
	<p>Signed by:</p> <p>By:   Karyn L. Tribble, PsyD, LCSW, Director</p>
<p><b>POLICY TITLE</b></p> <p><b>Naloxone Distribution Program (NDP)</b></p>	<p><b>Policy No: 150-1-5</b></p> <p><b>Date of Original Approval:</b> 3/2/2023</p> <p><b>Date(s) of Revision(s):</b> 7/14/2025</p>

## PURPOSE

The purpose of this policy is to ensure that the Alameda County Behavioral Health Department (ACBHD) establishes and maintains a Naloxone Distribution Program (NDP) to address the opioid epidemic and facilitate the safe storage and distribution of intranasal naloxone obtained through the ACBHD Office of the Medical Director.

## AUTHORITY

- [California Civil Code §1714.22](#)

## SCOPE

All ACBHD County-Operated and owned programs, County Substance Use Disorder (SUD) programs, as well as affiliated programs and partners (hereinafter, “qualified programs and entities”) that participate in the ACBHD NDP, are required to adhere to this policy.

## POLICY

Naloxone is indicated to reverse opioid overdoses caused by natural or synthetic opioids. The ACBHD NDP aims to help reduce opioid-related overdose deaths through the provision of free naloxone nasal spray. The ACBHD NDP will:

- Allow community organizations and other entities in California that are not currently working with a physician to supply naloxone to individuals at risk of an opioid-related overdose or to family members, friends, or others in a position to assist;
- Allow the administration of naloxone by a family member, friend, or another individual to a person experiencing or reasonably suspected of experiencing an opioid-related overdose; and
- Allow for naloxone to be available for use during suspected opioid emergencies at approved locations.

## PROCEDURE

Through the California Department of Health Care Services (DHCS) Naloxone Distribution Program, eligible entities may request free naloxone nasal spray from DHCS. The ACBHD Office of the Medical Director will receive and store naloxone shipments from the DHCS NDP for distribution to qualified programs and entities serving the communities in the County of Alameda, as well as county individuals. Programs participating in the ACBHD NDP will have access to this naloxone supply, and these programs will be responsible for ordering the supply from the ACBHD Office of the Medical Director and for providing and documenting staff training for their program.

Naloxone products received through the NDP may not be submitted for reimbursement of any type, including, and not limited to, private pay, commercial, government authority, or agency.

Qualified programs and entities will track and report to the ACBHD Office of the Medical Director the following information, which will be reported to DHCS:

- A. Number of doses of naloxone distributed; and
- B. Number of known opioid-related overdose reversals that occurred using naloxone supplied by the ACBHD NDP.

**I. Procedure for the ACBHD Office of the Medical Director**

- A. The ACBHD Office of the Medical Director Naloxone Supply, Procurement, and Storage
  1. The ACBHD Office of the Medical Director will submit applications to the DHCS NDP annually or as indicated by the DHCS.
  2. DHCS will deliver shipments of naloxone to:  
ACBHD Office of the Medical Director  
2000 Embarcadero, 4<sup>th</sup> Floor  
Oakland, CA 94606
  3. Storage of the ACBHD Office of the Medical Director's naloxone supply:
    - a. Naloxone will be stored in a safe and secure location.
    - b. Naloxone will be inventoried quarterly.
    - c. Naloxone will be stored at:  
ACBHD Office of the Medical Director  
2000 Embarcadero, 4<sup>th</sup> Floor  
Oakland, CA 94606
  4. Questions regarding the product or shipment of the product should be directed to:  
[narcancustomerservice@ebsi.com](mailto:narcancustomerservice@ebsi.com).
- B. The ACBHD Office of the Medical Director will track the number of known opioid-related overdose reversals as reported by qualified programs and entities.
- C. For each naloxone order provided to qualified programs and entities, the ACBHD Office of the Medical Director will record the following:
  1. The program name.
  2. The distribution date.
  3. The quantity provided.
  4. The expiration date.
  5. The Lot number.
- D. The ACBHD NDP records will be maintained for at least three (3) years. Records will include shipments received and units allocated to County programs.
- E. Information regarding the number of known opioid-related overdose reversals that occurred using naloxone supplied by the ACBHD NDP will be reported to [naloxone@dhcs.ca.gov](mailto:naloxone@dhcs.ca.gov) as required by DHCS.

**II. Procedure for Qualified Programs and Entities**

- A. Qualified programs and entities are eligible to participate in the ACBHD NDP.
- B. Participating programs are required to receive naloxone exclusively for distribution through the ACBHD NDP.
- C. Each program shall have a designated staff person(s) who will coordinate naloxone distribution, including program enrollment, initial order, reordering, supply pickup, and tracking and reporting opioid-related overdose reversals.
- D. Qualified programs and entities participating in the ACBHD NDP must adhere to this policy but may also write their own site-specific policy and procedure. Site-specific policies and procedures must align with this policy.
- E. ACBHD NDP Enrollment and Obtaining Initial Supply of Naloxone

1. Designated program staff will complete and submit the [ACBHD Naloxone Distribution Program](#) online form to enroll in the ACBHD NDP and order their initial supply of naloxone.
  2. Program staff will receive a confirmation email from the ACBHD Office of the Medical Director once the initial supply is approved and available for pickup.
  3. The requested naloxone will typically be ready one week after the initial request is received.
- F. Naloxone Storage for Participating Programs
1. Naloxone must be stored in a safe and secure location and will not be in immediate access to clients, the general public, or untrained staff (exception: Naloxone Stand Box or Emergency Wall Mount).
  2. The Board of Pharmacy has clarified that naloxone obtained through the DHCS NDP under a standing order pursuant to Civil Code §1714.22 is not a pharmaceutical that will be used in the healthcare setting and is exempt from Title 22 Cal. Code Regs. §70265, Business and Professions Code §4068, and Business and Professions Code §4076. Thus, it does not need to be maintained, stored, or labeled in compliance with Business and Professions Code §4068.
    - a. Manufacturers recommend storage at controlled room temperatures (between 59°F and 77°F) and away from direct light.
  3. Naloxone is not required to be stored within a medication room. However, if stored in a medication room, they must be stored separately from other medications.
  4. Naloxone should not be removed from the packaging until it is ready for use.
- G. Participating Program Staff Training
1. Staff distributing naloxone are required to receive training on opioid overdose prevention and treatment.
  2. Minimum training requirements:
    - a. The causes of an opioid overdose.
    - b. Recognizing signs and symptoms of overdose.
    - c. Opioid overdose treatment:
      1. Contacting appropriate emergency medical services (call 911).
      2. Administering rescue breathing and chest compressions.
      3. Administering the intranasal naloxone.
      4. Placing the subject in the recovery position.
  3. Each program will maintain records of all staff who have completed training. Refer to the example training log template in Appendix B.
  4. Approved training programs/resources:
    - a. Recommended staff training:
      1. [How to Use Narcan with the DOPE Project](#)
      2. [Administering Naloxone—Training Video](#)
- H. Naloxone Distribution to Clients
1. Naloxone will be distributed by clinical and non-clinical staff who have completed naloxone distribution training.
  2. Staff are required to provide appropriate counseling on naloxone to individuals who receive naloxone through the program.
    - a. Written educational material is encouraged to be given to the client with naloxone. Written material can be found at [narcan.com](http://narcan.com).
  3. If naloxone is administered at the program for an emergency, follow the program's guidelines and policies for an emergency response.
  4. Active clients of qualified programs and entities are eligible to receive naloxone if they:
    - a. Currently use opioids, have a history of opioid use, or are in frequent contact with individuals who use opioids;
    - b. Are at risk for an opioid-related overdose or in contact with someone at risk (including individuals who use stimulants or other agents which may be contaminated with or confused with opioids);
    - c. Are in a position to assist during an opioid-related overdose;
    - d. Request naloxone, regardless of history.
  5. Labeling naloxone is not required; however, programs may choose to do so.

I. Documentation

1. Qualified programs and entities will track the number of known opioid-related overdose reversals that occurred using the naloxone supplied by the ACBHD NDP.
2. Naloxone distribution will be documented in the Naloxone Distribution Log (Appendix A) and will include the following:
  - a. Date of distribution.
  - b. Quantity given.
  - c. Staff name.
  - d. Client name.
  - e. When naloxone is provided directly to the client from a clinician or staff member, document that overdose prevention education was provided to the client.
    1. Suggested language for documentation: "Per protocol, naloxone was supplied directly to the client to reduce the risk of fatal opioid overdose by a staff member who has completed training in overdose prevention. Instructions for naloxone use were reviewed with the client."
  - f. Number of known opioid-related overdose reversals from the ACBHD NDP supply, as reported by the client.
3. Naloxone distribution records and staff training records will be maintained for at least three (3) years.

J. Reordering Naloxone and Reporting Opioid-Related Overdose Reversals to the ACBHD NDP

1. Designated program staff will submit the [ACBHD Naloxone Distribution Program](#) online form to order additional naloxone supply and report opioid-related overdose reversals.
  - a. The number of known reversals that occurred using naloxone supplied by the ACBHD NDP since the last ordering/reordering of the supply will be reported on the form.
2. Program staff will receive a confirmation email from the ACBHD Office of the Medical Director once the reorder supply is available for pickup.
3. The requested naloxone will typically be ready one week after the request is received.

**NON-COMPLIANCE**

Any failure to comply with this policy may result in formal actions, including and up to formal sanctions as outlined in ACBHD policy 1302-1-1 "Contract Compliance and Sanctions for ACBHD-Contracted Providers."

**CONTACT**

ACBHD Office	Current Date	Email
Office of the Medical Director	2/4/2025	<a href="mailto:ACBHParmacy@acgov.org">ACBHParmacy@acgov.org</a>

**DISTRIBUTION**

This policy will be distributed to the following:

- ACBHD Staff
- ACBHD Contract Providers
- Public

**ISSUANCE AND REVISION HISTORY**

<i>Policy &amp; Procedure: Alameda County Behavioral Health Department Naloxone Distribution Program</i>	<b># 150-1-5</b>
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**Original Date of Approval:** 3/2/2023 by Karyn L. Tribble, PsyD, LCSW, Behavioral Health Director

<b>Revision Authors</b>	<b>Reason for Revision</b>	<b>Date of Approval by (Name, Title)</b>
Marnie Noel, PharmD, BCPP	Program updates	7/14/2025 by Karyn L. Tribble, PsyD, LCSW, Behavioral Health Director
Charles Raynor, PharmD		

## DEFINITIONS

<b>Term</b>	<b>Definition</b>
<b>Naloxone</b>	An opioid antagonist received by the NDP used for the acute treatment of opioid overdose and refers to the intranasal formulation.

## APPENDICES

- A. Naloxone Distribution Log
- B. Opioid Overdose Prevention and Treatment Staff Training Log

**Appendix A**

**Naloxone Distribution Log**

**Program Name:** \_\_\_\_\_

Date	Client Name (Last, First)	Client ID	Quantity Dispensed	Dispensing Staff (Last, First)	Overdose Prevention Education Completed	Number of known reversals from NDP supply, per client

**Appendix B**

**Opioid Overdose Prevention and Treatment Staff Training Log**

**Program Name:** \_\_\_\_\_

Staff Name	Email	Method of Staff Training Completion	Date of Completion