

# Fentanyl and Opioids: Preventing Overdoses and Related Emergencies at K-12 and Higher Education Campuses

READINESS AND EMERGENCY MANAGEMENT FOR SCHOOLS TECHNICAL ASSISTANCE CENTER

## Introduction

Despite the elevation of the opioid crisis in the U.S. to the level of a [nationwide public health emergency](#) in 2017, the [number of opioid-involved overdose deaths](#) has continued to rise. The latest [Monitoring the Future](#) survey indicates that adolescent drug use in the United States has declined since 2010; however, the number of overdose deaths has increased, and [data reported to the Centers for Disease Control and Prevention \(CDC\)](#) shows that this increase was greater among adolescents than in the general population.

The impact of the opioid epidemic extends well beyond the tragedy of fatal overdose. [Nonfatal overdose can result in brain injury and permanent disability](#), and [research](#) suggests that between 20 and 30 nonfatal overdoses occur for every overdose death. K-12 students affected by opioid abuse in the home face a number of challenges that can interfere with their educational engagement and success. [Evidence](#) indicates that children whose parents abuse opioids are at risk of experiencing trauma, school absences, behavioral issues, and even displacement from the home—all factors that can negatively affect educational and socioemotional outcomes. Similarly, [research shows that](#) college students who engage in drug use are more likely to experience gaps in

**Opioids** are a class of pain-relieving drugs that includes:

- Pharmaceutical (prescription) medications
- Illegal drugs such as heroin
- Fentanyl

**Fentanyl** is a potent synthetic opioid that is:

- 50 to 100 times stronger than morphine
- Diverted from legal prescriptions or illegally manufactured and distributed
- Much stronger and less expensive to produce than heroin

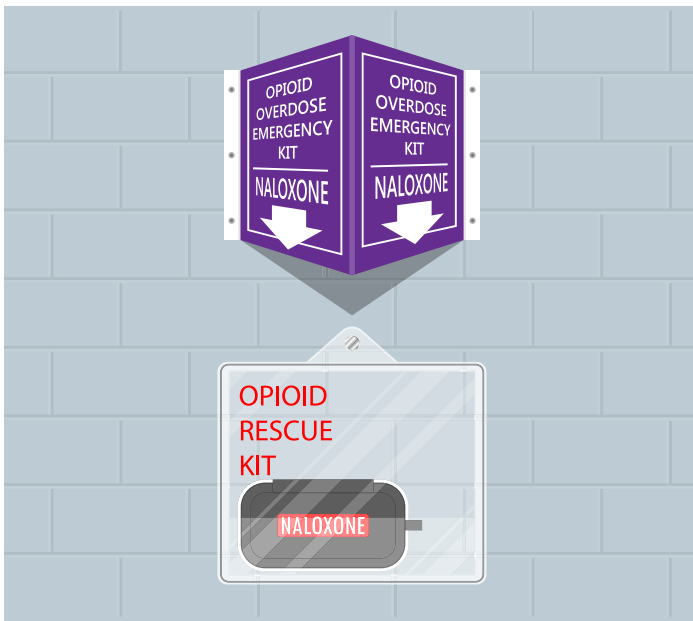
enrollment, prolonged time to graduation, failure to graduate, and even lifelong struggles with addiction.

Opioid misuse and addiction can happen to anyone. Opioid overdose can happen at any time, in any location, including on K-12 school and higher education campuses and during school-sponsored activities off campus. Students, faculty members, and school staff members who misuse opioids risk overdose, and the presence of opioids on campus increases the likelihood that this will occur in the school environment. Potential overdose and the traumatic impact of an opioid-related emergency constitutes a human-caused threat to education agencies that should

According to the [2020 Drug Enforcement Administration \(DEA\) National Drug Threat Assessment](#), nonprescription fentanyl that is produced as pills or powder in foreign laboratories and trafficked into the U.S. is primarily responsible for fueling the ongoing opioid crisis.

be considered in emergency management planning. Planning teams at K-12 schools and institutions of higher education (IHEs) can specifically address the risk of opioid-related emergencies, including overdose, in their emergency operations plans (EOPs) by including a Threat- and Hazard-Specific Annex for drug overdose. This fact sheet provides information and strategies for addressing opioid overdoses at K-12 schools and IHEs through EOPs and other preparedness activities.

## Naloxone



Opioids act through receptors found on nerve cells throughout the body to relax breathing, slow pain signals in the nervous system, and produce feelings of comfort and sleepiness. Because of these effects, pharmaceutical opioids may be prescribed to reduce coughing, relieve pain, and calm the body. These same effects become dangerous and even deadly during an overdose, when breathing may slow too

much or even stop. According to the [Substance Abuse and Mental Health Services Administration's \(SAMHSA\) Opioid Overdose Prevention Toolkit](#), most opioid-related deaths occur when an individual experiences respiratory depression (slowed breathing) or respiratory arrest.

[CDC data](#) indicate that between 2019 and 2021, 90 percent of adolescent overdose deaths involved opioids. Tragically, although a bystander was present in two-thirds of these deaths, most did not or could not intervene. Naloxone is a nonaddictive medication that, when administered in time, can temporarily reverse the respiratory arrest of someone experiencing an opioid overdose and restore breathing. It can be administered by nonmedical personnel and is available as an injection or a nasal spray. K-12 schools and IHEs can obtain and stock naloxone kits in accordance with state and local laws and district policies.

### Naloxone Access

Naloxone access is regulated by state. There is no federal standing order authorizing access to naloxone; however, as of August 2020, all 50 states and the District of Columbia have laws that allow individuals to obtain access to naloxone. [SAFE Project's State Naloxone Access Rules and Resources Web page](#) lists access laws by state and provides links to additional information, and the [Temple University Center for Public Health Law Research's Prescription Drug Abuse Policy System](#) includes additional details regarding state laws that protect individuals from liability and prosecution, as well as state mechanisms allowing pharmacies to distribute naloxone without patient-specific prescriptions. Naloxone can also be obtained from [community-based naloxone programs](#) and many [syringe services programs](#). More information on how to obtain and administer naloxone can be found on the [CDC's Stop Overdose: Lifesaving Naloxone Web page](#).

## CALL 911

EVEN WHEN NALOXONE IS AVAILABLE for administration, it is critical to seek immediate emergency medical attention in the event of a suspected overdose. The highly potent nature of an opioid taken in a large quantity may require more than one dose of naloxone, and individuals must be monitored for several hours after naloxone administration to ensure that their breathing has stabilized, and overdose effects do not recur.

A new bill was introduced in Congress in April 2023 as the School Access to Naloxone Act of 2023. It would expand the grants for reducing overdose deaths authorized under Section 544 of the Public Health Service Act and offer new grant opportunities directed at providing U.S. schools with funding to access and administer naloxone.

In [Evidence-Based Strategies for Preventing Opioid Overdose](#)—a guide for public health officials, law enforcement officials, local organizations, and others striving to serve their community—the CDC lists 10 strategies for preventing overdose that have been successfully implemented in the U.S.; targeted naloxone distribution is first on this list. Targeted naloxone distribution programs provide naloxone kits to individuals who are most likely to witness an overdose and train them on the use of naloxone to reverse an overdose. Although naloxone is not difficult to administer, K-12 and IHE communities will be best prepared to administer it when members are comfortable with how and when to do so. Schools and campuses that elect to stock naloxone can ensure that this is the case by providing appropriate training. Educational agencies can obtain more information on naloxone training through local public health officials and [state public health agencies](#).

## Emergency Operations Plans

Schools and IHEs can take a proactive approach to preventing opioid overdoses and related emergencies by developing, implementing, and maintaining comprehensive EOPs. The [Guide for Developing High-Quality School Emergency Operations Plans](#), [The Role of Districts in Developing High-Quality School Emergency Operations Plans](#), and the [Guide for Developing High-Quality Emergency Operations Plans for Institutions of Higher Education](#) (Guides) indicate that comprehensive EOPs should include annexes to address different types of threats and hazards, including adversarial and human-caused threats. These annexes describe goals, objectives, and courses of action for specific threats to school/campus safety, such as opioid overdoses and other drug overdoses. Following the [six-step planning process](#) outlined in the Guides, core planning teams can collaboratively develop a Drug Overdose Annex.

During the six-step process, planning teams form and collaborate (Step 1) to collect information that allows them to understand situations in the school community and identify potential threats and hazards (Step 2). With this information, planning teams address threats and hazards in the EOP, identify emergency management functions, and set goals and objectives (Step 3); identify courses of action (Step 4); and format annexes and develop a Basic Plan (Step 5). Planning teams also maintain the EOP through training, exercises, and revisions (Step 6). In the process of developing a Drug Overdose Annex, core planning teams may wish to consider the following.

### Step 1: Form a Collaborative Planning Team

Include individuals and organizations from within the school/campus community and those who work outside of the local community with subject matter expertise. Depending on their role, they may serve on the core planning team or the ad hoc planning team. In addition to experts who can provide experience, knowledge, and links to key community partners, those with lived experience of opioid use disorder (OUD) and overdose can provide critical perspective for the development of successful courses of action. Consider including or consulting with:

- The school nurse and campus health care providers;
- School/campus counselors, psychologists, and mental/behavioral health professionals;
- Local substance use disorder support organizations;
- Local emergency medical services personnel;
- Local public health officials;
- Local mental/behavioral health practitioners; and
- Individuals with lived experience in coping with OUD and overdose, including family members, overdose survivors, and those recovering from substance use disorder (SUD).

### Step 2: Understand the Situation

Develop a comprehensive list of possible threats and hazards using a variety of data sources. Evaluate their risks and vulnerabilities, and then prioritize. Potential sources of data for drug overdoses (including opioid-related emergencies) may include culture and climate



assessments, capacity assessments, and information from the school/campus community and from local, state, and Federal partners. Below are some opioid-specific considerations when collecting this information.

### *Culture and Climate Assessments*

- Collect information regarding student engagement and connectedness, two evidence-based protective factors against substance use in adolescents.
- Include evaluation of faculty/staff and student attitudes toward SUD and recovery to identify persisting stigma or misperceptions.

### *Capacity Assessments*

- Include evaluation of faculty/staff and student knowledge of lifesaving techniques, such as CPR, as well as any training in the administration of naloxone.
- Evaluate the availability of overdose-specific equipment and supplies, such as naloxone kits and medical equipment for all individuals, including those with functional needs and those with access needs.

### **Step 3: Determine Goals and Objectives; Step 4: Plan Development (Identifying Courses of Action); and Step 5: Plan Preparation, Review, and Approval**

If the planning team selects drug overdose as a threat to address in the EOP, then the next task is to set goals (broad, general statements that indicate the desired outcome) and objectives (specific, measurable actions that are necessary to achieving the goals) for drug overdoses. Then the team should develop courses of action (specific procedures used to accomplish goals and objectives that address the what, who, when, where, why, and how). These goals, objectives, and

courses of action will form the Drug Overdose Annex, which will then be reviewed and formatted. Throughout the development of the Drug Overdose Annex, the core planning team should consider the before, during, and after phases of such an emergency, as well as all five [National Preparedness System mission areas](#): prevention, protection, mitigation, response, and recovery. Below are examples of how each mission area connects to drug overdoses and opioid-related emergencies.

- **Prevention:** Prevent an opioid overdose from occurring on campus or within the school/campus community.
- **Protection:** Protect students, faculty members, and staff members from an opioid overdose or emergency in all settings and at all times.
- **Mitigation:** Reduce the likelihood that an opioid overdose will happen, as well as eliminating or reducing the loss of life by lessening the impact of an opioid overdose.
- **Response:** Stabilize an opioid-related emergency once it has happened. Establish a safe and secure environment. Save lives. Facilitate the transition to recovery.
- **Recovery:** Restore the learning environment after an opioid overdose.

In addition to threat- and hazard-specific annexes, comprehensive EOPs contain [functional annexes](#) to address the critical operational functions that apply across multiple threats and hazards. The *Guides* recommend that school and higher-ed EOPs include annexes for at least 10 cross-cutting functions, such as continuity of operations; recovery; security; and public health, medical, and mental health. The latter outlines how an educational agency will address emergency medical (e.g., first aid), public health, and mental health counseling issues, and it will most likely be activated

before, during, and after opioid-related emergencies and overdoses. When developing the Drug Overdose Annex, planning teams should reference the [Public Health, Medical, and Mental Health Annex](#) and any other relevant functional annexes. For example, during an opioid overdose, courses of action may include the engagement of staff members with relevant medical training and experience (e.g., CPR training) and the use of emergency medical supplies, such as naloxone kits. These courses of action should indicate “see Public Health, Medical, and Mental Health Annex,” as it identifies staff members with medical and mental health training, as well as the location of emergency medical supplies.

## Step 6: Implement and Maintain the Plan

The final step in the planning process involves continual maintenance of the EOP, including the Drug Overdose Annex. During this step, stakeholders are trained in their roles and responsibilities for all three phases of an opioid overdose and engage in exercises to practice execution and identify any gaps or weaknesses that require revisions or updates.

### Awareness and Training

In addition to creating a Drug Overdose Annex for their EOP, schools and IHEs should consider ways to increase opioid overdose awareness and preparedness for all members of the school or campus community. These include general considerations and activities that apply to multiple groups, as well as strategies specific to one or more individual roles.

#### General Considerations

##### *Policies and Protocols*

All school and IHE faculty and staff members need clear policies and procedures for addressing suspected opioid use by other faculty and staff members, as well as all students, including students with overlapping mental health struggles and identified disabilities. Faculty members, staff members, parents, and students need to be prepared to:

- Recognize signs of possible opioid use in students, faculty members, staff members, and family members;

- Report concerns to appropriate individuals according to established protocols;
- Recognize the signs of opioid intoxication, withdrawal, and overdose;
- Respond to an overdose; and
- Support and monitor students who have been in substance use treatment or who are recovering from an overdose.

Students, faculty members, staff members, and parents should be informed at the start of the academic year about policies and procedures. Core planning teams should consider confidentiality, medical safety, and stigma when developing policies and protocols for opioid awareness and preparedness.

##### *Stigma*

In addition to initiatives that provide information and education on the topics of opioids, overdoses, and naloxone, educational agencies should provide training and education to reduce stigma associated with substance use and addiction. Stigma discourages individuals struggling with SUD from seeking help and can undermine their recovery. Trainings should include efforts to counter false perceptions about SUD—including attitudes, beliefs, and behaviors of the school/campus community—as well as internalized negative stereotypes. The [CDC’s Stop Overdose: Stigma Reduction Web page](#) provides information

#### Resources for Schools

Many states have developed online resources for opioid overdose prevention and policy development strategies specific to the school setting, such as:

- The New York State Department of Health’s [Opioid Overdose Prevention Resources for School Settings](#) and
- The Washington State Office of Superintendent of Public Instruction’s [Opioid-Related Overdose Policy Guidelines & Training in the School Setting](#).

More resources and tools developed by school and higher-ed emergency managers in the field are included in the [REMS TA Center Tool Box](#).

and resources for reducing stigma and understanding addiction to support recovery.

### Trauma

[Trauma-informed practices](#) and positive behavior supports are critical to supporting students and staff members struggling with OUD, individuals recovering from a personal or witnessed overdose, and students at greatest risk of SUD. Approximately 41 percent of adolescent drug overdose deaths reported to the CDC's State Unintentional Drug Overdose Reporting System (SUDORS) were among youth with histories of mental health conditions. Poor mental health and adverse childhood experiences are both associated with increased risk of substance use in adolescents, and known mental health conditions and traumatic experiences represent opportunities for parents, caregivers, teachers, clinicians, and friends to recognize signs of opioid misuse and intervene. To ensure that appropriate training and support are available to all faculty members and staff members, schools and IHEs can collaborate with local and state health departments, where knowledge, resources, and services are available.



Collaborative partnerships are essential to addressing the opioid crisis in schools and IHEs. The opioid epidemic has placed increasing stress on school districts, individual schools, and IHEs to provide increased social and emotional support services to students, family members, faculty members, and staff members. Prevention skills training is no longer sufficient to address the impact of opioids on the education community. Administrators, faculty and staff members, parents and families, and students must all take an active role in engaging in opioid awareness and preparedness initiatives.

## Strategies for Specific Roles

### Administrators

- **Collaborate with Federal, state, and local health agencies and organizations to provide opioid, overdose, and naloxone awareness education and training.** The [SAMHSA Opioid Overdose Web page](#) provides information on preventing, recognizing, and treating opioid overdoses, as well as the free [Opioid Overdose Prevention Toolkit](#). The [landing page for the CDC's Stop Overdose campaign](#) includes educational resources on fentanyl, naloxone, polysubstance use, stigma reduction, and implementation toolkits for different audiences.
- **Incorporate comprehensive substance use prevention programs into school and IHE curricula.** [SAMHSA's Selecting Best-Fit Programs and Practices: Guidance for Substance Misuse Prevention Practitioners](#) offers a strategic approach for selecting evidence-based substance misuse prevention programs and planning, adopting, and adapting practices.
- **Establish systems and engage with faculty members to track students who are chronically absent, have withdrawn from social or extracurricular activities, or have exhibited a significant decline in academic performance.** Any of these may indicate declining mental health, difficulties in the home, having had a traumatic experience, or substance use. Provision of a higher level of support to students struggling to cope with these challenges can help to avert involvement with or increased use of substances.

### School Nurses and Campus Health Care Providers

- **Stock naloxone kits where permitted by law and policy.** Naloxone does expire, so create a plan for checking expiration dates and obtaining replacement kits on a regular basis.
- **Engage in naloxone administration training programs.** Online trainings such as [Get Naloxone Now's online training modules for bystanders and first responders](#) are available at no cost. [SAMHSA's Opioid Overdose Prevention Toolkit](#) details five essential steps for first responders—describing signs of an overdose, how to determine the responsiveness of an individual experiencing

an overdose, and how to support breathing and monitor someone's response to naloxone.

- **Watch for signs of opioid use and misuse in students who present with other conditions.** Symptoms such as nausea and vomiting may indicate flu or food poisoning, but when accompanied by confusion, sleepiness, or difficulty breathing, it could also indicate opioid intoxication. Know the signs and symptoms and what to do next. The [CDC's Addiction Medication Primer](#) and free [training modules](#) are designed for health care professionals.

### *Faculty Members and School/Campus Staff Members*

- **Intentionally create a safe environment and positive culture for students.** Remember, school connectedness and engagement are factors associated with decreased substance use among adolescents.
- **Incorporate opioid and substance misuse education into lesson plans, projects, and prevention initiatives.** The National Institute on Drug Abuse (NIDA) offers [lesson plans, resources, and activities](#) for educators of teens. [Operation Prevention's school resources on opioids and prescription drugs](#) include engaging tools for educators at the elementary, middle, and high school levels. [Campus Drug Prevention](#) offers substance misuse prevention resources for IHE-based prevention professionals, students, and campus community members.
- **Get involved in national prevention and education initiatives.** NIDA's [National Drug and Alcohol Facts Week](#) brings together scientists, students, educators, health care providers, and community partners to address youth substance use. Educators can plan or participate in events during this week of activities.

### *Parents/Family Members*

- **Talk to children about opioids and overdose.** Protective factors against substance use in adolescents include family engagement and parent or guardian disapproval of substance use. NIDA offers resources for parents and families, including [Start a Conversation: 10 Questions Teens Ask About Drugs and Health](#), which is based on more

than 100,000 questions received from young people during NIDA's [National Drug and Alcohol Facts Week](#) for students, parents, caregivers, and teachers. [Operation Prevention's Parent Toolkit](#) includes a guide for having family discussions about opioid misuse.

- **Seek knowledge.** Information for laypeople on preventing and managing overdose is available from [Prevent & Protect](#), and the [CDC's Stop Overdose Web page](#) was created as a resource library for people who use drugs and for their loved ones.

### *Students*

- **Stay in the know.** The DEA's [Just Think Twice](#) Website includes facts and information about fentanyl and other opioids, as well as a variety of other substances. NIDA's [Mind Matters Series](#) includes pamphlets that detail the ways different drugs affect one's brain, body, and life in general.
- **Get help.** Students struggling with SUD, including OUD, can find confidential and anonymous information about treatment on [SAMHSA's FindTreatment.gov Website](#) or through the National Helpline at 1-800-662-HELP (4357), as well as free and confidential support in a crisis from the [988 Suicide & Crisis Lifeline](#).



These potential strategies do not represent a comprehensive list but do illustrate the importance of engaging individuals in all roles in the process of emergency management planning for opioid overdoses on school and IHE campuses. Opioid misuse and overdose are complex threats with far-reaching effects and can only be addressed through deliberate and strategic collaboration.

## Resources

### Further Reading – REMS TA Center

- [Addressing Adversarial and Human-Caused Threats That May Impact Students, Staff, and Visitors](#), Web Page
- [Supporting Efforts to Create a Public Health, Medical, and Mental Health Annex as a Part of Your Emergency Operations Plan](#), Web Page

### Training Opportunities – REMS TA Center

- [Opioids, Drug-Related Emergencies, and Substance Abuse Prevention Before, During, and After the COVID-19 Pandemic](#), Podcast
- [Understanding the Role of School Nurses in Supporting School Safety Before, During, and After an Emergency](#), Webinar
- [Opioids, Drug-Related Emergencies, and Substance Abuse Prevention Before, During, and After the COVID-19 Pandemic](#), Webinar

### Further Reading – Fentanyl

- [Knowing the Facts About Fentanyl](#), Webinar (U.S. Department of Education)
- [Preventing and Addressing Fentanyl Use](#), Webinar (U.S. Department of Education)
- [Drug Fact Sheet: Fentanyl](#), Publication (U.S. Department of Justice, Drug Enforcement Administration)
- [Stop Overdose: Fentanyl Facts](#), Web Page (U.S. Department of Health and Human Services, Centers for Disease Control and Prevention)
- [Communities Talk About: Preventing Fentanyl Use by Youth and Young Adults](#), Webinar (U.S. Department of Justice, Drug Enforcement Administration)

- [One Pill Can Kill](#), Website (U.S. Department of Justice, Drug Enforcement Administration)

### Further Reading – Opioid Overdose Prevention

- [Preventing Opioid Overdose](#), Web Page (U.S. Department of Health and Human Services, Centers for Disease Control and Prevention)
- [SafeProject.us](#), Website (Stop the Addiction Fatality Epidemic [SAFE] Project)
- [Opioid Overdose Prevention](#), Webinar (U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, Mental Health Technology Transfer Center Network)
- [Opioids, Overdose and Naloxone Administration](#), Webinar (U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, Mental Health Technology Transfer Center Network)

### Further Reading – Opioid and Other Substance Use Prevention

- Preventing Drug Misuse Among College Students, [Part 1](#) and [Part 2](#), Videos (U.S. Department of Justice, Drug Enforcement Administration)
- [Preventing and Reducing Youth and Young Adult Substance Misuse: Schools, Students, Families](#), Web Page (U.S. Department of Education)
- [Tips for Teens: The Truth About Opioids](#), Fact Sheet (U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration)

