

# Victoria’s Take-Home Naloxone Program

## Approved workers - Frequently Asked Questions (FAQs)

## Purpose of these FAQs

These FAQs are prepared by the Victorian Department of Health (the department) to provide additional information to approved workers of the Victorian Take-Home Naloxone Program (the program).

They supplement the Victorian Take-Home Naloxone Program: Operating Policy and Guidelines. Approved workers are advised to read and familiarise themselves with the document Naloxone Administration by Workers Responding to Opioid Overdose in Health and Community Services. These documents can be found at the program’s webpage: <<https://www.health.vic.gov.au/aod-treatment-services/victorias-take-home-naloxone-program>>.

If after reading the Victorian Take-Home Naloxone Program: Operating Policy and Guidelines and this document you are still unclear about something, please seek information from your organisation manager in the first instance or visit the program webpage for further information.

For reference, frequent abbreviations in this document include:

* ‘COPE’ - Community Overdose Prevention Education
* ‘NSP’ – Needle and Syringe Program
* ‘Program’ – Victorian Take-Home Naloxone Program.

## Approvals

## Which workers are approved to supply naloxone?

Workers that can supply naloxone under the Victorian Take-Home Naloxone Program are listed in the Victorian Take-Home Naloxone Program Operating Policy and Guidelines and the Victorian Government Gazette for the program: <[https://www.gazette.vic.gov.au/gazette/Gazettes2025/GG2025G032.pdf](https://www.gazette.vic.gov.au/gazette/Gazettes2025/GG2025G032.pdf%20)

To be approved, a person must work or volunteer for an approved category of organisation. These are:

* Victorian Needle and Syringe Program (NSP) providers
	+ Medically Supervised Injecting Centres
	+ The Medically Supervised Injecting Room located in North Richmond.
* Victorian Drug Checking Services:
	+ Victorian Pill Testing Service, and
* Mental Health and Wellbeing Locals

## Training

## What training is required for approved workers?

Approved workers must complete training before they may supply naloxone. The approved training course is Penington Institute’s ‘Community Overdose Prevention Education’ (COPE) training.

COPE training is available at: <<https://www.penington.org.au/workforce-development/naloxone-training/>> or by email: info@penington.org.au.

## Do approved workers who completed COPE training prior to 1 October 2018 need to do the training again?

Yes.

The COPE training was revised to reflect the approval of naloxone nasal spray for the Australian market by the Therapeutic Goods Administration in September 2018.

By recognising training completed after 1 October 2018, the department can be assured that all approved workers have received training on the use naloxone in nasal spray formulation.

## Will there be other approved training courses available?

Not at this time. The department may consider additional approved training courses in the future.

## Supplying naloxone

## Do approved workers need to follow the steps in the Victorian Operating Policy and Guidelines when supplying naloxone?

The Victorian Take-Home Naloxone Program: Operating Policy and Guidelines detail the steps for supplying naloxone, including requirements that workers must meet, and best practice that they should comply with.

Approved workers are advised to familiarise themselves with the Victorian Take-Home Naloxone Program: Operating Policy and Guidelines and the steps for supplying naloxone before engaging in supply. This is to protect both themselves and the consumer.

## Can approved workers supply naloxone via outreach?

Yes.

Approved workers are permitted to supply naloxone to community members when undertaking outreach activities.

An approved worker cannot supply to a worker of another organisation, for them to distribute. This would constitute wholesale supply which is illegal without a wholesale licence.

## Are there any precautions to be aware of when supplying by outreach?

Yes.

These include:

* not openly ‘hawking’ or ‘peddling’ naloxone in public
* avoid taking more naloxone than you believe you will need for each day of outreach work, to minimise risks of stock loss or spoilage
* keeping naloxone within the temperature conditions specified by the manufacturer as you travel (typically between 0 and 25 degrees Celsius); for example, not leaving naloxone in a parked car on a hot day.

## Can an approved worker supply naloxone to a worker of another organisation, such as a crisis housing service or AOD treatment provider for distribution?

No.

The supply of naloxone by approved workers in approved organisations is directly to community members.

An approved worker cannot supply to a worker of another organisation, for them to distribute. This would constitute wholesale supply which is illegal without a wholesale licence.

An outreach worker may partner with another organisation such as a crisis housing provider and visit that service to conduct joint outreach which can include the supply of naloxone to its community members as an approved worker.

## Can an approved worker supply naloxone to a community member who is concerned about their family member’s or friend’s drug use?

Yes.

An approved worker can supply naloxone to family, friends, carers, or supporters of people who use drugs.

The approved worker’s responsibility includes educating the family, friend, carer or supporter receiving the naloxone that it is for the treatment of opioid overdose.

## Are there any circumstances where the approved worker should not supply naloxone?

In instances where a community member advises that the naloxone is for a person who has had a previous severe allergic reaction to naloxone hydrochloride or to any of the other ingredients in the formulation, they should not be supplied with naloxone.

You may recommend and/or refer the person to consult with a pharmacist or medical practitioner for further information and advice.

## Should an approved worker promote one type of naloxone over another?

No.

Approved workers should engage with the community member regarding their preferences and needs to inform a decision on which formulation of naloxone would be best for them.

## Can an approved worker supply naloxone if it is expired?

No.

Medication that has expired should not be supplied.

The product expiry date is to be checked at the time of supply to ensure it has not expired nor will expire shortly.

## Can an approved worker supply naloxone to a community member for them to place in an organisation’s first aid kit, for use in an emergency?

No.

The program only authorises the supply of naloxone to consumers.

However, *Victorian Drugs, Poisons and Controlled Substances Regulations 2017* specify that a pharmacist is permitted to supply naloxone for placing in a first aid kit. People wishing to obtain naloxone for this purpose are encouraged to engage with their local community pharmacy.

## Can an approved worker supply naloxone for a person who is pregnant?

Yes.

In these instances, the approved worker’s responsibility includes advising the person about the potential harm to the mother and baby, particularly relating to withdrawal, with the use of naloxone in pregnancy.

Please refer to the NSP Handbook for more information <<https://www.penington.org.au/wp-content/uploads/2022/10/NSP-Handbook.pdf> >

## How many packs of naloxone should an approved worker supply to a community member at one time?

A full package of a naloxone product per person must always be supplied (do not break packs).

Approved workers should seek to identify if it would be beneficial to supply the community member with more than one package of naloxone. Examples include if the person:

* uses opioids at different locations and may benefit from having naloxone at each of these locations
* is travelling to locations where there may be additional barriers to naloxone access
* is also collecting naloxone for others (e.g. peer-to-peer distribution).

## Product labelling and storage

## Why do approved workers have to put a label on each pack of naloxone identifying the organisation they work for?

This is a regulatory requirement for medications like naloxone as it is a Schedule 3 ‘pharmacy only’ medication.

## Why does the naloxone pack say ‘prescription’ or ‘pharmacist’ only?

Some naloxone products are produced in packaging that states the naloxone is a ‘prescription’ or ‘pharmacist’ only medicine, for regulatory purposes.

These products are allowed to be supplied by approved organisations of the Victorian Take-Home Naloxone Program, in accordance with all storage, labelling and supply requirements.

## How do approved workers ensure naloxone is stored safely while working as an outreach worker in the community?

Naloxone must be stored at the temperature conditions specified by the manufacturer (typically between 0 and 25 degrees Celsius).

Approved workers should ensure they have the means to keep naloxone within this temperature range, including if they are travelling; for example, carrying naloxone in an insulated storage container, and not leaving it in a parked car on a hot or sunny day.

Approved workers should only take the quantity of naloxone they believe they will require for each day of outreach work.

## Data recording

## When do approved workers have to record data about naloxone supply?

Approved workers are required to record data in the Commonwealth Government’s Pharmacy Programs Administrator Registration and Claiming Portal each time they supply naloxone.

If multiple packs of naloxone are supplied to a community member at one time, an individual data entry is required for each multiple of two packs supplied. This is a requirement of the Commonwealth Government’s Take-Home Naloxone Program.

## How do I record naloxone supply data?

An approved worker must login to the Commonwealth Government’s Pharmacy Programs Administrator Registration and Claiming Portal with their username and password created upon registration, then follow the prompts to make an ‘individual supply claim’.

The data to be entered includes the date of supply, type of naloxone supplied and the quantity.

For further information refer to the Victorian Take-Home Naloxone Operating Policy and Guidelines and the following link to the Commonwealth Government’s Pharmacy Programs Administrator Registration and Claiming Portal webpage: <<https://www.ppaonline.com.au/take-home-naloxone>>.

A short video tutorial outlining the registration steps for the PPA portal and how to record data is available at: < <https://player.vimeo.com/video/919436696?h=1667e7869e&amp;badge=0&amp;autopause=0&amp;player_id=0&amp;app_id=58479>>

## Are approved workers required to record naloxone supplied while performing outreach in the community?

Yes.

All naloxone supplied as part of Victorian Take-Home Naloxone Program must be recorded.

If it will be difficult to login to the Commonwealth Government’s Pharmacy Programs Administrator Registration and Claiming Portal whilst out in the community (outreach work), an alternative approach may be to record the supply data in a notebook and login to the portal at the end of the day to enter the data.

## Administering naloxone

## Is it legal for an approved worker to administer naloxone in an emergency?

Where a bystander administers naloxone to another person to treat a potentially fatal overdose and they do so without the expectation of payment/financial reward, Victoria’s good Samaritan provisions under section 31B of the Wrongs Act 1958 can *protect them against civil liability.*

The department issued Naloxone Administration by Workers Responding to Opioid Overdose in Health and Community Services confirming that there are no legal or regulatory restrictions preventing clinical or non-clinical staff from administering naloxone.

From July 2025, all first aid courses in Australia and New Zealand will include instruction on the administration of intranasal naloxone, in line with Australia and New Zealand Council on Resuscitation (ANZCOR) Guideline-9-5-2: First Aid Management of Suspected Opioid Overdose < [guideline-9-5-2-first-aid-management-of-opioid-overdose-289.pdf](https://www.anzcor.org/assets/anzcor-guidelines/guideline-9-5-2-first-aid-management-of-opioid-overdose-289.pdf).>

While naloxone should be used in an emergency if the situation requires it, the Victorian Take-Home Naloxone Program deals with the supply of naloxone.

Information on naloxone administration is available from the Victorian Take-Home Naloxone Program website: <[https://www.health.vic.gov.au/aod-treatment-services/victorias-take-home-naloxone-program>](https://www.health.vic.gov.au/aod-treatment-services/victorias-take-home-naloxone-program%3E%2C)

Information is also available on the Commonwealth Government Take-Home Naloxone website: <[https://www.health.gov.au/our-work/take-home-naloxone-program/how-to-administer-naloxone>](https://www.health.gov.au/our-work/take-home-naloxone-program/how-to-administer-naloxone%3E)

Instructions on administration are also provided in the Product Information contained with the naloxone product.

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