



GENERAL POLICY MANUAL

SECTION:	Health and Safety	APPROVED BY:	County Council
NUMBER:	7.31	SIGNATURE:	
PAGE:	1 of 6	DATE:	January 11, 2023
REFERENCE POLICY:	5.18	REVISED:	

Opiod Exposure/Overdose Prevention

POLICY

Oxford County is committed to providing healthy and safe workplaces to its employees and recognizes that exposure to harmful substances like opioids is a possibility. This policy provides information and guidance to workers and supervisory staff who, during the course of their work duties could discover suspected opioids, are at risk of accidental exposure, and the appropriate emergency response if an exposure/overdose were to occur.

DEFINITIONS

opioids are a class of drugs that include the illegal drug heroin, synthetic opioids such as fentanyl, carfentanil and pain relievers available legally by prescription, such as oxycodone, hydrocodone and many others. Both direct and incidental contact with some opioids can be dangerous and result in death.

Synthetic opioids are particularly dangerous since they are much more potent and toxic than other drugs. Fentanyl can be up to 100 times more potent than morphine. Carfentanil can be 10,000 times more potent than morphine and 5,000 times more potent than heroin meaning even a very small amount of the drug can be deadly. Opioids are often mixed with other street drugs like cocaine or crack.

opioid overdose occurs when an opioid or combination of substances with an opioid overwhelm the body and as a consequence the central nervous system (CNS) is no longer able to control basic life functions (i.e. breathing, heart rate, body temperature, consciousness).

naloxone is an antidote to opioid overdose and binds to the same receptors in the brain that opiates do, temporarily removing the opioid's harmful effects that can lead to a fatal overdose.

Naloxone is specifically approved in Canada for layperson / bystander administration in an opioid-related emergency. The National Association of Pharmacy Regulatory Authorities and Health Canada have designated naloxone as a schedule II drug meaning it is non-prescriptive and medical directives are not required for its use.

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RESPONSIBILITIES

1.0 Responsibilities of Employer and Supervisors

- 1.1 Communicate this policy to all workplace parties and ensure it is accessible for reference.
- 1.2 Identify areas of concern in relation to potential opioid exposure/overdose in consultation with the affected employees and the applicable Joint Health & Safety Committees.
- 1.3 Make naloxone kit(s) available for use where the risk of opioid overdose reasonably exists and ensure they are maintained in good condition.
- 1.4 Provide training on how to use supplied kits. The training shall include how to recognize an opioid overdose, how to administer naloxone and acquainting employees with any hazards associated with administering naloxone.
- 1.5 Supervisors shall ensure all opioid discoveries, exposures and/or overdoses are reported as per Workplace Incident, Injury & Illness Reporting Policy 7.04.
- 1.6 Provide support to employees that have voluntarily disclosed a substance or drug dependency. Refer to Alcohol and Drug Impairment in the Workplace Policy – 5.18 for additional information. Ensure the employee is provided information on and encouraged to contact the Employee & Family Assistance Program (EFAP), their family physician or appropriate community services for assistance. Recognize that substance dependency is defined as a disability by the Ontario Human Rights Commission and are subject to the same rights of accommodation as other protected grounds.

2.0 Responsibilities of Employees

- 2.1 Report to your supervisor any areas of concern or issues related to the possibility of opioid discovery or exposure/overdose. Do not perpetuate any stigma regarding substance use or pass any moral judgment. Focus on the health & safety issue.
- 2.2 Attend information sessions and training offered by the employer on topics related to opioid exposure prevention and emergency overdose response.
- 2.3 Report all opioid discoveries and exposures/overdoses as per the County's Workplace Incident, Injury & Illness Reporting Policy 7.04.
- 2.4 Make accommodation needs known to your supervisor or Human Resources for substance or drug dependency. Refer to Alcohol and Drug Impairment in the Workplace Policy – 5.18 for additional information.
- 2.5 Employees concerned about or experiencing substance or drug-related problems are encouraged to seek assistance from the Employee & Family Assistance Program (EFAP), their family physician or appropriate community services before job performance and workplace safety is impacted.

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PROCEDURES

3.0 Discovery of Suspected Opioids

Opioids come in different forms including as a powder, liquid, transdermal patches or tablets. Opioids may also be mixed into other illicit drugs like heroin and cocaine and may accompany drug paraphernalia i.e. syringes, pipes. When a suspected opioid is discovered the following precautions shall be taken:

- 3.1 Cordon off or secure the area so other staff and/or members of the public do not access the area.
- 3.2 Call 911 to notify the Police and to receive additional instructions.
- 3.3 Do not eat, drink, smoke or use the bathroom in an area with known or suspected opioids. Do not touch your eyes, nose or mouth after touching any surface potentially contaminated with opioids. Wash hands with soap and water thoroughly. Do not use hand sanitizer or a cleaner/bleach.
- 3.4 Report the incident to your manager/supervisor and Facilities.
- 3.5 If handling of the substance is required, Facilities staff shall put on required PPE including CSA approved eye protection, disposable nitrile gloves and respiratory protection if there is a risk of respiratory exposure (at minimum a fit-tested N95 respirator).
- 3.6 If collecting the substance is required for Police put it in a sealable bag i.e. zip-lock bag doubled up. Avoid performing any tasks that may aerosolize the substance e.g. vacuuming, sweeping etc. due to increased exposure risks with particular attention to powdered substances.
- 3.7 Remove gloves by removing them inside out and avoid touching the outside of the gloves. Wash hands with soap and water thoroughly. All staff present in the area where opioids were known or suspected to be present should wash their hands thoroughly.
- 3.8 Any contaminated clothing should be removed and laundered and shower immediately after potential exposure. Reusable PPE should be washed according to manufacturer's instructions and disposable PPE disposed of in a labelled durable polyethylene bag and disposed of appropriately.

4.0 Emergency Response for Suspected Opioid Exposure/Overdose

In the event an employee discovers someone that has had an exposure/overdose to an opioid and becomes unconscious, the following response shall be implemented if it is safe to do so and they are trained on how to use naloxone:

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- 4.1 Shake and shout the affected person.
- 4.2 Look, listen and feel for signs of an opioid overdose, which could include:
 - Breathing is very slow, erratic or not at all
 - Finger nails and or lips are blue or purple
 - Body limp
 - Deep snoring or gurgling sounds
 - Vomiting
 - Loss of consciousness
 - Unresponsive to stimuli
 - Pin point pupils
- 4.3 Apply painful stimuli (sternal rub: rub your knuckles on their chest 5-10 seconds).
- 4.4 Observe for cause of the collapse (i.e. drug paraphernalia, unknown substance).
- 4.5 If unresponsive, call 911 and provide location and/or address and additional details including:
 - Describe signs and symptoms observed, treatment administered, person's status
 - Provide information about substance or drug paraphernalia found
- 4.6 If drug overdose is suspected retrieve a naloxone kit if available and administer as per instructions.
- 4.7 Perform CPR, if trained.
- 4.8 If available attach AED, turn on and follow automated instructions.
- 4.9 Continue CPR until EMS arrives.
- 4.10 When the naloxone starts working the individual may:
 - Wake up suddenly
 - Wake up slowly
 - Be disorientated
 - Users may want to use more drugs
 - Be agitated and may become combative, the last thing the individual likely remembered was feeling good. Naloxone temporarily takes this feeling away.
- 4.11 Update arriving first responders on circumstances and actions taken.
- 4.12 Report the incident to your manager/supervisor and arrange for a debriefing with staff after the event. Ensure the required workplace incident reports are completed.

5.0 Naloxone Kit Locations

- 5.1 Naloxone kits are available at designated Oxford County workplace locations and the list is reviewed regularly. Refer to attachment 7.31A for exact locations.

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6.0 Additional Resources

- 6.1 Fentanyl and Carfentanil Exposure in Health and Community Care Workers – PSHSA - https://www.pshsa.ca/wp-content/uploads/2017/11/OOHFCAEN0917-Fentanyl-and-Carfentanil-Exposure-Fast-Fact_Jan-2-2018.pdf
- 6.2 Opioid Overdose Management - Ontario Poison Centre - <http://www.ontariopoisoncentre.ca/health-care-professionals/Opioid-Management/opioid-management.aspx>
- 6.3 Opioids, Naloxone and Needle Exchange – Southwestern Public Health - <https://www.swpublichealth.ca/en/my-health/opioids-naloxone-and-needle-exchange.aspx>
- 6.4 Protecting Workers at Risk from Fentanyl – CDC/NIOSH - <https://www.cdc.gov/niosh/topics/fentanyl/workerrisk.html>
- 6.5 Understanding Opioids – Province of Ontario <https://www.ontario.ca/page/understanding-opioids>

Workplace Naloxone Kit Locations

- Oxford County Administration Building -
 - 21 Reeve Street, Woodstock
- Oxford County Paramedic Stations –
 - 377 Mill St, Woodstock
 - 208 Bysham Park Drive, Woodstock
 - 162 Carnegie Street, Ingersoll
 - 81 King Sreet, Tillsonburg
 - 895939 Oxford Road #3, Drumbo
 - 6 Tidey Street, Norwich
 - 884135 Oxford Road #88, Embro
- Woodingford Lodge sites –
 - 300 Juliana Dr, Woodstock
 - 52 Venison Street West, Tillsonburg
 - 325 Thames Street South, Ingersoll
- Oxford County Library sites –
 - 130 Oxford Street, Ingersoll
 - 2 Library Lane, Tillsonburg
 - 10 Tidey Street, Norwich
 - 165 Dundas Street, Thamesford
- Oxford County Waste Management Facility –
 - 384060 Salford Road, Salford