

# SHAC

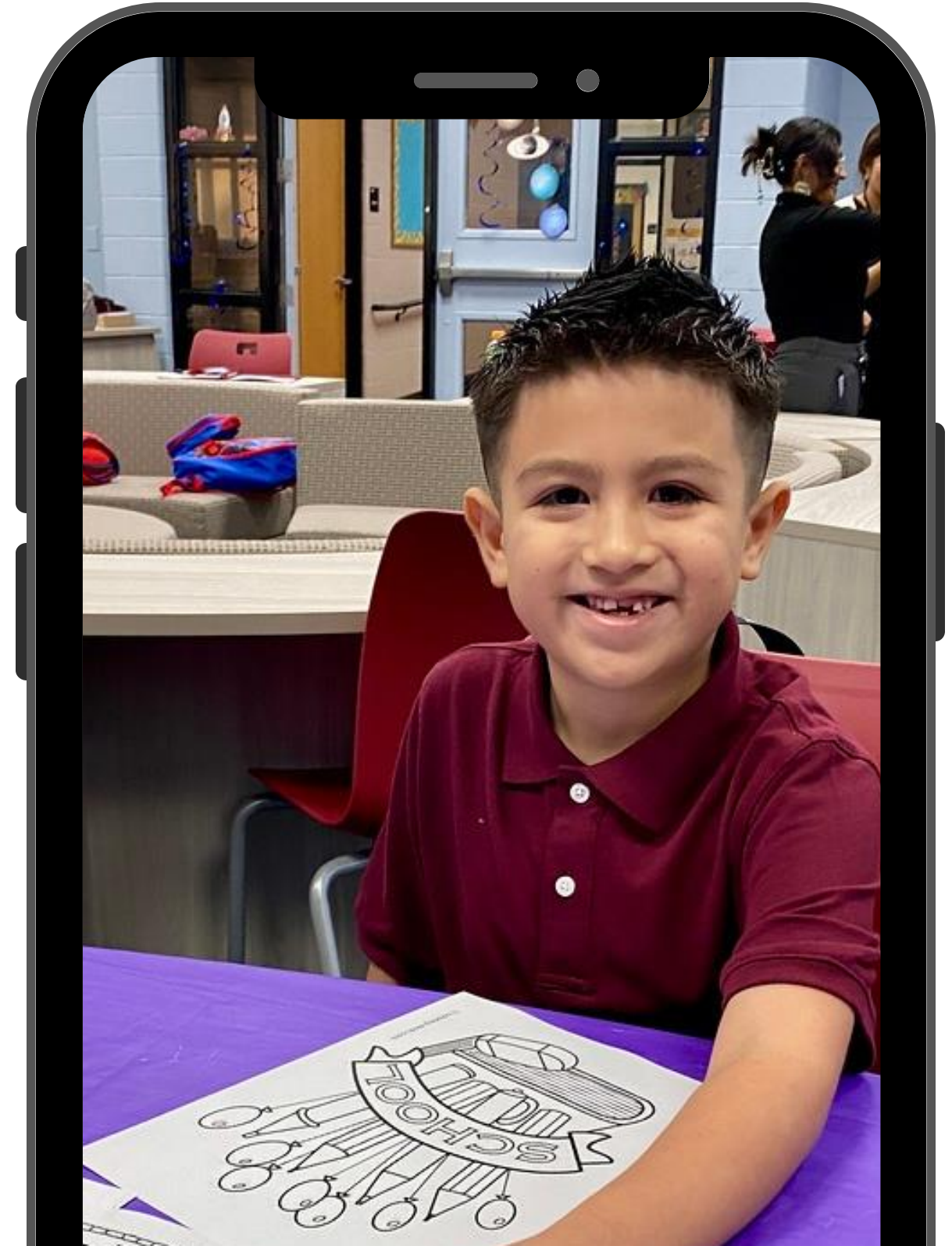
## School Health Advisory Committee

Olga M. Moucoulis  
Chief of Staff and Communications  
December 5, 2023



# Agenda

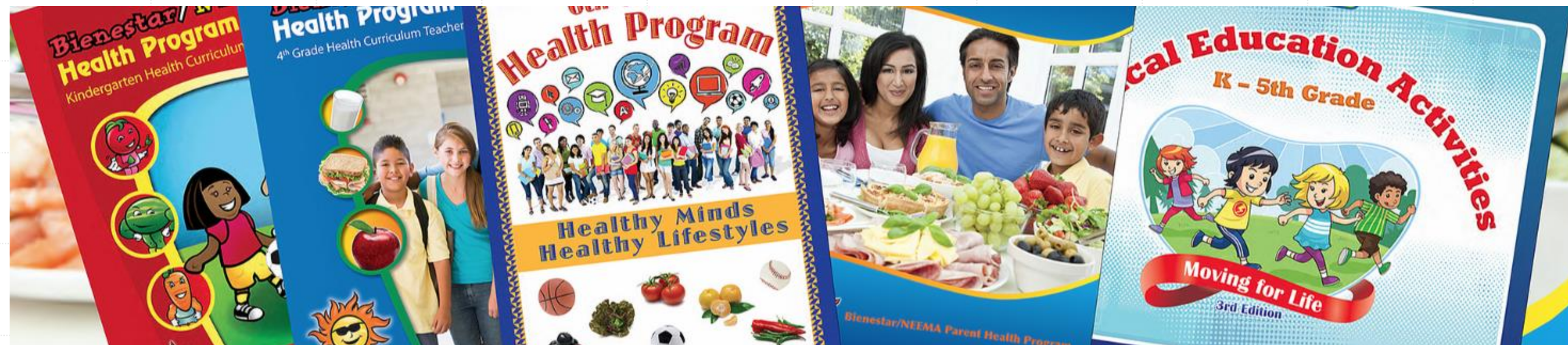
- ☑ Review Minutes for September 20th, 2023
- ☑ Identify parents for approval
- ☑ Bienestar-Presentation
  - David Saldana
- ☑ Physical Activity and Fitness Planning Subcommittee
- ☑ HB 3908 Tuckers Law
  
- ☑ SHAC to recommend appropriate grade level, the number of instruction hours, and Curriculum regarding the dangers of opioids





# Bienestar/NEEMA

David Saldana



# Fentanyl and Naloxone Legislative Updates

**Your text here**



## Objectives:

- Discuss Fentanyl and Opioid Antagonist 88(R) Legislative Requirements
- Discuss Current Drug Death Trends in Texas website
- Discuss TEA and other Resources for Fentanyl and Opioid Antagonist Awareness Training

# Current Drug Death Trends in Texas:

- [Fentanyl Death Tracking Dashboard](#)



# Texas 88th Legislative Session

## SB 629 - Administration of Opioid Antagonists (Naloxone/Narcan)

Each school district **shall** adopt and implement a policy for **grades 6-12** regarding the maintenance, administration, and disposal of opioid antagonists at each campus in the district. A district **may** have a policy for campuses **below grade 6**.

An open-enrollment charter school or private school **may** adopt and implement a policy regarding the maintenance, administration, and disposal of opioid antagonists.

- **Policy Deadline: January 1, 2024**

Immunity from liability statements are included for persons administering Naloxone/Narcan in good faith.



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- SB 629 Reporting Requirements - Overview

- A report must be submitted no later than the **10th business day** after Naloxone/Narcan administration to:
  - School district, Charter holder, or Governing body as applicable
  - Physician/Provider who prescribed the Naloxone/Narcan
  - Commissioner of State Health Services

- SB 629 Prescription Requirements - Overview

- A physician or other person who prescribes opioid antagonists shall provide the school with a **standing order** for the administration of an opioid antagonist to a person reasonably believed to be experiencing an opioid-related drug overdose.
- A pharmacist may dispense an opioid antagonist to a school district, open-enrollment charter school, or private school without requiring the name or any other identifying information relating to the user.

## SB 629 - Opioid Training

Each school district, open-enrollment charter school, and private school that adopts a policy is responsible for training **school personnel** and **school volunteers** in the administration of an opioid antagonist.

- Training **must** include information regarding:
  - Recognizing the signs and symptoms of an opioid-related drug overdose
  - Administering an opioid antagonist
  - Implementing emergency procedures, if necessary, after administering an opioid antagonist
  - Properly disposing of used or expired opioid antagonists



- Training must be provided in a formal training session or through online education in accordance with the policy adopted under TEC 21.4515.
- Each school district, open-enrollment charter school, or private school that adopts a policy under TEC 38.222 must maintain records on the training required under this section.

# RISK FACTORS FOR OVERDOSE

- Loss of Tolerance - After Treatment, Incarceration, Abstinence
- Mixing Drugs
- Chronic conditions like cardiovascular, liver and lung disease, and depression
- Using alone
- Variation in strength of 'street' drugs

# DURATION OF EFFECT

- **Methadone: 24–36 hours**
- **Heroin: 6–8 hours**
- **Oxycodone: 3–5 hours, except extended release formulations**
- **Codeine: 3–4 hours**
- **Demerol: 2–4 hours**
- **Morphine: 3–6 hours**
- **(IMF)Fentanyl: 2 hours, however, also available as a patch, which lasts 3 days not (IMF)**



# NARCAN CAN REVERSE THESE OPIOIDS

- Codeine
- Fentanyl (Duragesic)
- Heroin
- Hydrocodone (Vicodin)
- Hydromorphone (Dilaudid)
- *Illicitly-made Fentanyl (IMF)*
- Methadone
- Morphine
- Oxycodone (Oxycontin, Percodan, Percocet)

## HB 3908 (Tucker's Law) - SHAC Duties

SHAC duties include recommending appropriate grade levels, the number of instruction hours, and curriculum regarding the dangers of opioids to include:

- Opioid addiction and abuse, including synthetic opioids such as Fentanyl
- Methods of administering an opioid antagonist (Naloxone/Narcan)



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**Edgewood ISD Police**  
**Department**  
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**78237**  
**Office 210-898-2025**  
**Fax 210-898-2088**



**14 years as a Police Officer**  
**SRO, Mental Health Officer,**  
**FTO, Intermediate PO**  
**License**





# HISTORY OF FENTANYL

- Fentanyl was **first synthesized in Belgium by Paul Janssen under the label of his relatively newly formed Janssen Pharmaceutica in 1959** and introduced in the 1960s
- **Used for pain and anesthetic, cancer, poor heart function.**
- Fentanyl is an opioid analgesic that is 100 times more potent than morphine.



**It carries a high risk of dependence and addiction, as well as risk overdose due to extreme potency.**

**In some cases, it is prescribed after surgical procedures, but the U.S. National Library of Medicine lists several warnings for who can prescribe fentanyl patches and who is prescribed fentanyl.**



**How is it consumed?  
snorted/sniffed, smoked,  
orally by pill or tablet, spiked  
onto blotter paper, patches,  
sold alone or in combination  
with heroin and other  
substances, has been  
identified in fake pills,  
mimicking pharmaceutical  
drugs such as oxycodone**

# Street Names

**Apace, China Girl, China Town, Dance Fever, Friend,  
Goodfellas, Great Bear, He-Man, Jackpot, King Ivory,  
Murder 8, Poison and Tango & Cash**

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# WHAT DOES FENTANYL LOOK LIKE?



Fentanyl is most commonly seen in blue, greenish, or pale-colored counterfeit pills. Fentanyl may also be in white powders.



POWDERED FENTANYL



LIQUID FORM



RAINBOW FENTANYL



FENTANYL PATCHES





**Some of the other ways fentanyl affects the body, particularly when it's abused or used other than how it's prescribed, include:**

- Dizziness / Dry mouth / Appetite loss / Weight loss / Urine retention**
- Itching or hives / Nausea / Vomiting / Constipation**
- Appetite loss / Weight loss /**
- Headache / Hallucinations /**
- Vision problems / Depression**
- Bad dreams / Sleep problems**
- Sweating / Shaking / Swollen arms and legs**





## **Symptoms of opioid overdose, including fentanyl overdose, include:**

- Constricted (very small) pupils. Gray, blue, or pale skin. Loss of consciousness.**
- Severe respiratory depression, such as slow or shallow breathing.**
- Cold, clammy skin / Vomiting / Unresponsive**
- Blue or purple lips and nails.**
- Respiratory arrest, or altogether stopped breathing.**
- Extreme decreases in the level of consciousness.**
- Limp or flimsy arms and legs.**
- Slurred speech or inability to speak.**
- Making choking or gurgling sounds.**



# *Symptoms of Fentanyl*

## *Overdose*

*Overdose on fentanyl* is extremely dangerous. If you believe someone is overdosing on fentanyl or any other drug, call 911 immediately as this is a medical emergency.






Fatal dose of fentanyl  
(2 mg or 2000 mcg)







**WATCH: KSAT 12 News town hall,**  
**special 'Fighting Fentanyl: It's**  
**Everyone's Problem'**

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# **WHAT'S THE PUNISHMENT FOR POSSESSING FENTANYL IN TEXAS?**

**The state of Texas determines the sentence for drug crimes based on the circumstances of the crime, the penalty group it's under as well as the weight of drugs found. Fentanyl is classified as a penalty group 1 controlled substance, which is the highest penalty group with the harshest penalties. The sentencing guidelines for possession of fentanyl.**

<b>AMOUNT OF FENTANYL</b>	<b>SENTENCE</b>	<b>PRISON TERM</b>	<b>FINE</b>
<1 gram	State Jail Felony	180 days – 2 years	Up to \$10,000
1 gram–4 grams	Second Degree Felony	2-20 years	Up to \$10,000
4 grams–200 grams	First Degree Felony	5-99 years	Up to \$10,000
200 grams–400 grams	Life Felony	10-99 years	Up to \$100,000
>400 grams	Life Felony	15-99 years	Up to \$250,000

# Tex. Health & Safety Code Section 481.134

## Drug-free Zones

(a) In this section:(1)“Minor” means a person who is younger than 18 years of age.(2)“Institution of higher education” means any public or private technical institute, junior college, senior college or university, medical or dental unit, or other agency of higher education as defined by Section 61.003 (Definitions), Education Code

Texas Law Punishment

Fine

Drug class

Probation

School Punishment

DAEP

Expelled

Suspended





**THE INPATIENT DRUG DETOX CENTER SAN ANTONIO**  
**24 HOURS 1-844-200-5379**

**INPATIENT DRUG DETOX AND REHAB**  
9238 FLOYD CURL DR STE 318, SAN ANTONIO, TX 78240

**INFINITE RECOVERY TREATMENT CENTER - SAN ANTONIO COMMUNITY OUTREACH**

3463 MAGIC DR STE T14, SAN ANTONIO, TX 78229

**La Hacienda Treatment Center -  
Community Outreach Center**

400 Blanco Rd Ste 129, San Antonio, TX 78216

# Sources

- **OFFICER Z.RAMOS #12 EISD PD**

- [rcp.nshealth.ca/.../fentanyl.pdf](https://rcp.nshealth.ca/.../fentanyl.pdf)
- <https://www.fda.gov/>
- <https://www.nps.org.au/>
- <http://www.medsafe.govt.nz/profs/datasheet/f/Fentanylinj.pdf>
- Texas Penal Code
- DEA.gov
- **American Addiction Centers**

200 Powell Pl Brentwood, TN 37027

(615) 875-1501





# Suicide Prevention

SHAC meeting 12/5/2023

# SUICIDE PREVENTION





- **Suicide does not have one single cause. Factors like substance abuse and untreated depression can lead to higher risk of suicide just as having a trusted group of friends can help protect you.**





# WARNING SIGNS

The warning signs of suicide are indicators that a person may be in danger and needs immediate help

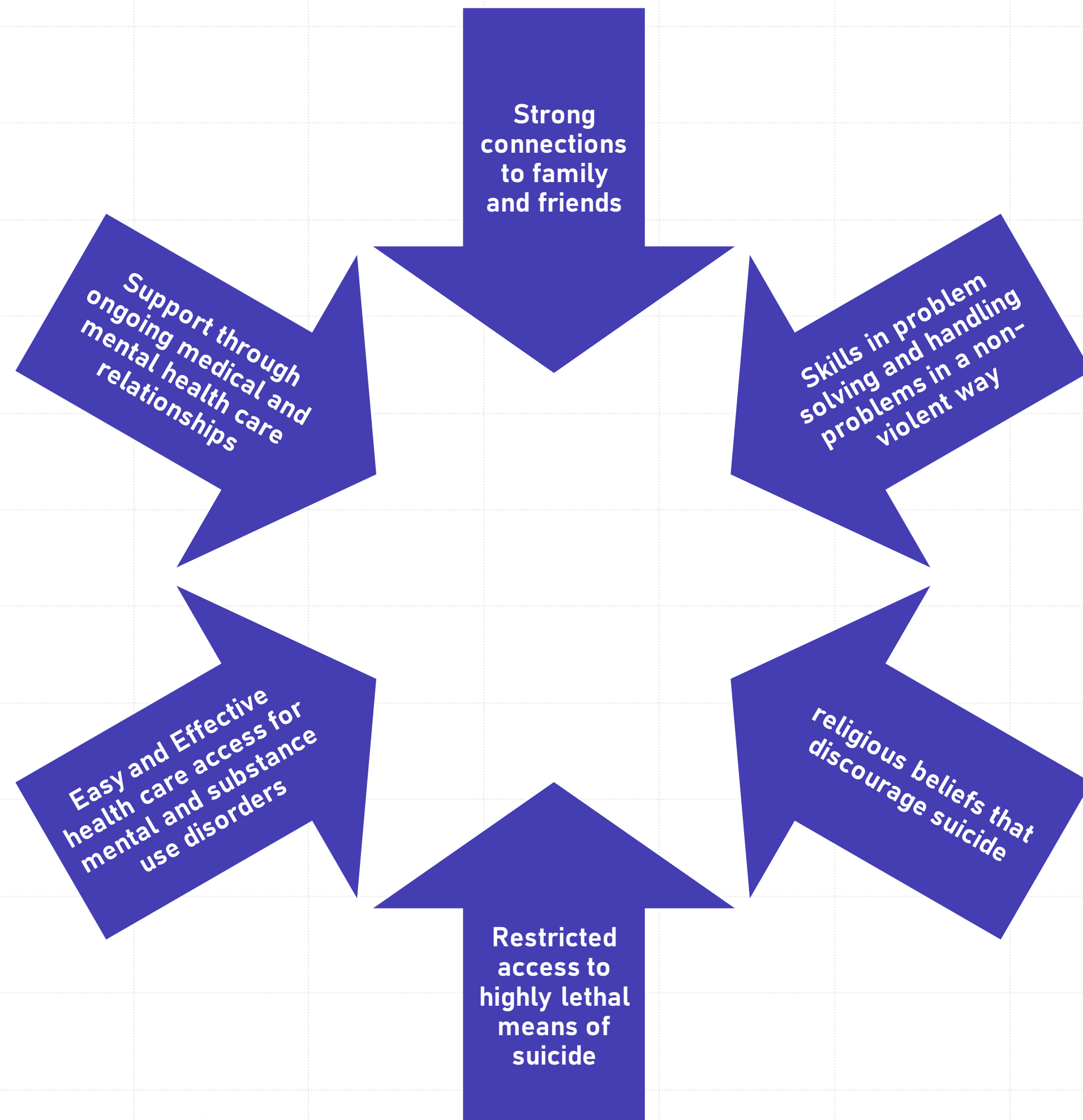






## PROTECTIVE FACTORS

Protective factors are characteristics that make a person less likely to engage in suicidal behavior



# Levels of Care

**Low Risk**

**Moderate Risk**

**High Risk**



# Colum Columbia Suicide Severity Rating Scale, or C-SSRS

Always ask questions 1 and 2.		Past Month
1) Have you wished you were dead or wished you could go to sleep and not wake up?		
2) Have you actually had any thoughts about killing yourself?		
If YES to 2, ask questions 3, 4, 5 and 6. If NO to 2, skip to question 6.		
3) Have you been thinking about how you might do this?		
4) Have you had these thoughts and had some intention of acting on them?		High Risk
5) Have you started to work out or worked out the details of how to kill yourself? Did you intend to carry out this plan?		High Risk
Always Ask Question 6		Life-time
6) Have you done anything, started to do anything, or prepared to do anything to end your life? <i>Examples: Took pills, tried to shoot yourself, cut yourself, tried to hang yourself, or collected pills, obtained a gun, gave away valuables, wrote a will or suicide note, took out pills but didn't swallow any, held a gun but changed your mind or it was grabbed from your hand, went to the roof but didn't jump, etc.</i> If yes, was this within the past 3 months?		High Risk



If YES to 2 or 3, seek behavioral healthcare for further evaluation.  
If the answer to 4, 5 or 6 is YES, get **immediate help**: Call or text 988, call 911 or go to the emergency room.  
**STAY WITH THEM** until they can be evaluated.





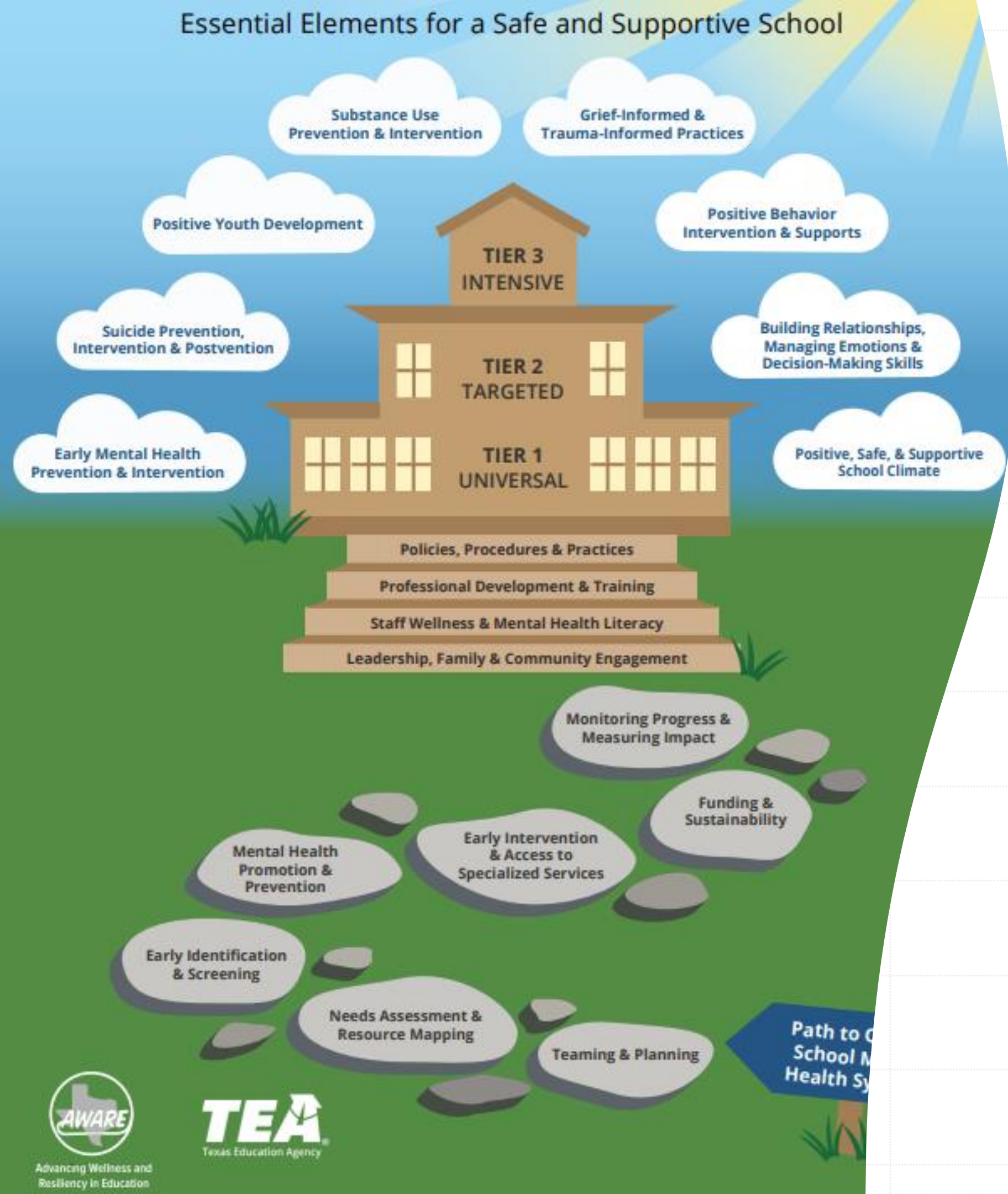
## How to ask for help

**9888** SUICIDE & CRISIS  
**LIFELINE**

**9888** LÍNEA DE  
PREVENCIÓN DEL  
SUICIDIO Y CRISIS



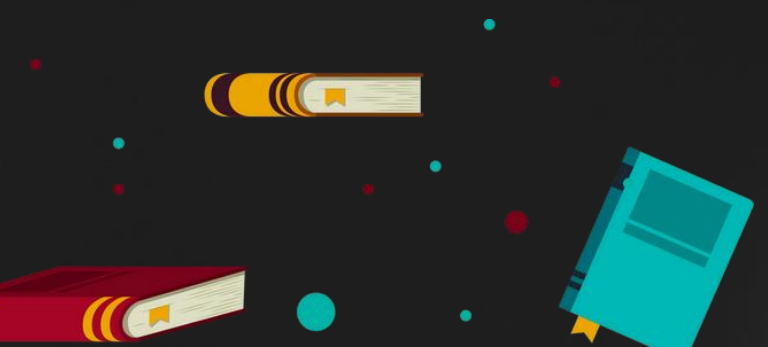
# Essential Elements for a Safe and Supportive School



# Safe and Supportive Schools



**EDGEWOOD**  
INDEPENDENT *of* SCHOOL DISTRICT  
*San Antonio*  
PROFESSIONALISM *of* ACCOUNTABILITY *of* COMMUNICATION





# Thank You!

## Contact Us

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