



MODEL POLICY | Center for Education Opportunity & Center for the American Child

COMBATING FENTANYL IN SCHOOLS ACT

PURPOSE OF THIS ACT

The Combating Fentanyl in Schools Act requires public schools to provide drug poisoning awareness and education on fentanyl to students in grades 6–12 and draws from legislation in [Texas](#) and [Illinois](#). According to an article published by the Centers for Disease Control and Prevention, 83.9% of overdose deaths among adolescents from July 2019–December 2021 involved illicitly manufactured fentanyl, yet only 35% of adolescents in the study had a documented history of opioid use ([Tanz et al., 2022, p.1576](#)). Education should be the first line of defense to prevent children and adolescents from succumbing to these preventable and senseless deaths.

MODEL LEGISLATIVE TEXT

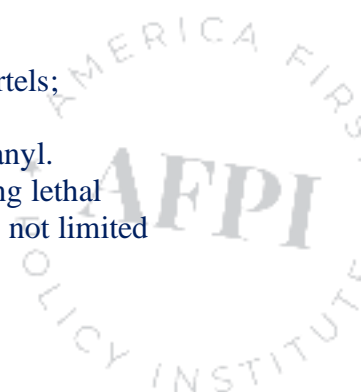
Section A

1. Each school district shall annually provide no fewer than 10 hours of research-based instruction, appropriate for each grade level, relating to fentanyl risk prevention and drug poisoning awareness to students in grades 6 through 12.

Section B

The instruction required by Section A must include, at a minimum, the following:

1. Information on fentanyl, including:
 - a. The differences among synthetic opioids, non-synthetic opioids, and illicit drugs;
 - b. The various formulations of fentanyl; and
 - c. The differences between legal and illegal uses of fentanyl.
2. Facts on the origins of fentanyl and how it falls into the hands of young Americans, including:
 - a. The manufacturing of its precursor chemicals in China;
 - b. The smuggling of the drug across the southern border by Mexican cartels;
 - c. Rainbow fentanyl; and
 - d. The effects of peer pressure and social media on accessibility of fentanyl.
3. The side effects and risks of using fentanyl, along with information comparing lethal amounts of fentanyl and other drugs. Information on risks may include but is not limited to:



- a. The lethal dose of fentanyl and its potency;
 - b. How often fentanyl is placed in drugs without a person's knowledge; and
 - c. An explanation of what fentanyl does to a person's body and the severity of fentanyl's addictive properties.
4. Details about the process of lacing fentanyl into other drugs and why illicit drug producers use fentanyl.
 5. Instructions on how to save someone from accidental fentanyl poisoning, including:
 - a. Recognizing signs that a peer is suffering from accidental fentanyl poisoning; and
 - b. Purchasing and administering naloxone, either through a nasal spray or an injection.
 6. Information on mental health and youth self-medicating, which shall include:
 - a. Recognition of the signs and symptoms of mental health issues, such as anxiety and depression;
 - b. Suicide prevention;
 - c. Prevention of fentanyl abuse and addiction;
 - d. Awareness of local school and community resources and any processes involved in accessing those resources; and
 - e. Substance use and abuse, including youth substance use and abuse.

Section C

The instruction required by Section A may be provided by a licensed educator, school nurse, or school counselor or by employees of the following entities:

1. A library;
2. A religious organization;
3. A local public health agency; or
4. An organization employing mental health professionals.

Section D (Optional)

Reallocate unused COVID-19 Fiscal Recovery Funds for fentanyl prevention and education efforts in grades 6 through 12. Funds shall be used to:

1. Purchase naloxone or other opioid antagonists;
2. Provide training to school nurses, teachers, and administrators on how to administer naloxone or other opioid antagonists; and
3. Provide fentanyl awareness classes or materials to students.

Section E

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

Training required under this section shall be provided in a formal training session or through online education and shall include information on:

1. Recognizing the signs and symptoms of an opioid-related drug overdose;
2. Administering an opioid antagonist;
3. Implementing emergency procedures, if necessary, after administering an opioid antagonist; and



4. Properly disposing of used or expired opioid antagonists.

Section F

A physician or person who has been delegated prescriptive authority may prescribe opioid antagonists in the name of a school district, open-enrollment charter school, or private school, with the following requirements:

1. A physician or other person who prescribes opioid antagonists under this section shall provide the school district, open-enrollment charter school, or private 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.
2. The standing order is not required to be patient-specific, and the opioid antagonist may be administered to a person without a previously established physician-patient relationship.
3. Notwithstanding any other provisions of law, the supervision or delegation by a physician is considered adequate if the physician:
 - a. Periodically reviews the order; and
 - b. is available through direct telecommunication as needed for consultation, assistance, and direction.
4. An order issued under this section must contain:
 - a. The name and signature of the prescribing physician or other person;
 - b. The name of the school district, open-enrollment charter school, or private school to which the order is issued;
 - c. The quantity of opioid antagonists to be obtained and maintained under the order; and
 - d. The date of issue.
5. 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.

Section G

Students shall be assessed on the instruction required by Section A. The assessment may include but is not limited to:

1. The differences between synthetic and non-synthetic drugs;
2. The effects of fentanyl on a person's body;
3. The lethal dose of fentanyl;
4. How to detect and prevent overdoses;
5. Emergency treatments such as opioid antagonists; and
6. Signs and symptoms of mental health issues.

Section H

The governor shall designate a week to be known as Fentanyl Poisoning Awareness Week in public schools.

1. Fentanyl Poisoning Awareness Week may include instruction on preventing abuse of and addiction to fentanyl.

The provisions of this model policy shall be subject to legislative appropriation.



References

HB 3924. 103rd Illinois General Assembly. Regular. (2023).
<https://legiscan.com/IL/text/HB3924/id/2835709>

HB 3908. 88th Texas Legislature. Regular. (2023).
<https://capitol.texas.gov/tlodocs/88R/billtext/html/HB03908F.htm>

Overton, H. (2023, July 13). *Public Health Solutions to Combat Fentanyl Poisoning in the United States*. America First Policy Institute. <https://americafirstpolicy.com/issues/public-health-solutions-to-combat-fentanyl-poisoning-in-the-united-states>

Tanz, L. J., Dinwiddie, A. T., Mattson, C. L., O'Donnell, J., & Davis, N. L. (2022). *Drug Overdose Deaths Among Persons Aged 10–19 Years — United States, July 2019–December 2021*. Centers for Disease Control and Prevention, Morbidity and Mortality Weekly Report 71(50), 1576. <https://www.cdc.gov/mmwr/volumes/71/wr/pdfs/mm7150a2-H.pdf>

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Wolf, C., Whitaker, M., Bondi, P., Jindal, B., Yates, S., & Conway, K. (2023, August 1). *Combating Fentanyl - The America First Action Plan Book*. America First Policy Institute. <https://americafirstpolicy.com/issues/combating-fentanyl-the-america-first-action-plan>

