

Louisiana SOR Initiatives

Addressing Opioid and Stimulant Misuse & Use Disorders: The Impact of State Opioid Response (SOR) Grants

The Substance Abuse and Mental Health Services Administration (SAMHSA) administers the SOR grant program. SOR addresses the opioid overdose crisis by providing resources to states and territories to increase access to Federal Drug Administration-approved medications for opioid use disorder (MOUD) and to reduce unmet treatment needs and opioid-related overdose deaths with prevention, harm reduction, treatment, and recovery supports. In 2020, SOR expanded to support evidence-based services for stimulant misuse and use disorders (StUD), including cocaine and methamphetamine.

This brief was developed by the National Association of State Alcohol and Drug Abuse Directors (NASADAD) in collaboration with the Opioid Response Network (ORN) as part of a series of state reports intended to showcase initiatives across the continuum of care that states have implemented with SOR funds. The ORN is a SAMHSA-funded technical assistance and training center that works with states, health professionals, community organizations, the justice system, and individuals in all 50 states and nine territories to support efforts to address the opioid and stimulant crisis.



Single State Agency (SSA): Louisiana Department of Health (LDH) Office of Behavioral Health (OBH)

LDH OBH received \$99.7 million in SOR funding from FY18 through FY23. For FY23–FY24, it received \$18.06 million. Louisiana’s SOR (“LaSOR”) grant is used to develop and enhance statewide prevention, treatment, and recovery support services for individuals with or at risk for opioid use disorder (OUD) and StUD. The goals of LaSOR 3.0 include:

1. Reduce opioid- and stimulant-related deaths and incidents by implementing high-quality, evidence-based treatment services for individuals with or at risk for OUD and other concurrent substance use disorders (SUDs)
2. Increase access to evidence-based harm reduction services and mechanisms for priority populations
3. Increase access to community recovery support services for individuals with OUD and SUD
4. Decrease opioid and stimulant use and misuse by supporting evidence-based prevention and education efforts for priority populations, including racial/ethnic minorities, LGBTQ+ populations, older adults, criminal justice-involved individuals and those reentering from the criminal justice system, pregnant women or women with infants experiencing neonatal opioid withdrawal symptoms, and people who inject drugs



Preventing Opioid and Stimulant Misuse Before It Starts

The Louisiana SSA has used SOR to implement several prevention programs, including training, outreach, education, prevention curriculums, safe disposal initiatives, media campaigns, and a faith-based initiative.

Training, Outreach, and Education

OBH collaborates with Acadiana Human Services District, a local governing entity (LGE), and the Foundation for Wellness to provide educational events for healthcare and behavioral health professionals statewide via synchronous and asynchronous avenues. Educational content assists in achieving the goals of the state's strategic plan and is developed in conjunction with the OBH planning committee.

Evidence-Based Prevention Programs

Select LGEs implement evidence-based prevention programs for the target populations in their communities, including youth and older adults. These include the Life Skills Prescription Drug Abuse Prevention (LST Rx) Module, the Opioid Module of Project Alert, and Generation Rx.

Since the first LaSOR grant, 19,460 people have participated in these prevention programs.

Safe Disposal and Proper Storage

LGEs purchase prescription drop boxes, medication disposal bags/buckets, and “lock your meds” or safe storage products for strategic placement throughout their communities. Prescription drop boxes provide a place where unused prescription drugs can be safely disposed. These permanent boxes prevent prescription and over-the-counter medications from getting into the hands of people to whom they were not prescribed, as well as the waterways. Safe disposal ensures medications are disposed of in a safe and environmentally friendly manner. Twenty-three drop boxes have been installed across the state and more than 80,000 safe storage or medication disposal products have been distributed.

Media Campaign

OBH designed, researched, and implemented an opioid awareness and education public service campaign. The campaign's goal is to direct people with OUD (and/or their families, friends, and loved ones) to the appropriate treatment resources. This effort will be continued via public messaging that directs this target audience to a dedicated website (opioidhelpla.org) listing treatment resources and contact information.

Faith-Based Initiative

OBH partnered with a community outreach peer program within LGEs to lead a statewide “Reach, Respond, and Refer” campaign targeting faith-based communities and coalitions to increase awareness of OUD, StUD, and the effectiveness of MOUD. This program trains faith communities and clergies on identification of alcohol/drug use or co-occurring disorders and how to connect and refer individuals to behavioral health services in their community. In addition, this program facilitated coalition building and supported creation of three faith-based symposiums and two “sobriety Saturdays” within identified areas of the state.

Overdose Reversal Efforts: Saving Lives

Louisiana has used SOR to support access to overdose reversal medications, described further below.

Naloxone Distribution

Through LaSOR 1.0 and LaSOR 2.0, Louisiana distributed naloxone kits to LGEs, opioid treatment programs (OTPs), the Department of Public Safety and Corrections (DPSC), coalition members, grassroots harm reduction partners, community providers, residential providers, recovery homes (Oxford Houses), first responders, clients and families, sheriff’s offices, federally qualified health centers, and emergency departments. Additionally, four vending machines have been purchased and placed in locations of high traffic for free naloxone and other harm reduction products, such as safe disposal products and wound care kits. Finally, OBH partnered with the Emergency Preparedness Command System to distribute naloxone to emergency response teams and shelters throughout the state during disasters and other epidemics.

Harm Reduction Hub

Through LaSOR 3.0, OBH partnered with LDH’s Office of Public Health (OPH) to develop a new harm reduction hub-and-spoke model. This model created a centralized distribution site (“hub”)—a website portal to request naloxone and other harm reduction products, report data, and obtain education and training. Meanwhile, organizations across the state register as local distribution sites (“spokes”). They request harm reduction products, including naloxone, safe storage and disposal products, fentanyl testing strips, NaloxBoxes, naloxone vending machines, and more to distribute these essential items to identified areas in need. OPH is responsible for outreach to community partners to become local distribution sites statewide.

All requesting organizations are required to complete training as part of the agreement to distribute naloxone on behalf of the project. This hub-and-spoke model is instrumental in maximizing naloxone distribution and other harm reduction and prevention materials within Louisiana per the state’s naloxone saturation plan. The harm reduction hub went live in May 2023. At the time of this report, there were 64 distribution sites in the state, with more applications being received each month. Since only 10 LGEs were distributing naloxone in the previous SOR grants, this is a 540% increase in the number of distribution sites since inception of the project.

Through SOR, more than 100,000 naloxone kits have been distributed, approximately 64,000 individuals were educated on naloxone, and over 4,900 overdose reversals using SOR- funded naloxone were reported. In addition, over 43,000 fentanyl test strips were distributed.

Implementing Harm Reduction Strategies

Louisiana has also used SOR to reduce harms associated with OUD and StUD, described below.

Health Coordinators in Syringe Service Programs (SSPs)

OBH in collaboration with the OPH STD/HIV/Hepatitis Program (SHHP) has implemented prevention, intervention, treatment, and recovery support services for individuals with or at risk for OUD or stimulant use or misuse. SOR supported SHHP through designated health coordinators at four SSPs, which have provided supportive services, including naloxone, education and administration, training regarding opioid overdose, and hepatitis C virus (HCV) testing kits. This partnership has increased the proportion of people who inject drugs who are able to receive HIV and HCV antibody tests and be linked to HCV care. SHHP also conducts an environmental scan of hepatitis A and hepatitis B vaccine availability and accessibility in each public health region and identifies additional resources to facilitate vaccines for people who inject drugs. Additionally, by

implementing screening, brief intervention, and referral to treatment (SBIRT), SSPs act as referral points to MOUD treatment and systems of care within the hub-and-spoke model.

Increasing Access to Treatment

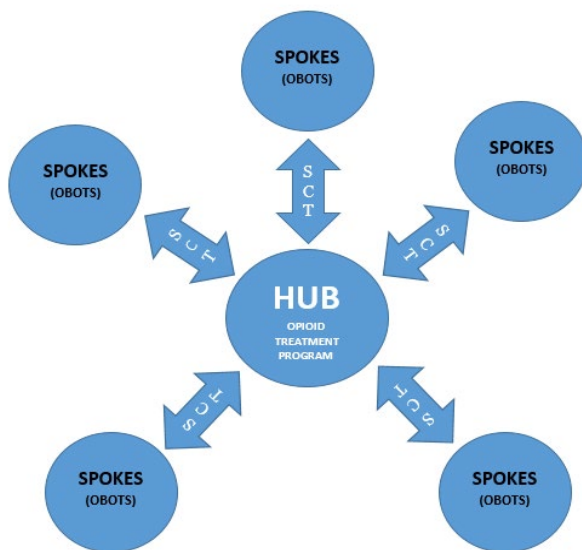
Louisiana has used SOR to implement a range of treatment initiatives, described below.

OUD Treatment

OBH implemented initiatives focused on treating individuals with OUD and StUD. In addition to the hub-and-spoke model described below, LGEs and DPSC provided counseling and MOUD to individuals. Overall, more than 6,000 individuals have received treatment services through LaSOR grants.

Hub-and-Spoke Network

LaSOR funds have enhanced and expanded OUD treatment providers' capacity to offer comprehensive services, including screening, assessment, orientation, urine drug screens, MOUD management, counseling (individual, group, and/or family), and case coordination. OBH uses a multifaceted, collaborative hub-and-spoke network to expand MOUD access and increase accessibility to other services for people who are uninsured or under-insured. To date, this program has increased the number of community office-based opioid treatment providers (OBOTS) by 74, thereby increasing access to FDA-approved MOUD. Approximately 3,800 individuals have been treated through the hub-and-spoke model (1,600 at OTPs and 2,200 at OBOTS).



Spokes are the ongoing care system comprised of prescribing physicians who monitor adherence to treatment, care coordination, and provide SBIRT. OBOTS, which act as “spokes,” are designed to provide services to individuals who report symptoms of mild to moderate OUD or those individuals who are in the process of stepping down with their medication treatment.

Spoke Care Teams (SCT) are staffed with a nurse and licensed mental health professional and are the liaisons between the hubs and spokes (support teams).

Hubs are the designated OTPs responsible for coordinating the care of individuals across systems, providing appropriate MOUD, and connecting to appropriate community services where necessary. Hubs are designed to provide services to individuals who report symptoms of moderate to severe OUD, such as an individual who has used opioids within the last year or those who inject opioids.

Opioid Treatment Programs (OTPs)

OBH uses the hub-and-spoke model to address OUD and provide evidence-based treatment services. The state has 11 OTPs, all of which provide services on behalf of SOR and serve as the hubs within this model. As a hub, and a specialty treatment center, OTPs are responsible for coordinating care for individuals with complex SUDs and co-occurring disorders across physical and behavioral health systems. As part of a continuum of care for individuals with OUD, OTPs can prescribe all three FDA-approved MOUD treatments, including methadone, to individuals served. Responsibilities include diagnosis, evaluation, and treatment. The type and scope of

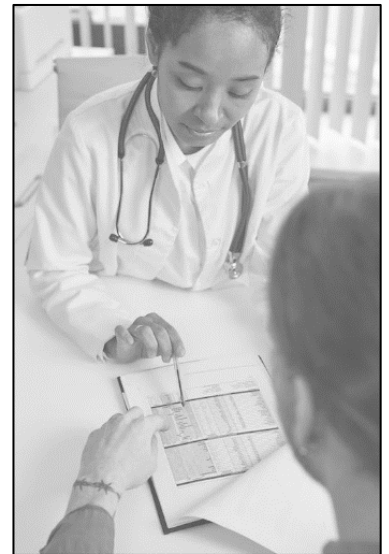
services, including counseling, are determined based on the individual's diagnoses, individual treatment plan, and current/prior medication. Approximately 1,600 individuals have been treated at OTPs through LaSOR.

Department of Corrections Intensive Pre-Release Treatment

OBH collaborates with DPSC to implement OUD treatment services for individuals in state-operated correctional facilities nine months to one year before release, including peer support services. Services are individualized and include MOUD via oral and/or injectable naltrexone and evidence-based practices, such as intensive cognitive-behavioral therapies. These services have been provided to more than 1,300 individuals in seven correctional facilities across the state.

Project ECHO

In collaboration with the Department of Psychiatry and Behavioral Sciences in the Tulane University School of Medicine, OBH has implemented the Project Extension for Community Healthcare Outcomes (ECHO) training initiative. This is a collaborative model of virtual education that links primary care providers (spokes) with specialists (hubs) to provide expertise to clinicians serving people with OUD. This initiative seeks to combat the opioid epidemic by reducing barriers for healthcare prescribers who treat OUD. Tulane University serves as the educational hub and implements the Project ECHO model focusing on OBOTs and community pharmacy providers for which continuing education credits are issued. During an ECHO session, participants present real (anonymized) case studies to specialists for discussion and recommendations. Participants learn from one another as knowledge is tested and refined through a robust, holistic approach. The continuous loop of learning, mentoring, and peer support makes ECHO unique, with a long-lasting impact far beyond that of a webinar or e-learning course. Three-hundred Project ECHOs have been conducted since the first LaSOR grant.



Academic Detailing

OBH, in collaboration with the Department of Psychiatry and Behavioral Sciences in the Tulane University School of Medicine, offers enhanced learning through academic detailing, which is an evidenced-based approach. This face-to-face, interactive, educational outreach to physicians and other providers offers unbiased, evidence-based information about medications to improve patient care. In partnership with Alosa Health, Tulane implements this model focusing on OBOTs and community pharmacy providers. Academic detailing has been ongoing throughout the LaSOR grants and almost 1,500 have been conducted to date.

StUD Treatment

Clients with StUD are offered cognitive behavioral therapy in addition to peer services and resource coordination. More than 900 clients have received StUD treatment services.

The Matrix Model

OBH collaborates with LGEs to provide training on the Matrix Model, an evidence-based, effective approach for treating people with stimulant misuse and StUD. Training is offered to ensure a competent workforce and quality of care for people with StUD.

Supporting Long-Term Recovery

Louisiana has used SOR to expand access to recovery support services, including mobile outreach teams, recovery hubs, and recovery housing.

Regional Recovery Hubs

OBH launched three regional recovery hubs in Shreveport, New Orleans, and Baton Rouge, as part of an overall initiative to develop a statewide network of peer recovery support services, recovery coaches, public education, prevention efforts, and advocacy. The recovery hubs serve as drop-in sites, with a dedicated team of peer support specialists, a site manager, and clinical supervision.

Recovery Hubs are open to anyone regardless of whether or not they are registered as patients or clients with any treatment facility or service delivery system, offering services in a relaxed and non-medical setting. Onsite ancillary services may include, but are not limited to, individual peer mentoring, referrals to treatment and recovery support services, ongoing educational opportunities, resume writing, job training, alcoholics anonymous (AA) and narcotics anonymous (NA) meetings or similar, and computer kiosks for job searching.



Outreach Mobile Teams (OMTs)

To target the needs of individuals with OUD, LGEs implement OMTs statewide—agencies that provide state and federally funded behavioral health prevention, treatment, and recovery support services. Designed to be three-person teams, OMTs consist of a peer, nurse, and licensed mental health practitioner. OMTs provide outreach and mobile peer recovery services, including recovery coaching and developing systems of care within their communities. Other services provided include, but are not limited to, SBIRT, crisis intervention, distribution of brochures and naloxone, and education on naloxone administration.

Oxford House, Inc.

OBH contracts with Oxford House to increase access to recovery support services for MOUD patients and individuals diagnosed with OUD or StUD who are reentering communities from criminal justice settings. The Oxford House model is a community-based approach to addiction treatment, providing an independent, supportive, and sober living environment. OBH provides funding to Oxford House to support the salary and wages of outreach workers to expand the organization's capacity statewide.

Through SOR, 77 new Oxford House homes have opened in Louisiana, serving more than 350 people.

Reaching & Serving Populations of Focus

Louisiana has used SOR to implement and support many programs that reach and serve populations of focus, including individuals in correctional settings and pregnant and parenting people.

Peers in Correctional Settings

DPSC, in coordination with the Orleans Parish Sheriff Department Day Reporting Center, provides a continuum of care for individuals reentering communities from criminal justice systems. Through this, individuals receive discharge planning services, case management and coordination, outpatient treatment for OUD and other SUDs, and referral to MOUD when needed. Peer support services are provided to individuals at Ascension, East Baton Rouge, and West Baton Rouge Parish jails, which includes education about OUD and other SUDs and referral to treatment available in the community.

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Improving Care for the Substance-Exposed Dyad (ICSED)

In collaboration with the OPH Louisiana Perinatal Quality Collaborative (LaPQC), the ICSED initiative was launched in 2021. ICSED emerged not only from key learnings from a LaPQC pilot project, but also from the *Louisiana Pregnancy-Associated Mortality Review Report* identifying substance use as one of the leading causes of pregnancy-associated, but not related, deaths among birthing persons in Louisiana. ICSED supports vital and timely work to address significant gaps in evidence-based protocols and practices related to the identification, care, and treatment of birthing persons with SUDs and their newborns. Services include case consultation, coaching, training sessions, and other services related to identification, treatment, and care of pregnant women with SUD, including systems and policy change. Thirteen birthing hospitals from six of Louisiana's nine regions participate in ICSED. About 24% of births in Louisiana are touched by these facilities.



About the Opioid Response Network (ORN): ORN is a group of diverse individuals and organizations working collaboratively to address the opioid and stimulant crisis. Funded by SAMHSA's SOR/Tribal Opioid Response (TOR) Technical Assistance (TA) grant, ORN works with states, health professionals, community organizations, the justice system, and individuals in all 50 states and nine territories to provide education and training. **Visit the ORN website [here](#) or request training or TA [here](#).**

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