to prevent an opioid overdose with other alcohol and other drug (AOD) prevention programming. For example, a school may have a comprehensive approach to AOD prevention, including efforts that are universal (targeting a group or population), selective (targeting risk factors among high-risk groups), and indicated (targeting individuals who show signs of being at risk for a substance use disorder). NIDA provides more information on this topic.
  - Foster a positive school/higher ed climate that discourages the use of illicit drugs and where students, staff, teachers, and faculty are comfortable seeking treatment and support options for themselves and others.
Incorporate opioid abuse/misuse prevention strategies into health education and behavioral health programs.

Encourage students, families, and households to dispose of unused prescription medications—which may otherwise be misused. Schools and IHEs can utilize resources on the U.S. Drug Enforcement Administration’s (DEA’s) National Rx Website, such as Public Service Announcements for Take Back Day—a day when thousands of locations accept prescription medicine for disposal.

More information on preventing drug abuse for schools is available here and for IHEs here. For parents and guardians, ED and DOJ provide the guide Growing Up Drug Free: A Parent’s Guide to Prevention.

- **Protection** is the ongoing actions schools, school districts, and IHEs take to safeguard the campus, students, teachers, faculty, and staff from an emergency event.

  - Educate the whole educational community, with the support of trained professionals such as the school nurse, on-campus health providers, counselors, and community partners (e.g., local public health authority and EMS). Provide information and training to the following:
    - Teachers, faculty, and staff—including athletic coaches and trainers and residential directors—on identifying risk signs of opioid misuse, early intervention strategies for those with environmental and risk factors, and where individuals who have abused opioids and their families can go for counseling, substance use treatment, and recovery support.
    - First responders and health department staff on administering Naloxone, when allowed by law. Due to the potency of Fentanyl, an overdose is possible by anyone accidentally coming into contact with the drug. First responders should therefore be informed about Fentanyl Safety Recommendations to help prevent an accidental overdose before or after exposure to the opioid.
    - Parents and guardians on the dangers of drug use, how to help prevent opioid misuse or abuse, and treatment options. Resources that can help include a Parent Toolkit and a Facts on Teen Drug Use Web page.
    - Middle school, high school, and higher ed students, and especially student athletes who may be prescribed opioid pain relievers by their doctor for a sports-related injury, about the risks of opioid misuse and abuse and how to safely and effectively treat or control pain. Classroom resources are available for elementary, middle, and high school students from Operation Prevention, National Institute on Drug Abuse for Teens and National Education Association Health Information Network. Chasing the Dragon: The Life of an Opiate Addict, a documentary video about the dangers of addiction, has also been released by the FBI and DEA.
Establish with community partners protocols to monitor the inventory, storage, and use of opioid antagonists that comply with state and local laws and regulations with local public health officials and general counsel. This includes identifying roles and responsibilities of responders. For schools, this could be the school nurse; for IHEs, this could be health care providers and campus law enforcement, if permitted by local and state law.

**Mitigation** is the actions schools, school districts, and IHEs take to eliminate or reduce the loss of life, injuries, and property damage from emergencies that cannot be prevented.

- Implement evidence-based screening tools, such as Screening, Brief Intervention and Referral to Treatment, for trained staff to identify the severity of substance use by middle school, high school, and higher ed students and the appropriate treatment. Additional evidence-based substance use and mental health interventions are listed in the National Registry of Evidence-based Programs and Practices, and additional support on how to incorporate evidence-based practices is provided by the Evidence-Based Practices Resource Center.
- Ensure teachers, faculty, staff, and students know the signs of drug use and addiction and where to go for help for themselves or others.
- Identify, with general counsel, and inform the campus community about state Good Samaritan laws that provide immunity from arrest, charge, or prosecution for certain drug offenses for a person experiencing an overdose — or witnessing another person experiencing an overdose — who seeks medical attention. Additional information is available from the National Conference of State Legislatures.

**Response** is activating the emergency plans of the school, school district, or IHE to effectively manage an emergency event, and provide for the immediate safety and needs of students, staff, teachers, and faculty.

- Identify how responders would be notified of an emergency and how an opioid antagonist would be administered to reverse a suspected opioid overdose.
- Identify how the privacy of an individual experiencing an overdose would be ensured by, for example, requiring students in the vicinity to return to their classrooms.

**Recovery** is teaming with community partners to assist students, staff, teachers, and faculty in the healing process, and restore a healthy and safe learning environment following an emergency event.

- Provide tailored support and services for recovery from addiction or an overdose, including (when appropriate) medication, individual or group counseling, drug screening, and other treatment. Some IHEs have established collegiate recovery programs, such as those provided by the University of Michigan and University of North Texas, to help students recover from drug or alcohol problems. More information is also available in a
Additional Resources

The following resources provide additional information on preventing drug abuse and misuse and opioid overdoses:

- **Combating the Opioid Crisis: Schools, Students, Families Web page**, ED. On this page, viewers can access information, such as the role of schools in addressing opioid misuse and what students should know and do, as well as resources including a Webinar on The Opioid Crisis and K-12 Schools: Impact and Response.

- **Federal Resources for Rural Communities to Help Address Substance Use Disorder and Opioid Misuse**, Office of National Drug Control Policy and U.S. Department of Agriculture. This guide, released by the Rural Opioid Federal Interagency Working Group, lists federal programs that can help address rural communities’ opioid misuse.

- **Naloxone in Schools Toolkit**, National Association of School Nurses. This Web page provides several resources to help school nurses and others plan for and respond to opioid emergencies, such as sample protocols, reporting forms, and presentations. Users are required to create a free account to access the materials.

- **Opioid Overdose Web page**, CDC. A variety of information and links to additional materials on opioids is available on this Web page, including how to reverse the effects of an overdose, information for patients on how to prevent opioid misuse, and promising state strategies to help prevent prescription drug overdose.

- **Opioid Overdose Prevention Toolkit**, SAMHSA. Information is provided to groups such as first responders, community members, and prescribers in this online publication, such as steps to take if you suspect an overdose.

- **Opioids.gov Web page**, This page illustrates the extent of opioid misuse in the United States and what actions are being taken by the President to address misuse.

- **Opioids Web page**, NIDA. On this Web page, NIDA describes opioids, provides data on recent trends on the prevalence of drugs, and related resources, such as articles, publications, and policy briefs.

Sample Materials

- **Guidelines for Responding to an Opioid-Related Overdose at School**, State of Michigan. This addendum to a model policy and guidelines for administering medications to students focuses on the legal framework for administering medicine, school board opioid antagonist information, training requirements for individuals designated to administer an antagonist, and storage requirements.
• **Health and Opioid Prevention Education (HOPE),** Ohio Department of Education. The HOPE curriculum is designed to provide K-12 school students with the knowledge, attitude, and skills to prevent drug abuse. Materials include lesson plans, assessments, instructional materials, and guides.

• **Heroin Abuse Prevention,** The State University of New York. Educational materials (e.g., student handouts and posters) are provided on this Web page, as well as information on Naloxone training, campus resources, and department of health regulations.

• **Naloxone Administration in Schools,** Warwick School District, Pennsylvania (PA). This policy document provides guidelines for the training of employees, storage and administration of Naloxone, indemnification, and parental notification.

• **Naloxone,** Lebanon School District, PA. Included in this policy document is the authority for administering Naloxone, delegation of responsibility, and guidelines.

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1 According to the U.S. Food & Drug Administration, drug misuse occurs when an individual uses drugs but not according to directions from their health care providers (e.g., taking two pills a day when they’ve been told to take only one). Drug abuse occurs when an individual takes drugs to get a euphoric response.


4 More information is available for schools in the OSHS/REMS TA Center fact sheet Student Perceptions of Safety and Their Impact on Creating a Safe School Environment

