September 27, 2017

TO: The Honorable John J. Cullerton, Senate President  
The Honorable Bill Brady, Senate Republican Leader  
The Honorable Michael J. Madigan, Speaker of the House  
The Honorable Jim Durkin, House Republican Leader

FROM: Tony Smith, Ph.D.  State Superintendent of Education

SUBJECT: Report of Use of Opioid Antagonist, School Year 2016-17

On behalf of the Illinois State Board of Education, which is required under Public Act 99-0480, Section 22-30 of the Illinois School Code [105 ILCS 5/22-30] to issue this report, I am pleased to submit the Report of Use of Opioid Antagonist, School Year 2016-17. This particular report summarizes the administration of an opioid antagonist (antidote) as reported to ISBE during the 2016-17 school year.

A summary of the major findings is provided:

- The school districts, public schools, and nonpublic schools are allowed to maintain a supply of opioid antagonist (antidote) and have trained personnel to recognize and respond to an overdose of an opioid-containing drug (heroin or prescription drugs) by any trained personnel the staff member believes is having an overdose. A report (Form 34-20A) is to be provided to ISBE within three days of the incident that required the use of opioid antagonist from the undesignated supply.

- One Illinois school reported one use of the opioid antagonist during the 2016-17 school year.

If you have any questions, please contact Becky Doran at rdoran@isbe.net or 217-782-2491.

cc: The Honorable Bruce Rauner, Governor  
Tim Mapes, Clerk of the House  
Tim Anderson, Secretary of the Senate  
Legislative Research Unit
The Administration of Opioid Antagonist, School Year 2016-17

Illinois State Board of Education
Center for Safe and Healthy Climate,
Nutrition and Wellness Programs,
and Data Analysis Division

Sept. 11, 2017

James T. Meeks, Chairman
State Board of Education

Tony Smith, Ph.D.
State Superintendent of Education
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Foreword

The administration of an antidote (antagonist) from a stock supply for an overdose of an opioid-containing drug to persons who may be experiencing an overdose is permitted in Illinois schools by Public Act 99-0480, effective date Sept. 9, 2015, which amended 105 ILCS 5/22-30. The Act requires a report form to be provided to the Illinois State Board of Education (ISBE) by each Illinois public and nonpublic school that administers a dose under this Act. This report is to be provided to ISBE within three days of the incident that necessitated use of the antidote drug.

This report document is a compilation of data on the frequency and circumstances of opioid antidote administration during the preceding academic year. The report is provided based on the available data and do not necessarily reflect the official position or policy of ISBE. Inquiries regarding this report may be directed to Rebecca Doran in the Center for Safe & Healthy Climate: Division of Nutrition & Wellness Programs at (217)782-2491 or Marjurie Ribeiro, Ph.D., in the Data Analysis Division at (217) 782-3950.

Background

Any Illinois school may obtain a medical order for one or more doses of a drug that is intended to reverse an overdose from an opioid-containing drug. The antidote most often is naloxone, delivered either by injection or nasal inhalation. Schools are not required to adopt such a policy nor required to maintain a supply of the drug but may maintain a supply of the drug and have trained personnel to recognize and respond to an overdose of an opioid drug. By Oct. 1 every year, the Board shall submit an annual report to the General Assembly and publish the report online on the same day of its submission. This particular report summarizes the data reported to ISBE during the 2016-17 school year.

Methodology

Data collection instruments and procedures used by schools to report data on the use of an opioid antidote were developed by ISBE staff in the Special Education, Data Analysis, and Rules divisions and incorporated into rules in accordance with the formal rules process (rule 1.540, http://www.isbe.net/rules/archive/pdfs/oneark.pdf).

The 2016-17 data collection was conducted using the form “Undesignated Opioid Antagonist Reporting Form” (ISBE 34-20A) http://www.isbe.net/pdf/school_health/34-20A-opoid-rptg.pdf

Schools were to email the forms to opioid@isbe.net, which is an email account accessible by Data Analysis, and Health Services staff.
Limitations

The enforcement of the reporting requirement of this Act continues for the school year 2016-17, ending June 30, 2017.

- The validity of the data reported is subject to the limitations of the first data collection round.
- The fact that one report received cannot establish with certainty that this administration of the drug is representative of all schools or districts in Illinois and that any school or district failed to issue the required report to ISBE.
- Because no school or district is required to have adopted a policy and procedure for the administration of an opioid antagonist, it is not known how many districts or schools have the policy and procedure in place but did not have an incident requiring the use of drug.

School Year 2016-17 Results

During 2016-17 school year, there was one administration reported of opioid antagonist. The singular case of opioid antagonist administration was reported in the county of DuPage. The individual student who received the opioid antagonist attended high school. The onset of the initial symptoms took place within a school building. The registered nurse and police officer administered one dose of the opioid antagonist.