

Signs of Opioid Addiction and Screening Tools to Assess Opioid Use Disorder and Referral to Treatment



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Tanya is an IPRO pharmacist with 18 years of clinical pharmacy, community pharmacy, academia, quality improvement and medication safety experience. Prior to joining IPRO, she worked at various community pharmacies and taught at Albany College of Pharmacy and Health Sciences in Albany, NY. She specializes in Medication Therapy Management (MTM), medication reconciliation, opioids, immunizations, and patient self-care. Her formal teaching experience includes courses in pharmacy practice and clinical experiential teaching.

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Kimbley Terrell, MSW

PROJECT FREEDOM, TRAINING AND OUTREACH COORDINATOR

Kimbley Terrell has a Bachelor of Science in Biology from Stillman College and a Master of Social Work from the University of Alabama. She has seventeen years of social service work experience, reaching across the ages and clinical settings. She has experience in correctional mental health, as well as mental health therapy, substance use treatment, case management, and DHR. In 2016, she began working at The University of Alabama Brewer's Porch Children Center (BPCC) providing clinical services for the Residential Treatment Programs. Serving as the primary therapist for BPCC, Kimbley provided and supervised comprehensive clinical planning and care for clients, while acting as a client liaison and supervising interns. In June 2020, she transitioned into a new position at the University of Alabama, School of Social Work where she is Project FREEDOM Training and Outreach Coordinator.

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Audra Morrison, MSW

SBIRT PROJECT COORDINATOR

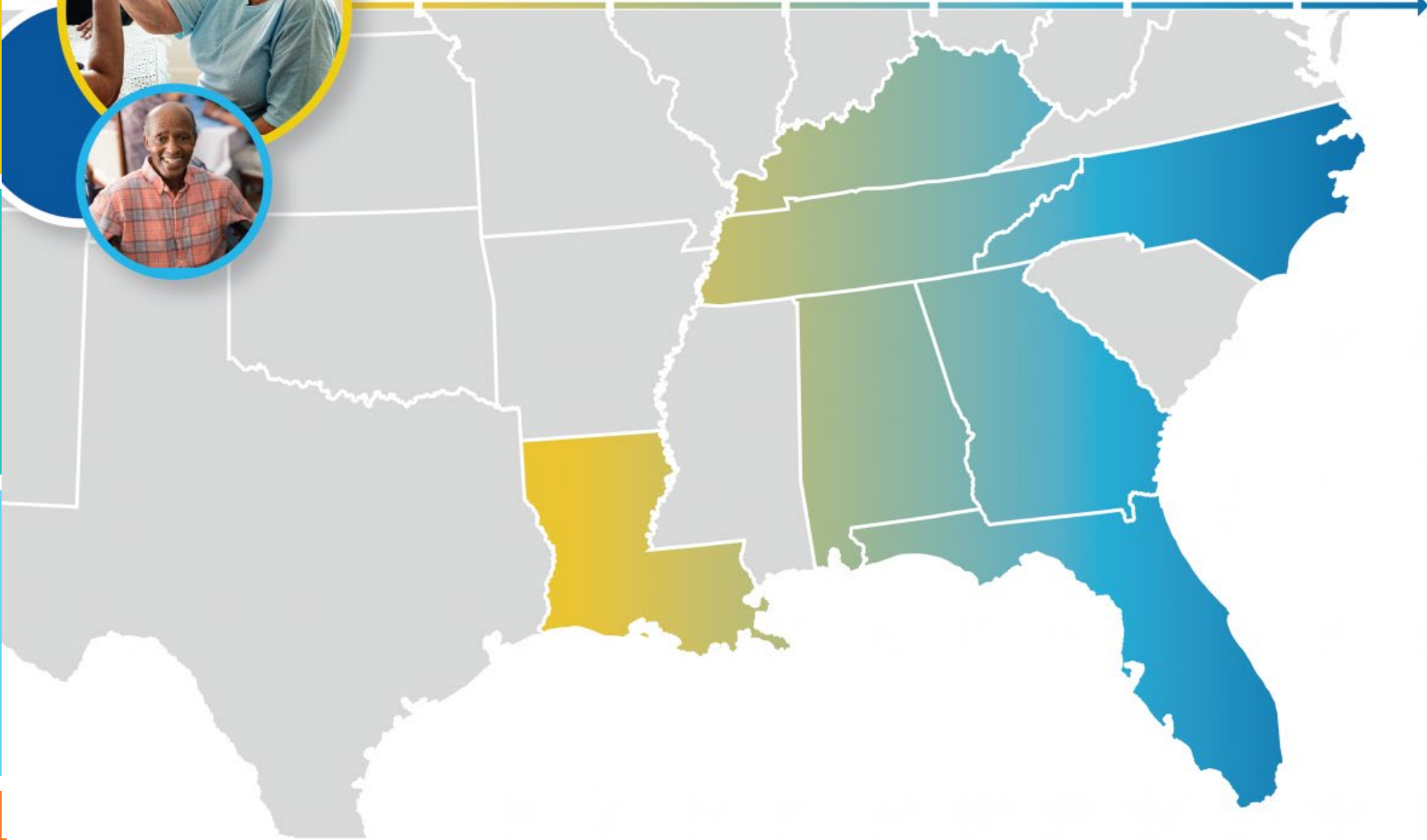
Audra Morrison is the Screening, Brief-Intervention, and Referral-toTreatment (SBIRT) Project Coordinator for the VitAL project with the University of Alabama School of Social Work. Her prior work with patients in the healthcare setting and within the community provides her with Substance Use and Mental Health experience.

Audra obtained her Bachelor of Social Work degree in 2016 and Master of Social Work degree in 2018, both from the University of Alabama School of Social Work.

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Making Health Care Better *Together*



Objectives

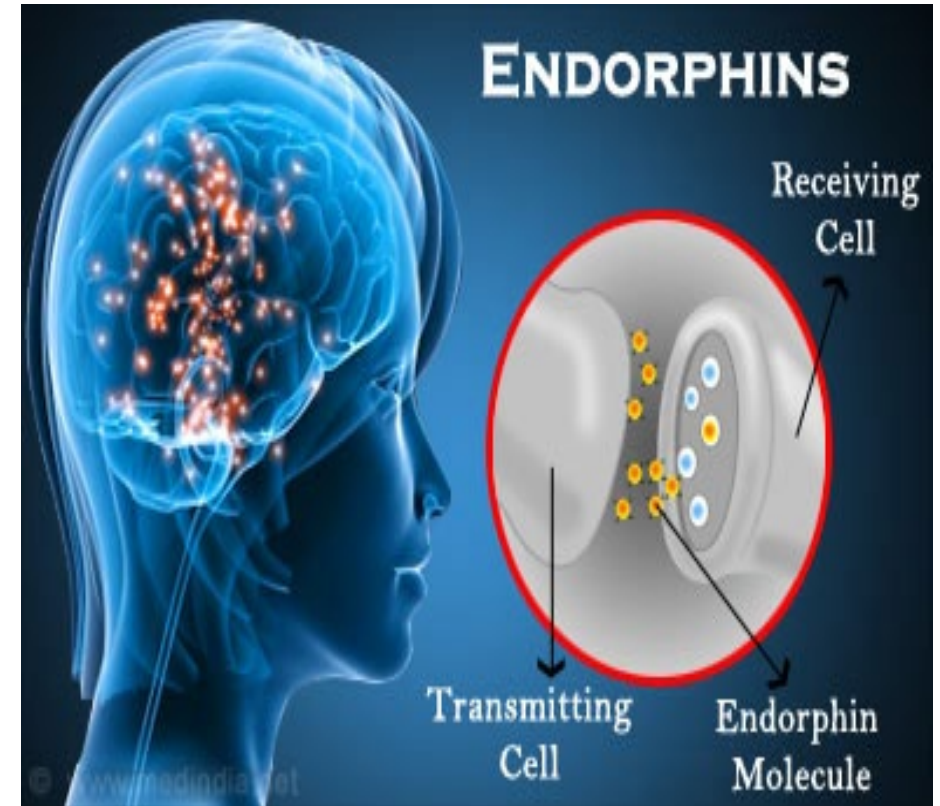
- Familiarize participants with statistical data regarding the opioid epidemic, background information on opioids and Opioid Use Disorder.
- Develop an understanding of the signs of opioid misuse and addiction.
- Familiarize participants with opioid abuse in the elderly and risks associated with this population.
- Develop an understanding of the effect opioids have on the brain.
- Familiarize participants with myths/misconceptions about the nature of addiction.
- Familiarize participants with opioid treatment options.
- Introduce participants to the SBIRT model.
- Introduce the importance of universally screening patients.
- Introduce participants to screening tools used in assessing patients' substance use.
- Develop an understanding of available referral sources.

Opioid Overview



The Body's Natural Opioid System

- The body naturally releases several different opioids during behaviors like exercising, eating and socializing.
- When these opioids attach to receptors, they can:
 - Suppress pain
 - Slow breathing
 - Produce a sense of calm



Opioids

- In addition to the body's natural opioids, there are substances that act on the same opioid receptors in the brain.
- They produce a much stronger effect than natural opioids.
- These substances have medical uses and are one of the most commonly prescribed medications for short-term and chronic pain.



Common Opioids

- A class of drugs used to reduce pain.
- Prescription opioids are prescribed to treat moderate to severe pain but have serious risks and side effects.
- Examples: oxycodone, hydrocodone, morphine, Percocet, Vicodin, methadone and fentanyl.
- Illegal opioids: heroin, illegally produced fentanyl and other synthetic opioids.

What Do Opioids Do?

- Reduce and relieve pain
- Can sometimes create a sense of euphoria
- HIGHLY habit-forming and addictive
- **SIDE EFFECTS:**
 - Drowsiness and sedation
 - Mental confusion
 - Nausea and vomiting
 - Constipation
 - Pinpoint (constricted) pupils
 - Slowed or depressed vital signs
 - Body temperature, blood pressure, pulse and respiration rates
 - Overdose and death



Opioid Misuse/Dependence

Signs and Symptoms

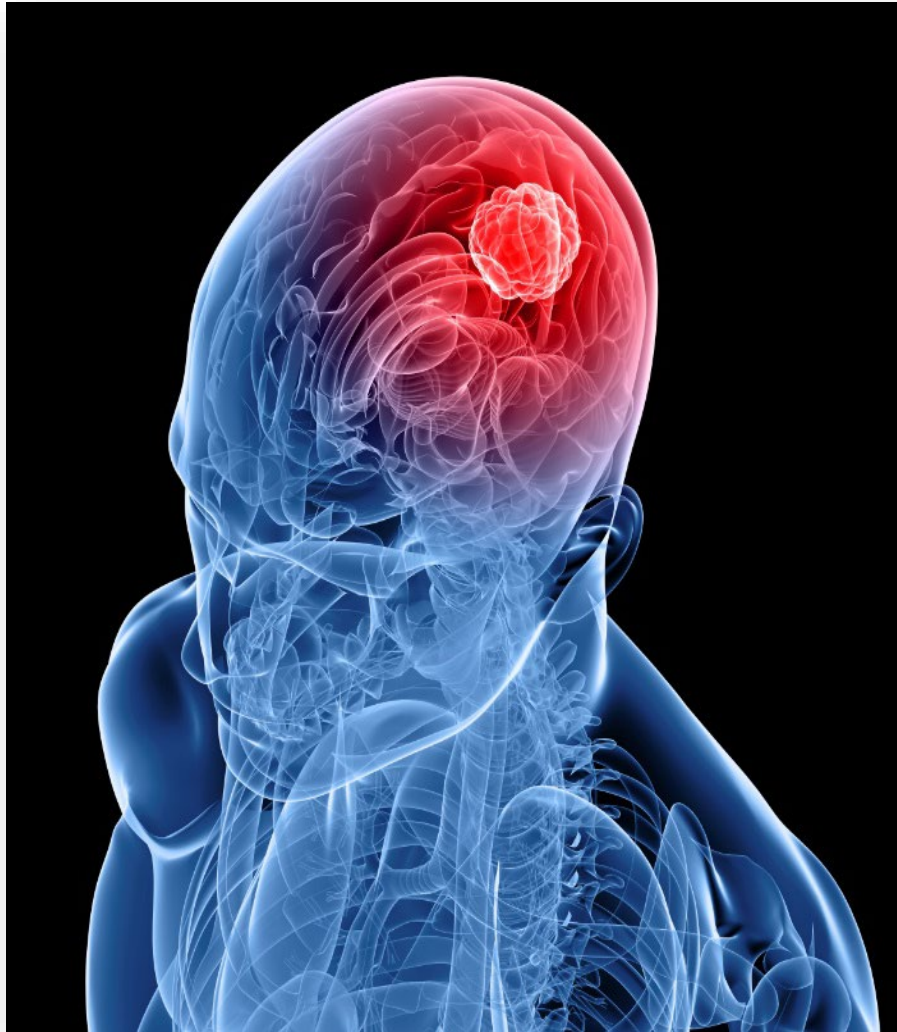
Physical Signs

- Change in appetite
- Pupil size
 - Small: opioid intoxication
 - Large: opioid withdrawal
- Nausea
- Vomiting
- Sweating
- Shaking

Behavioral Signs

- Change in personality/attitude
- Change in friends
- Change in activities, sports, or hobbies
- Poor attendance/grades
- Increased isolation or secrecy
- Wearing long-sleeved shirts
- Moody, irritable, nervous, giddy or nodding off
- Stealing

American Society of Addiction Medicine (ASAM)

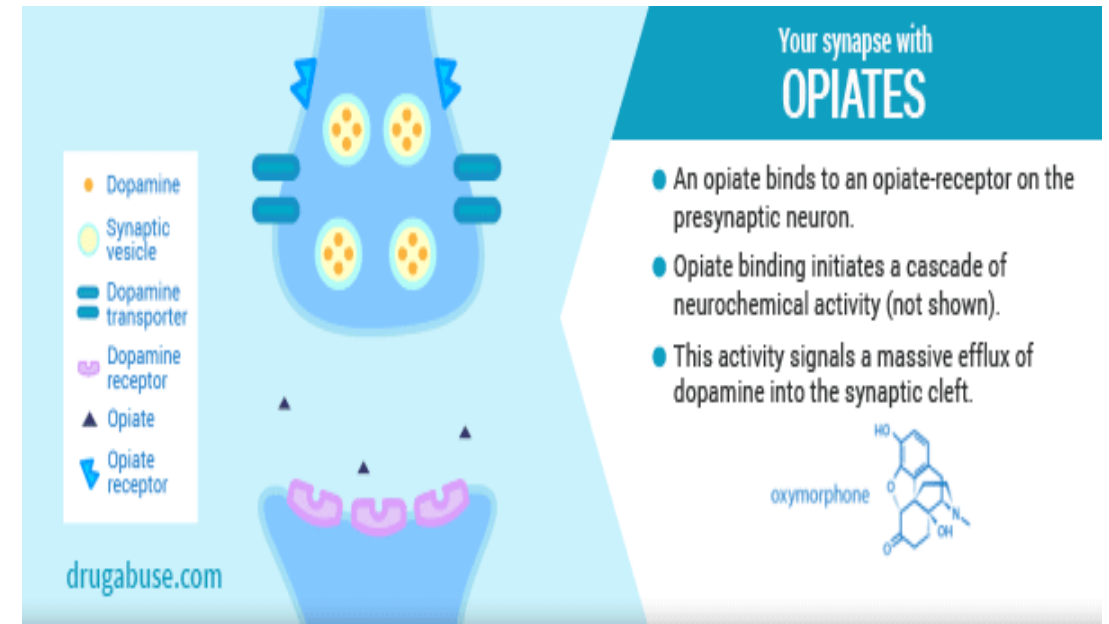


“Addiction is a primary, chronic disease of brain reward, motivation, memory and related circuitry. Dysfunction in these circuits leads to characteristic biological, psychological, social, and spiritual manifestations. This is reflected in an individual pathologically pursuing reward and/or relief by substance use and other behaviors.”

(American Society of Addiction Medicine, 2011)

Opioid-Seeking Behavior

- Opioids disrupt the natural reward system by flooding the brain with large amounts of dopamine.
- People addicted to opioids experience uncontrollable cravings for opioids that persist after they stop taking the drug.



Defining Opioid Use Disorder

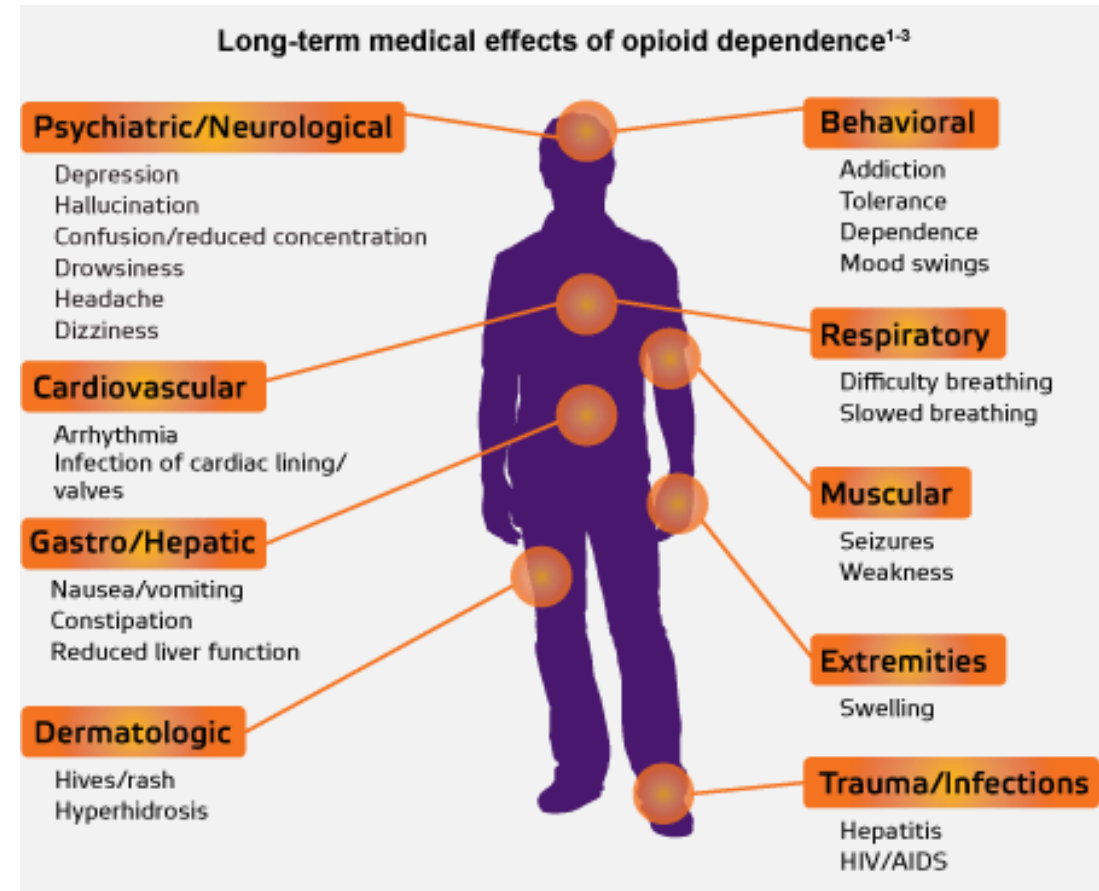
A problematic pattern of opioid use leading to clinically significant impairment or distress, manifested by at least two of the following, occurring within 12 months:

1. Opioids taken in larger amounts or longer periods than intended.
2. Persistent desire or unsuccessful efforts to cut down.
3. Time spent in activities necessary to obtain the opioid or use the opioid.
4. Craving or urge to use opioids.
5. Opioid use resulting in a failure to fulfill obligations at work, school or home.
6. Continued opioid use despite having recurrent social or interpersonal problems caused by the effects of opioids.
7. Social, occupational, or recreational activities are given up because of use.
8. Recurrent opioid use in situations in which it is physically hazardous.
9. Continued opioid use despite knowledge of having a persistent or recurrent physical or psychological problem due to opioids.
10. Tolerance, as defined by either (a) need for markedly increased amounts of opioids to achieve desired effect or (b) diminished effect with continued use of the same amount of opioid.
11. Withdrawal, as manifested by either (a) opioid withdrawal syndrome or (b) opioids taken to relieve withdrawal symptoms.

DSM - 5

Health Effects Related to Opioids

- The health effects of opioids are partially determined by dosage and route of administration.
- The most critical health risk is the high probability of overdose.



Opioid Misuse and Addiction: Strategies for Community Health Workers

Sources of the Opioid Crisis

Prescribed opioids pose a risk beyond the patient who receives the prescription.

- Among people who abuse prescription opioids, most get them:
 - From a friend or relative for free (55%)
 - Prescribed by a physician (20%)
 - Bought from a friend or relative (11%)
- Among new heroin users, about three out of four report abusing prescription opioids before using heroin.

<https://www.cdc.gov/drugoverdose/data/prescribing.html>

Overdose Deaths in the United States

- Nov. 18, 2021 -- The CDC estimated 100,306 Americans died from drug overdoses from April 2020 to April 2021, a 28.5% increase from the previous year. It is the first time that drug-related deaths have reached six figures in any 12-month period.
- Deaths in some states rose even more sharply. Vermont saw an almost-70% increase, and drug [overdose](#) deaths in West Virginia increased by 62%. Many states, including Alabama, California, Kansas, Kentucky, Louisiana, Tennessee and Washington, had a 45%-50% rise in overdose deaths.
- The vast majority (73,757) of overdose deaths involved opioids — with most of those (62,338) involving synthetic [opioids](#) such as fentanyl. Federal officials said that one American died every five minutes from an overdose, or 265 a day.

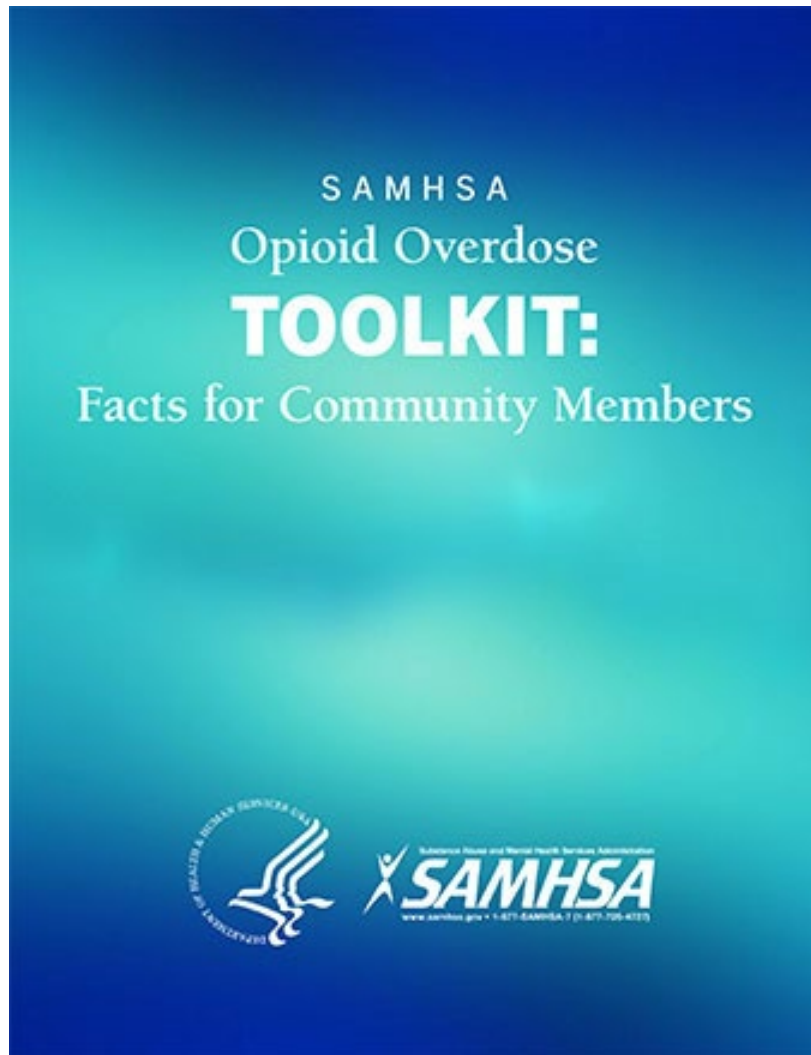


Who Is Most at Risk for Opioid Prescription Overdose?

- **Doctor shoppers** — People who obtain multiple controlled substance prescriptions from multiple providers.
- People who take high daily dosages of prescription painkillers.
- People who misuse multiple abuse-prone prescription drugs.
- People who are switching between prescriptions.
- People who are mixing opioids with other prescriptions.
- People with chronic medical conditions (HIV, cardiovascular or respiratory disease, mental illnesses).
- People who have been recently released from incarceration and in-patient treatment programs.
- People who have recently completed a mandatory opioid detoxification or have abstained from use for a period of time.
- People who have been discharged from emergency medical care after opioid intoxication.



Strategies to Prevent Overdose Death



- Talk to people and caregivers about ways to avoid an accidental overdose, especially at discharge, such as:
 - Do not adjust the prescribed dosage, skip doses or take extra doses.
 - Do not mix with other drugs or alcohol (i.e., anti-anxiety drugs like benzodiazepines, antidepressants or cocaine).
 - Abstain from using opioids unless prescribed, and attempt abstinence from heroin.
- [Opioid Overdose Prevention Toolkit – 2014](#)

The Opioid Epidemic and Its Impact on the Elderly Population



Statistical Data

- The use of prescribed opioid analgesics among middle-aged and older adults is more prevalent (8.1% of adults aged 40–59 years and 7.9% of adults aged 60 and older) than that of younger adults (4.7% of adults aged 20–39 years).
- One-fourth (25.4%) of adults aged 65 years and older who take opioids report being long-time opioid users for 90 days or longer.
- The high prevalence of opioid use among older adults can be explained by the high prevalence of chronic pain and the more widespread use of opioids to manage acute and chronic pain.
- Currently, over half of older adults (52.9%) experience bothersome pain.
- Pain prevalence is high among older adults who are female, obese and have musculoskeletal and depressive symptoms.

Factors That Contribute to Opioid Abuse Among the Elderly

- Substance use disorder earlier in life
- Genetics
- Major life changes
- Disengagement
- Deterioration of health
- Dangerous health care prescribing practices

Risk Factors for Elderly Opioid Misuse

- Using medications that have expired
- Not knowing about the side effects
- Sharing or borrowing medications
- Mixing medications or drinking alcohol while taking medications
- Going to multiple physicians to get more of the same drug
- Going to multiple physicians who are unaware of the complete medications regiment
- Failure to tell doctor about OTC, herbs, vitamins
- Small print on packaging and labels
- Health literacy issues (e.g., not understanding the physician's instructions)
- Missing or misunderstanding instructions (vision, hearing or language barriers)

Signs/Symptoms of Elderly Opioid Misuse

- Anxiety
- Blackouts
- Dizziness
- Depression
- Disorientation
- Mood swings
- Falls, bruises, burns
- Family problems
- Financial problems
- Headaches
- Incontinence
- Increased tolerance to alcohol
- Legal difficulties
- Memory Loss
- Problems in decision making
- Poor hygiene
- Seizures
- Sleep problems
- Social isolation
- Unusual response to medications



Strategies to Address the Opioid Epidemic



Community Prevention

1. Strategic Planning
2. Community & Provider Education
3. Harm Reduction
4. Medication Disposal



Crisis Services

1. Naloxone Distribution and Education for First Responders, Patients, Family
2. ER Overdose Education (MAT Initiation)
3. Detoxification
4. Link ER/Detox to treatment



Clinical Practice

1. CDC Pain Management Guidelines
2. Screening & Assessment
3. Medication Assisted Treatment
4. SUD Levels of Treatment
5. PDMP
6. Telehealth



Recovery Support

1. Access to Health Care
2. Safe & Affordable Housing
3. Education & Employment
4. Social & Community Connections



Workforce

1. Clinician Support & Continuing Education
2. Recruitment & Retention Plans
3. Integrated Care Competencies
4. Peer Recovery

Let's Talk About Stigma

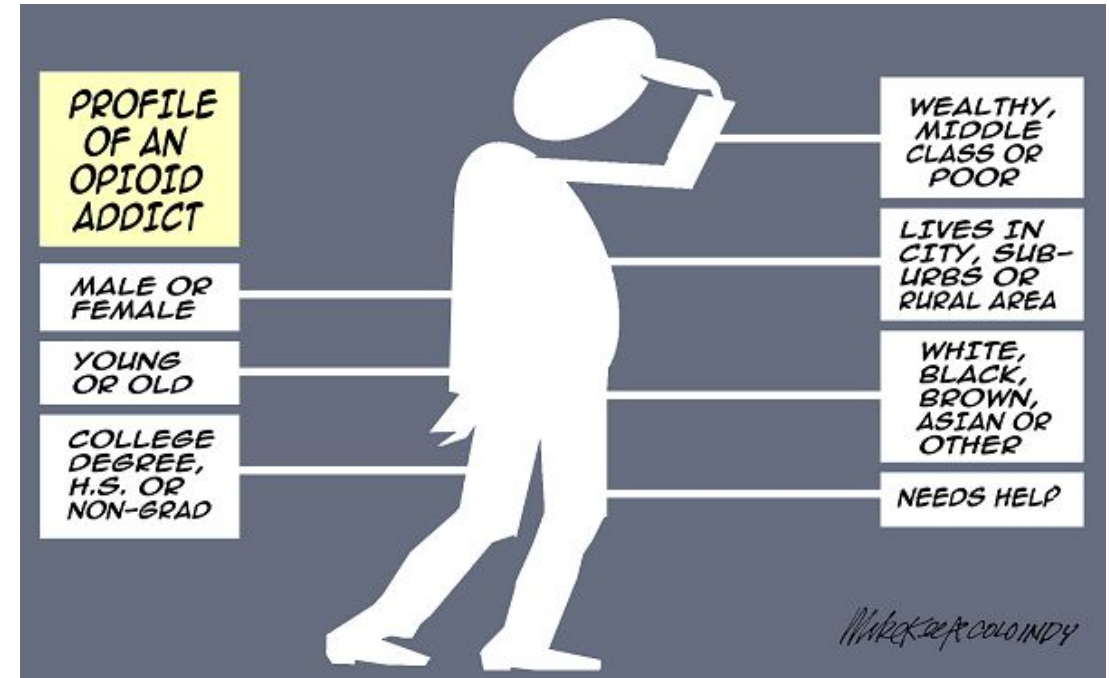
YOUR WORDS MATTER

Break The Cycle Of Stigma



The Truth Regarding Drug Addiction

- It affects people from all walks of life.
- It affects people from all age groups.
- It affects people from all races and religions.
- There is no “typical drug addict.”
- Key aspect of treatment: destigmatize addiction and get people into treatment!



SBIRT

Screening & Assessment



WHY SBIRT?



What is SBIRT?

Screening, **B**rief Intervention, and
Referral to **T**reatment

What is SBIRT?

- **Screening:** Quickly assess use and severity of alcohol, illicit drugs and prescription drug abuse.
- **Brief Intervention:** A three- to five-minute motivational and awareness-raising intervention for risky or problematic substance users or brief treatment sessions.
- **Referral to Treatment:** Referrals to specialty care for patients with substance use disorders.

Screening

Universally screen everyone ages 19+

Alcohol	Drugs	Mental Health
<ul style="list-style-type: none"> US-AUDIT C 	<ul style="list-style-type: none"> NIDA Quick Screen 	<ul style="list-style-type: none"> PHQ-3,9
<ul style="list-style-type: none"> US-AUDIT 	<ul style="list-style-type: none"> DAST 10 	

NIDA Quick Screen

ORIGINAL QUESTION

In the past year, how often have you used illegal drugs or prescription drugs for non medical reasons?	Never	Once or twice	Monthly	Weekly	Daily or almost daily
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NIDA Quick Screen

VITAL ADAPTED VERSION

Do you misuse or overuse your prescription medication? If so, how often?	Never	Once or twice	Monthly	Weekly	Daily or almost daily
Do you take other people's prescription medication? If so, how often?	Never	Once or twice	Monthly	Weekly	Daily or almost daily
In the past year, how often have you used illegal drugs (i.e., marijuana, crack cocaine, crystal meth heroin, etc.)	Never	Once or twice	Monthly	Weekly	Daily or almost daily

DAST 10

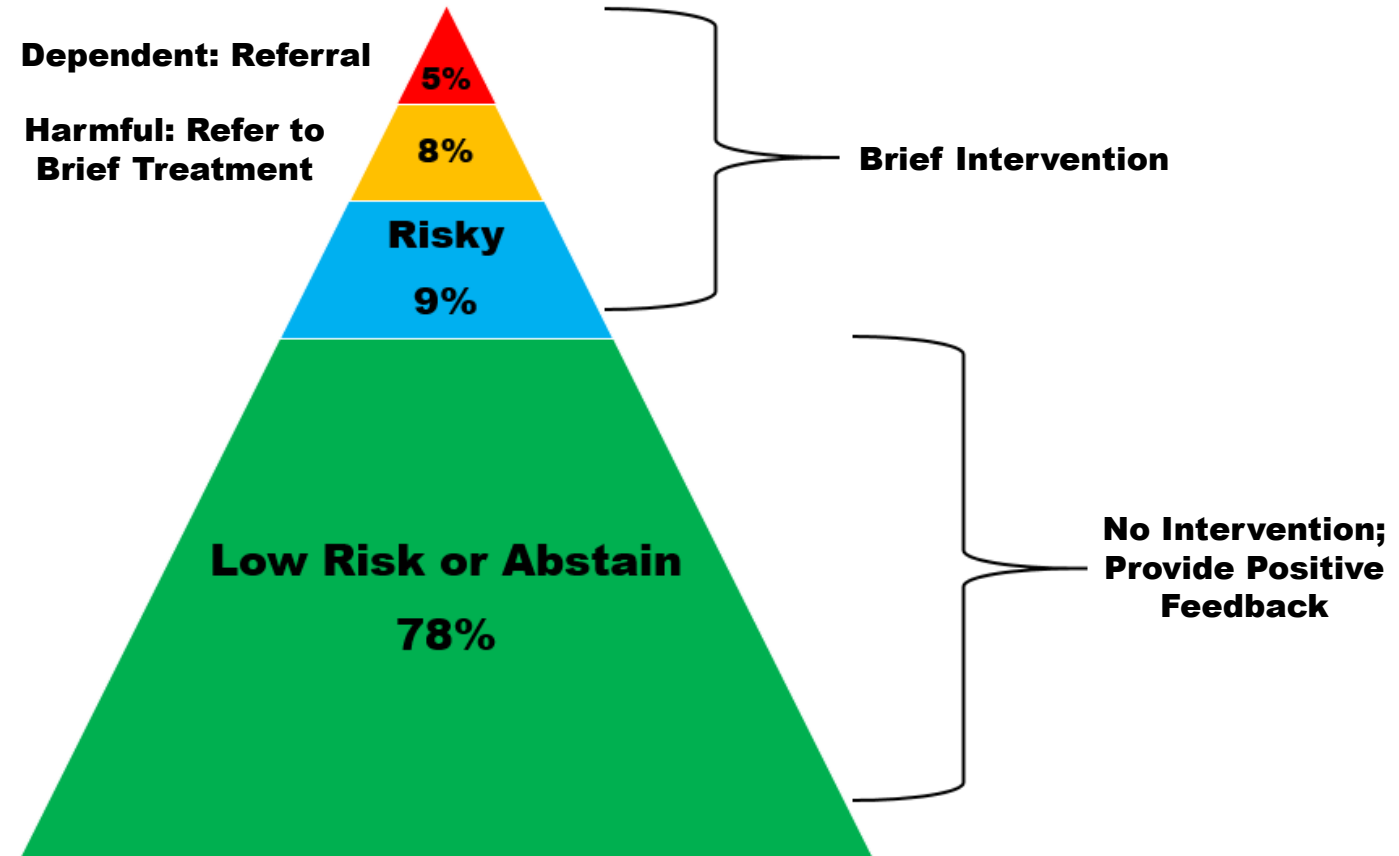

DAST

NAME _____ DATE OF BIRTH ____/____/____

DO YOU USE MORE THAN ONE DRUG A TIME?	<input type="checkbox"/> <i>No</i>	<input type="checkbox"/> <i>Yes</i>
ARE YOU UNABLE TO STOP USING DRUGS WHEN YOU WANT TO?	<input type="checkbox"/> <i>No</i>	<input type="checkbox"/> <i>Yes</i>
HAVE YOU HAD "BLACKOUTS" OR "FLASHBACKS" AS A RESULT OF DRUG USE?	<input type="checkbox"/> <i>No</i>	<input type="checkbox"/> <i>Yes</i>
DO YOU EVER FEEL BAD OR GUILTY ABOUT YOUR DRUG USE?	<input type="checkbox"/> <i>No</i>	<input type="checkbox"/> <i>Yes</i>
DOES YOUR SPOUSE (OR PARENTS) EVER COMPLAIN ABOUT YOUR DRUG INVOLVEMENT?	<input type="checkbox"/> <i>No</i>	<input type="checkbox"/> <i>Yes</i>
HAVE YOU NEGLECTED YOUR FAMILY OR FRIENDS BECAUSE OF YOUR DRUG USE?	<input type="checkbox"/> <i>No</i>	<input type="checkbox"/> <i>Yes</i>
HAVE YOU ENGAGED IN ILLEGAL ACTIVITIES IN ORDER TO OBTAIN DRUGS?	<input type="checkbox"/> <i>No</i>	<input type="checkbox"/> <i>Yes</i>
HAVE YOU EVER EXPERIENCED WITHDRAWAL SYMPTOMS (FELT SICK) WHEN YOU STOPPED TAKING DRUGS?	<input type="checkbox"/> <i>No</i>	<input type="checkbox"/> <i>Yes</i>
HAVE YOU HAD MEDICAL PROBLEMS AS A RESULT OF YOUR DRUG USE (E.G., MEMORY LOSS, HEPATITIS, CONVULSIONS, BLEEDING, ETC.)?	<input type="checkbox"/> <i>No</i>	<input type="checkbox"/> <i>Yes</i>

Screening Results

- **LOW/NO RISK= FEEDBACK**
- **MILD=BRIEF INTERVENTION**
- **MODERATE=BRIEF TREATMENT**
- **HIGH/SEVERE=REFERRAL**



Brief Intervention

- Provided when screening indicates **Mild** risk
- Core of SBIRT
- Three- to five-minute conversation
- Patients can receive up to five sessions

Brief Treatment

- Provided when screening indicates **Moderate** risk
- Most often patients will receive up to 12 sessions

Referral to Treatment

- Provided when screening indicates **Severe** risk
- Can receive Brief Intervention or Brief Treatment
- Warm handoff
- Services activation

National Hotlines and Websites

SAMHSA
Substance Abuse and Mental Health Services Administration

Home | Site Map | Contact Us

Search SAMHSA.gov Search

Find Treatment | Practitioner Training | Public Messages | Grants | Data | Programs | Newsroom | About Us | Publications

Home » Find Treatment

Find Treatment

- Alcohol, Tobacco, and Other Drugs
- Opioid Overdose
- Behavioral Health Treatment and Services
- Behavioral Health Treatment Services Locator
- Disaster Distress Helpline
- Implementing Behavioral Health Crisis Care
- Mental Health and Substance Use Disorders
- SAMHSA's National Helpline
- Suicide Prevention
- National Suicide Prevention Lifeline
- Early Serious Mental Illness Treatment Locator
- Recovery and Recovery Support

Find Treatment

Find Your Closest Treatment Location

Substance Use Treatment Locator
Millions of Americans have a substance use disorder. Help is available, treatment works and people recover every day. Find a state-licensed treatment facility near you.
findtreatment.gov

National Suicide Prevention Lifeline
24-hour, toll-free, confidential support for people in distress. Prevention and crisis resources for you or your loved ones.
1-800-273-TALK (8255)
TTY: 1-800-799-4889
suicidepreventionlifeline.org

Behavioral Health Treatment Services Locator
A confidential and anonymous source of information for persons seeking treatment facilities in the United States or U.S. Territories for substance use/addiction and/or mental health problems.
findtreatment.samhsa.gov

SAMHSA's National Helpline
This Helpline provides 24-hour free and confidential treatment referral and information about mental and/or substance use disorders, prevention and recovery in English and Spanish.
1-800-662-HELP (4357)
TTY: 1-800-487-4889
samhsa.gov/find-help/national-helpline

Buprenorphine Practitioner & Treatment Program Locator

Disaster Distress Helpline
SAMHSA's Disaster Distress Helpline provides 24/7,

<https://www.samhsa.gov/find-treatment>

An official website of the United States government

FindTreatment.gov For help finding treatment 1-800-662-HELP (4357)

Search for treatment | Treatment options | Paying for treatment | Understanding addiction | Understanding mental health



Millions of Americans have a substance use disorder. Help is available.

The Substance Abuse and Mental Health Services Administration (SAMHSA) collects information on thousands of state-licensed providers who specialize in treating substance use disorders, addiction, and mental illness.

Find treatment

Learn more



Find a treatment facility near you

City or zip code

Search

National Hotlines and Websites

Alcoholics Anonymous

www.aa.org

Narcotics Anonymous

www.na.org

Al-Anon

www.al-anon.org

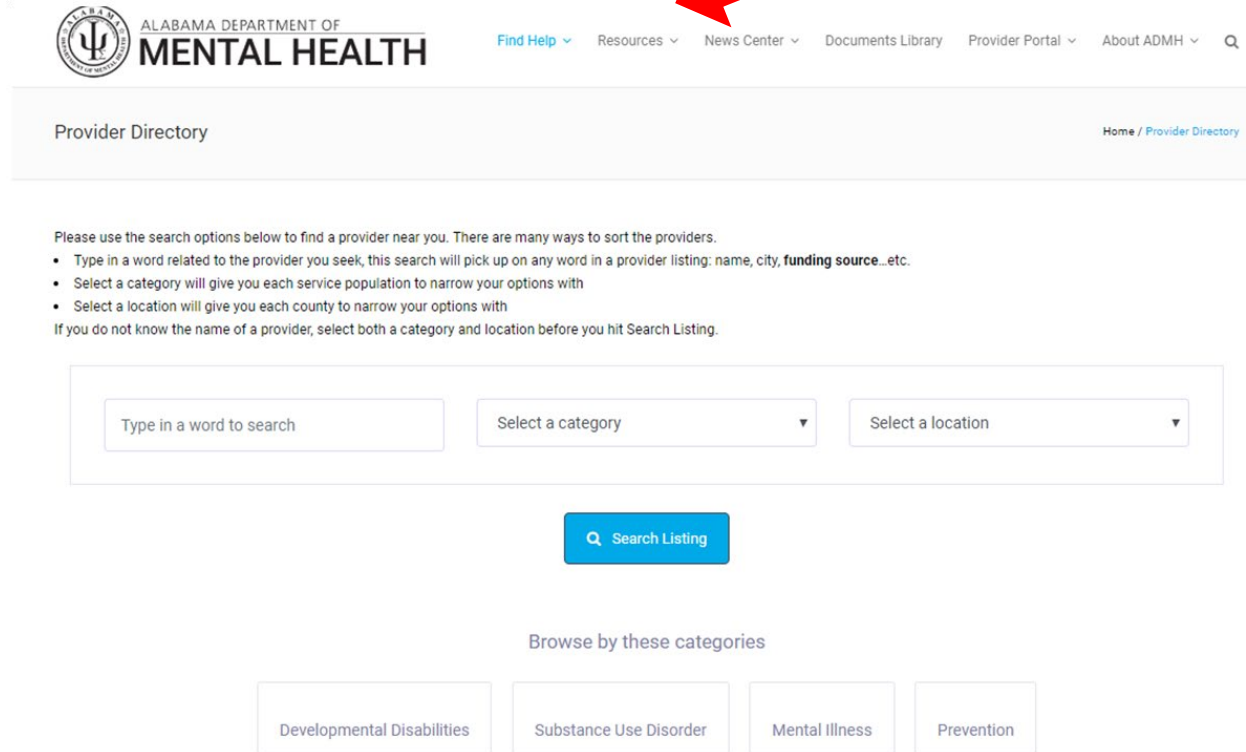
Celebrate Recovery

www.celebraterecovery.com

Virtual Recovery Resources

<https://vitalalabama.com/covid-19-resources/covid-19-resources/>

Alabama Hotlines and Websites



ALABAMA DEPARTMENT OF MENTAL HEALTH

Find Help ▾ Resources ▾ News Center ▾ Documents Library ▾ Provider Portal ▾ About ADMH ▾

Provider Directory Home / Provider Directory

Please use the search options below to find a provider near you. There are many ways to sort the providers.

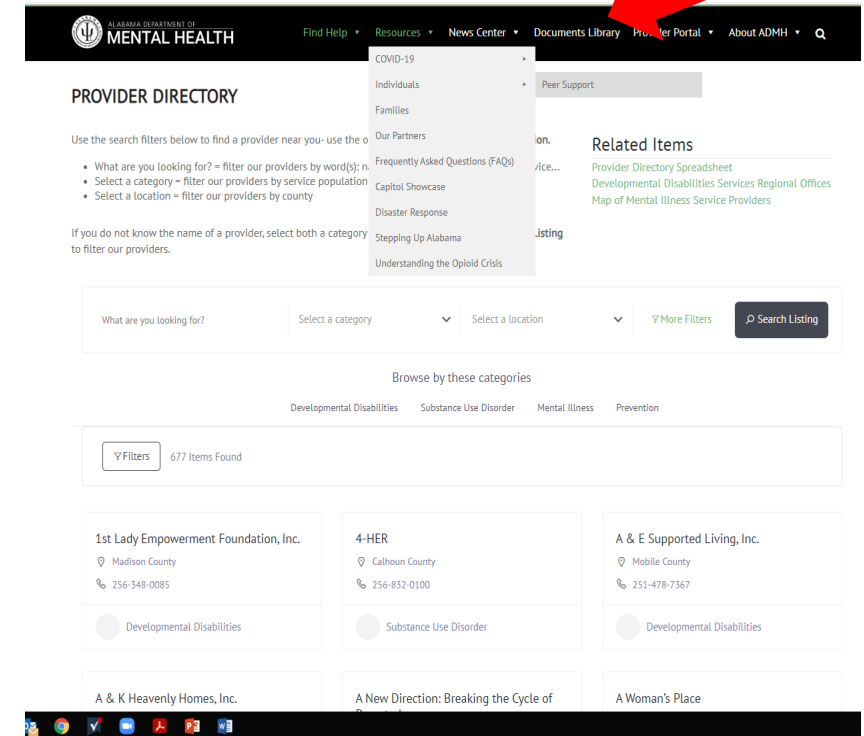
- Type in a word related to the provider you seek, this search will pick up on any word in a provider listing: name, city, funding source...etc.
- Select a category will give you each service population to narrow your options with
- Select a location will give you each county to narrow your options with

If you do not know the name of a provider, select both a category and location before you hit Search Listing.

Type in a word to search Select a category ▾ Select a location ▾

Browse by these categories

Developmental Disabilities Substance Use Disorder Mental Illness Prevention



ALABAMA DEPARTMENT OF MENTAL HEALTH

Find Help ▾ Resources ▾ News Center ▾ Documents Library ▾ Provider Portal ▾ About ADMH ▾

PROVIDER DIRECTORY

Use the search filters below to find a provider near you- use the o

- What are you looking for? = filter our providers by word(s); n
- Select a category = filter our providers by service population
- Select a location = filter our providers by county

If you do not know the name of a provider, select both a category to filter our providers.

What are you looking for? Select a category ▾ Select a location ▾

Browse by these categories

Developmental Disabilities Substance Use Disorder Mental Illness Prevention

677 Items Found

<p>1st Lady Empowerment Foundation, Inc.</p> <p>Madison County</p> <p>256-348-0085</p> <p>Developmental Disabilities</p>	<p>4-HER</p> <p>Calhoun County</p> <p>256-832-0100</p> <p>Substance Use Disorder</p>	<p>A & E Supported Living, Inc.</p> <p>Mobile County</p> <p>251-478-7367</p> <p>Developmental Disabilities</p>
<p>A & K Heavenly Homes, Inc.</p>	<p>A New Direction: Breaking the Cycle of</p>	<p>A Woman's Place</p>

<https://mh.alabama.gov>

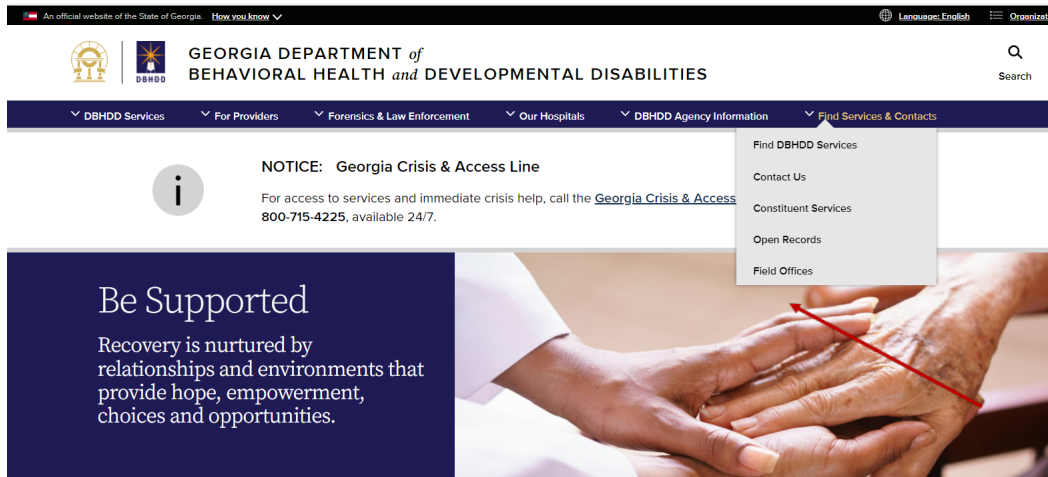
Florida Hotlines and Websites



For Adults	For Children	For Providers
<ul style="list-style-type: none"> Find Immediate Help Adult Substance Abuse Adult Mental Health State Mental Health Treatment Facilities Recovery Residences Opioids Overdose Prevention Domestic Violence Hotline 	<ul style="list-style-type: none"> Find Immediate Help Childrens Substance Abuse Childrens Mental Health Juvenile Incompetent to Proceed Youth Tobacco Prevention 	<ul style="list-style-type: none"> Managing Entity Contract Documents FASAMS FARS Training CFARS Training

<https://www.myflfamilies.com/service-programs/samh/>

Georgia Hotlines and Websites

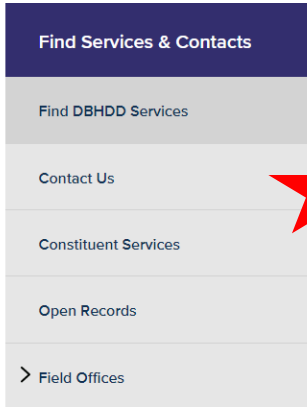


GEORGIA COVID-19 EMOTIONAL SUPPORT LINE

For free and confidential emotional support or resource information as a result of the COVID-19 pandemic, call or

<https://dbhdd.georgia.gov>

How Do I Find DBHDD Services?



- **If you need immediate crisis help:**

Call GCAL (Georgia Crisis & Access Line) at 1-800-715-4225 to be connected to crisis services for mental health, substance abuse, or intellectual/developmental disability issues, available 24/7.

- **For access and information about outpatient services:**

Call GCAL (Georgia Crisis & Access Line) at 1-800-715-4225 to be connected to behavioral health and intellectual/developmental disability providers of outpatient services in your area.

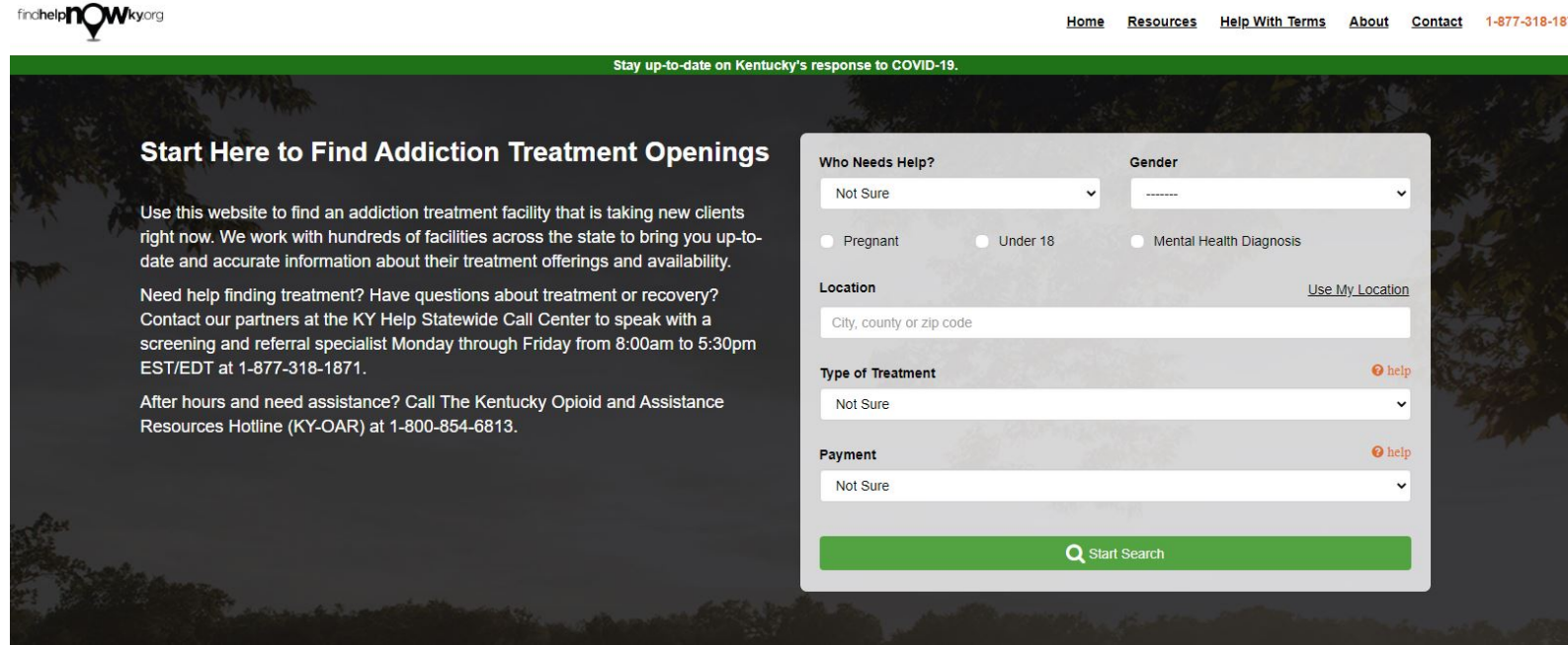
- **Search online for supports and services:**

To search for behavioral health and intellectual/developmental disabilities supports and services from our network of over 600 providers, please visit [ReferralConnect via mygal.com](https://mygal.com).

- **Still need help?**

If you need help navigating DBHDD's system of services, or detailed information about resources in your community, please contact your [regional field office](#).

Kentucky Hotlines and Websites



findhelpnowky.org

Home Resources Help With Terms About Contact 1-877-318-1871

Stay up-to-date on Kentucky's response to COVID-19.

Start Here to Find Addiction Treatment Openings

Use this website to find an addiction treatment facility that is taking new clients right now. We work with hundreds of facilities across the state to bring you up-to-date and accurate information about their treatment offerings and availability.

Need help finding treatment? Have questions about treatment or recovery? Contact our partners at the KY Help Statewide Call Center to speak with a screening and referral specialist Monday through Friday from 8:00am to 5:30pm EST/EDT at 1-877-318-1871.

After hours and need assistance? Call The Kentucky Opioid and Assistance Resources Hotline (KY-OAR) at 1-800-854-6813.

Who Needs Help? **Gender**

Pregnant Under 18 Mental Health Diagnosis

Location [Use My Location](#)

Type of Treatment [help](#)

Payment [help](#)

KY HELP Statewide Call Center: (877) 318-1871 | After Hours: KY-OAR (800) 854-6813

Mon-Fri: 8:30 am – 10:00 pm
Sat-Sun: 8:30 am – 5:30 pm

<https://findhelpnowky.org/ky>

Kentucky Hotlines and Websites

GetHelpLex

Welcome to GetHelpLex

Alcohol and drug addiction affects individuals from all walks of life. Locating treatment, support, or other resources for yourself or a loved one with addiction may seem overwhelming.

Whether you are looking for services or support for yourself or a loved one, there are local, state, and national resources to help you locate treatment and recovery services as well as support for family and friends.

GetHelpLex is a tool to help you find resources related to alcohol and other drug addiction. It is an informational tool only. **If you are experiencing a medical emergency, please call 911.**

Addiction Treatment and Recovery Services

Addiction Recovery Support Programs

Casey's Law

No-Cost Narcan/Naloxone In Lexington

No-Cost Assessment In Lexington

Syringe Service/Needle Exchange Programming in Lexington

Twelve Step and Mutual Support Meetings

Legal disclaimer

<http://gethelpflex.org/>

Louisiana Hotlines and Websites



LOUISIANA
DEPARTMENT OF HEALTH

Secretary
DR. COURTNEY N. PHILLIPS

← BACK TO LDH

BEHAVIORAL HEALTH

[Louisiana.gov > LDH > Office of Behavioral Health](#)

- ABOUT US
- OBH LEADERSHIP
- ADDICTIVE DISORDERS
- BEHAVIORAL HEALTH MANAGED CARE
- MENTAL HEALTH
- CSOC
- GRANTS
- PUBLICATIONS
- LINKS

Office of Behavioral Health – Addictive Disorders Services

Substance use and Related Disorders services are provided statewide by each regional human service district/authority, or through the Healthy Louisiana plans for the Medicaid population. The districts and authorities provide treatment for people suffering from addictions to drugs, alcohol or gambling, as well as support for their families and friends.

According to federal regulations, persons identified as indigent or Medicaid eligible are considered priority populations. Priority admission is given to the following populations: pregnant women who inject drugs, other pregnant women who abuse substances, and others who inject drugs. For these groups, OBH aims to provide addiction services with no or a minimal waiting period. If care is not available to this priority population within 48 hours, the Office will provide interim treatment services as appropriate.

Below you will find a listing of levels of care or programs offered for Substance Use and Related Disorders:

Treatment Programs

- **Problem Gambling Treatment:**
These services are available to specifically treat gambling disorder. Individuals who wish to access these services can call the Louisiana Problem Gamblers Helpline at 1-877-770-7867. This phone is answered 24/7 by trained helpline specialists. According to state regulations, these services are offered at no cost to residents residing in Louisiana. For more information about problem gambling, please visit our informational webpage [here](#).
- **Withdrawal Management (detox):**
These services are available as medically-monitored inpatient withdrawal management (medically supported) or clinically managed residential withdrawal management (social detox) levels of care. Medically-monitored services provide immediate, acute care to substance users at moderate to severe health risk, either because of a co-occurring medical condition or because of a severe medical condition resulting from substance use. Clinically-managed detox services treat clients who need immediate care to treat addiction but do not have any urgent health problems.

(855) 229-6848 – Information regarding Louisiana’s treatment services.

[Addictive Disorders Services | La Dept. of Health](https://ldh.la.gov/page/95)
<https://ldh.la.gov/page/95>

Louisiana Hotlines and Websites



/directory/category/100

Directory

Local Governing Entity (LGE) Regional Offices

Acadiana Area Human Services District
302 Dulles Drive, Lafayette LA 70506-3008 | 📞 337.262.4100

Capital Area Human Services District-Administrative Offices
7389 Florida Blvd. Ste 100A , Located in Bon Carre', Baton Rouge LA 70806 | 📞 225.922.2700

Central Louisiana Human Services District
5411 Coliseum Blvd., Alexandria LA 71303 | 📞 318.487.5191

Florida Parishes Human Services Authority (FPHSA)
835 Pride Drive, Suite B, Hammond LA 70401 | 📞 985.543.4333

Imperial Calcasieu Human Services Authority
One Lakeshore Drive , Suite 2000, Lake Charles LA 70629 | 📞 337.475.3100

Jefferson Parish Human Services Authority
3616 South I-10 Service Road West, Metairie LA 70001 | 📞 504.838.5215

Metropolitan Human Services District
3100 General de Gaulle Drive, New Orleans LA 70114 | 📞 504.568.3130

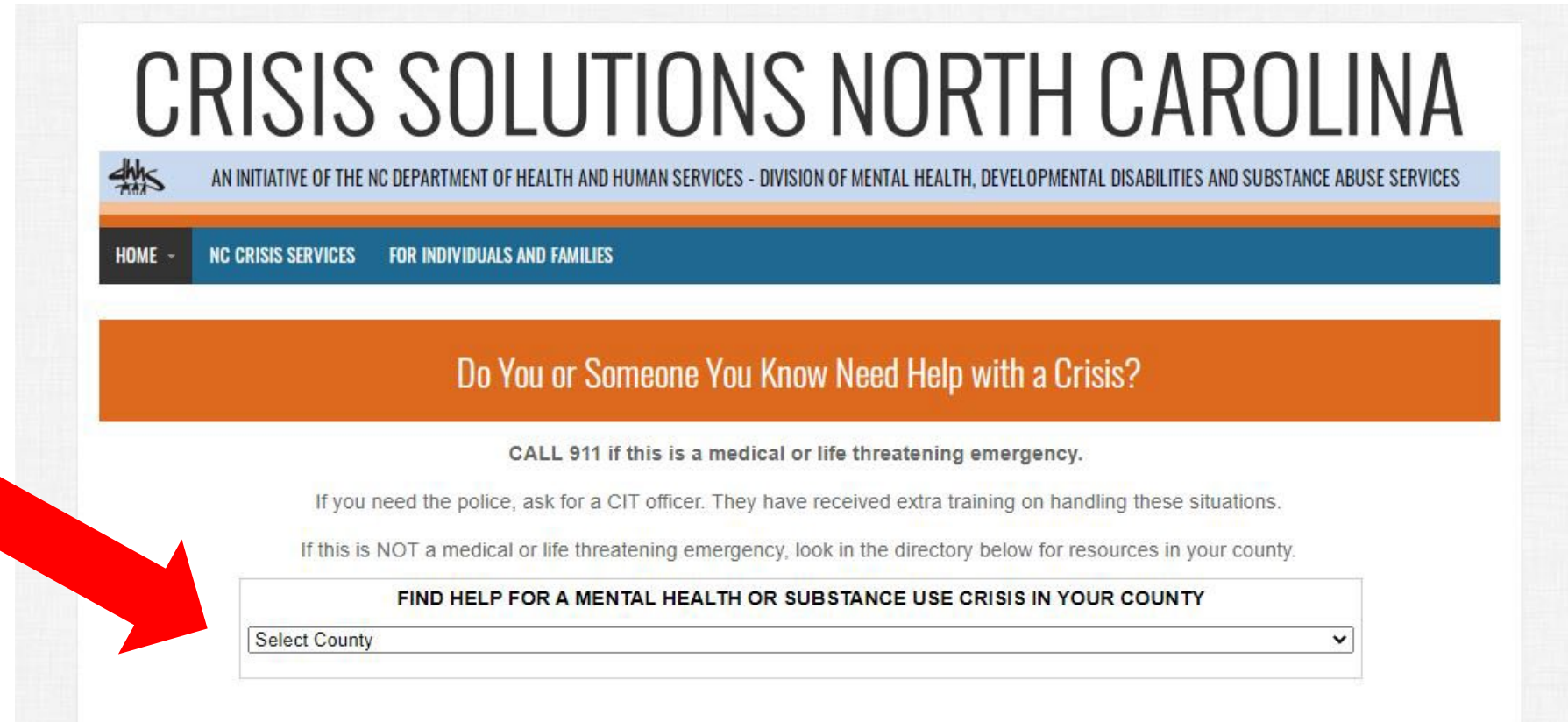
Northeast Delta Human Services Authority
2513 Ferrand Street, Monroe LA 71201 | 📞 318.362.3270

Northwest Louisiana Human Services District
1310 North Hearne Avenue, Shreveport LA 71107 | 📞 318.676.5111

Louisiana hotlines:

- Alcohol/Drug Helpline: (877) 664-2248

North Carolina Hotlines and Websites



CRISIS SOLUTIONS NORTH CAROLINA

AN INITIATIVE OF THE NC DEPARTMENT OF HEALTH AND HUMAN SERVICES - DIVISION OF MENTAL HEALTH, DEVELOPMENTAL DISABILITIES AND SUBSTANCE ABUSE SERVICES

HOME - NC CRISIS SERVICES FOR INDIVIDUALS AND FAMILIES

Do You or Someone You Know Need Help with a Crisis?

CALL 911 if this is a medical or life threatening emergency.

If you need the police, ask for a CIT officer. They have received extra training on handling these situations.

If this is NOT a medical or life threatening emergency, look in the directory below for resources in your county.

FIND HELP FOR A MENTAL HEALTH OR SUBSTANCE USE CRISIS IN YOUR COUNTY

Select County

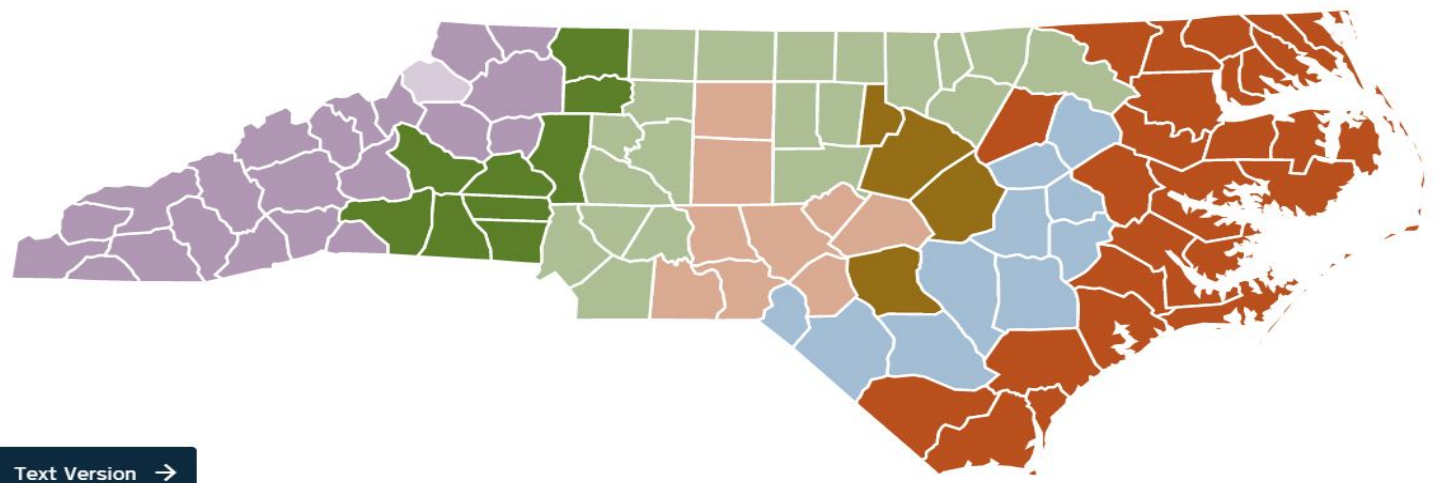
<http://crisissolutionsnc.org/>

North Carolina Hotlines and Websites



NCDHHS » Providers » LME/MCO Directory

LME/MCO Directory

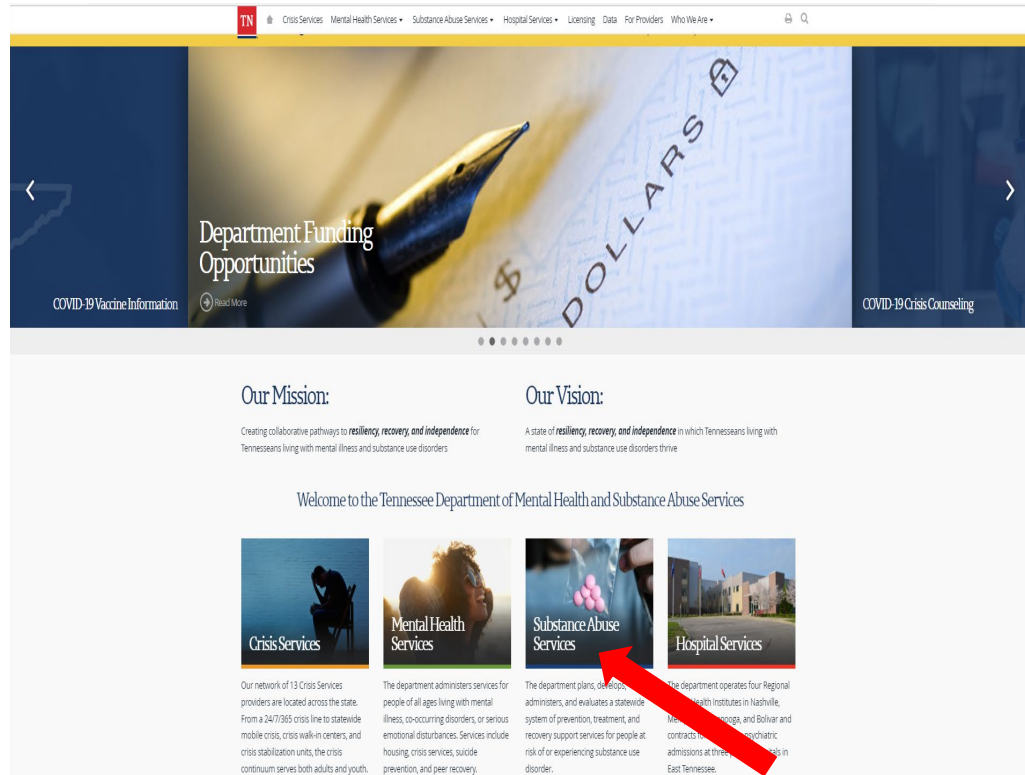


Text Version →

[LME-MCO Map PDF](#)

<https://www.ncdhhs.gov/providers/lme-mco-directory>

Tennessee Hotlines and Websites



Department Funding Opportunities

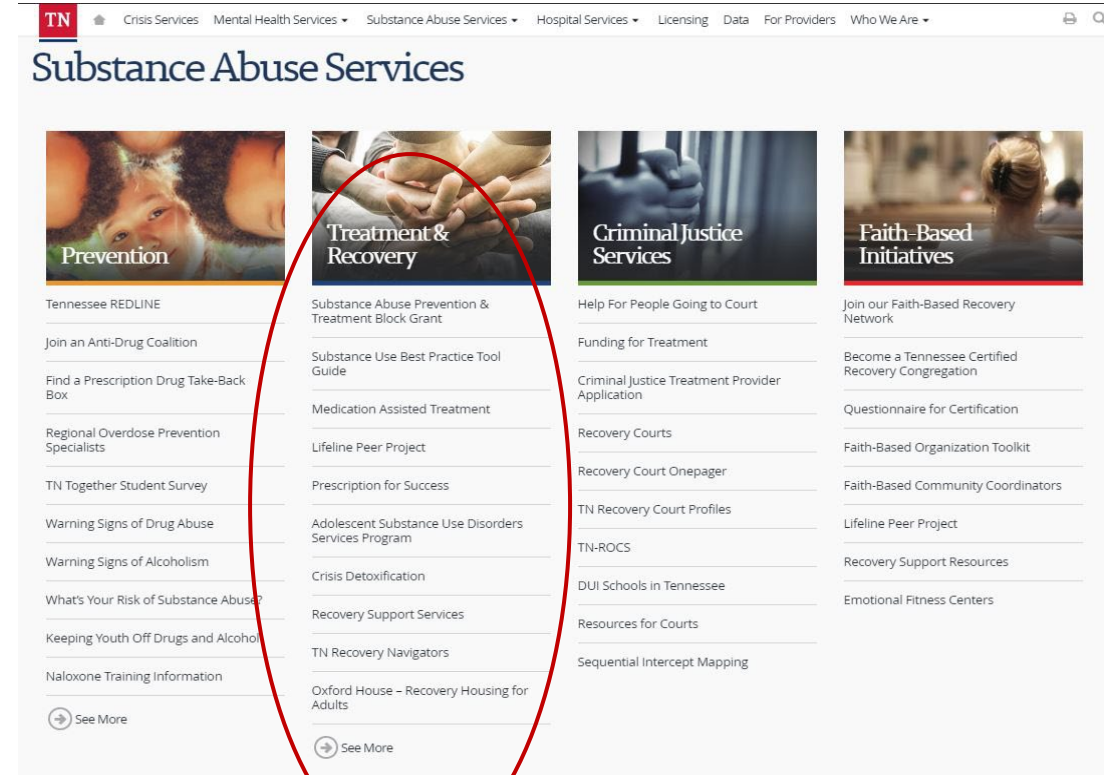
COVID-19 Vaccine Information | COVID-19 Crisis Counseling

Our Mission: Creating collaborative pathways to *resiliency, recovery, and independence* for Tennesseans living with mental illness and substance use disorders.

Our Vision: A state of *resiliency, recovery, and independence* in which Tennesseans living with mental illness and substance use disorders thrive.

Welcome to the Tennessee Department of Mental Health and Substance Abuse Services

- Crisis Services**: Our network of 13 Crisis Services providers are located across the state. From a 24/7/365 crisis line to statewide mobile crisis, crisis walk-in centers, and crisis stabilization units, the crisis continuum serves both adults and youth.
- Mental Health Services**: The department administers services for people of all ages living with mental illness, co-occurring disorders, or serious emotional disturbances. Services include housing, crisis services, suicide prevention, and peer recovery.
- Substance Abuse Services**: The department plans, develops, administers, and evaluates a statewide system of prevention, treatment, and recovery support services for people at risk of or experiencing substance use disorder.
- Hospital Services**: The department operates four Regional Mental Health Institutes in Nashville, Memphis, Knoxville, and Bolivar and contracts for psychiatric admissions at three hospitals in East Tennessee.



Substance Abuse Services

- Prevention**
 - Tennessee REDLINE
 - Join an Anti-Drug Coalition
 - Find a Prescription Drug Take-Back Box
 - Regional Overdose Prevention Specialists
 - TN Together Student Survey
 - Warning Signs of Drug Abuse
 - Warning Signs of Alcoholism
 - What's Your Risk of Substance Abuse?
 - Keeping Youth Off Drugs and Alcohol
 - Naloxone Training Information
 - See More
- Treatment & Recovery**
 - Substance Abuse Prevention & Treatment Block Grant
 - Substance Use Best Practice Tool Guide
 - Medication Assisted Treatment
 - Lifeline Peer Project
 - Prescription for Success
 - Adolescent Substance Use Disorders Services Program
 - Crisis Detoxification
 - Recovery Support Services
 - TN Recovery Navigators
 - Oxford House - Recovery Housing for Adults
 - See More
- Criminal Justice Services**
 - Help For People Going to Court
 - Funding for Treatment
 - Criminal Justice Treatment Provider Application
 - Recovery Courts
 - Recovery Court Onepager
 - TN Recovery Court Profiles
 - TN-ROCS
 - DUI Schools in Tennessee
 - Resources for Courts
 - Sequential Intercept Mapping
- Faith-Based Initiatives**
 - Join our Faith-Based Recovery Network
 - Become a Tennessee Certified Recovery Congregation
 - Questionnaire for Certification
 - Faith-Based Organization Toolkit
 - Faith-Based Community Coordinators
 - Lifeline Peer Project
 - Recovery Support Resources
 - Emotional Fitness Centers

Tennessee Hotlines and Websites

**Call the Tennessee Statewide Crisis Line 24/7
1-855-CRISIS-1 (1-855-274-7471)**

Mental Health and Substance Use Helpline:

Monday-Friday, 8 a.m. to 4:30 p.m. CST

Ph: (800) 560-5767

(615) 532-6700

The Tennessee REDLINE is the 24/7/365 resource for substance use treatment referrals. Anyone can call or text **1-800-889-9789** for confidential referrals.

SBIRT Summary

- It is **brief**.
- The screening is **universal**.
- One or more specific behaviors are targeted.
- The services may occur in a public health or other non-substance use treatment setting.
- It is **comprehensive**.
- Strong research or substantial experiential evidence supports the model.

Contact Information

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Project FREEDOM Training and Outreach Coordinator
School of Social Work
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Wendi Hogue, LPC., NCC
Project FREEDOM Project Director
Email: Wendi.Hogue@ua.edu

Audra Morrison, MSW
SBIRT Project Coordinator
School of Social Work
Email: awmorrison1@ua.edu

Our Website:
<https://vitalalabama.com>

Additional Resources:

SAMHSA Opioid Overdose Prevention TOOLKIT

Opioid Use Disorder Facts

Five Essential Steps for First Responders

Information for Prescribers

Safety Advice for Patients & Family Members

Recovering From Opioid Overdose



SAMHSA
Substance Abuse and Mental Health
Services Administration

[SAMHSA.gov](https://www.samhsa.gov)

[Harmreduction.org](https://www.harmreduction.org)

[Getnaloxonenow.org](https://www.getnaloxonenow.org)

[Overdosepreventionalliance.org](https://www.overdosepreventionalliance.org)

[Naloxoneinfo.org](https://www.naloxoneinfo.org)

[Prescribetoprevent.org](https://www.prescribetoprevent.org)

[Projectlazarus.org](https://www.projectlazarus.org)

[Stopoverdose.org](https://www.stopoverdose.org)

References

- Centers for Disease Control and Prevention. Opioid overdose. <https://www.cdc.gov/drugoverdose/index.html>
- Sporer KA. Acute heroin overdose. Ann Intern Med. 1999;130(7):584-590
- Sumner S A, Mercado-Crespo MC, Spelke MB, Paulozzi L, Sugerman DE, Hillis SD, Stanley C. Use of naloxone by emergency medical services during opioid drug overdose resuscitation efforts. Prehospital Emergency Care. 2016; 20(2):220-225
- Prescribe to Prevent. Welcome to PrescribeToPrevent.org. <http://prescribetoprevent.org>
- Boyer EW. Management of opioid analgesic overdose. N Engl J Med. 2012;367(2):146-155
- LoVecchio F, Pizone A, Riley B, Sami, A, D'Incognito C. Onset of symptoms after methadone overdose. Am J Emerg Med. 2007;25(1):57-59. 7 Kampman, K, Jarvis
- SAMHSA, Opioid Overdose Prevention TOOLKIT Publication ID SMA18-4742. June 2018
- https://www.washingtonpost.com/graphics/2019/investigations/dea-pain-pill-database/?utm_term=.65171d5aad9&itid=ik_inline_manual_2
- Substance Abuse Among Older Adults: A Guide for Social Service Providers - <http://store.samhsa.gov/product/substance-abuse-among-older-adults-for-social-service-providers/sma04-3971>
- Prescription and Illicit Drug Abuse - <http://nihseniorhealth.gov/drugabuse/improperuse/01.html>
- SAMHSA Guide to Preventing Older Adult Alcohol and Psychoactive Medication Misuse/Abuse: Screening and Brief Intervention – http://www.aoa.gov/AoA_Programs/HPW/Behavioral/docs2/Issue%20Brief%203%20Screening%20Brief%20Interventions.pdf

Questions?



CMS 12th SOW Goals



Behavioral Health Outcomes & Opioid Misuse

- ✓ Promote opioid best practices
- ✓ Decrease high dose opioid prescribing and opioid adverse events in all settings
- ✓ Increase access to behavioral health services



Patient Safety

- ✓ Reduce risky medication combinations
- ✓ Reduce adverse drug events
- ✓ Reduce C. diff in all settings



Chronic Disease Self-Management

- ✓ Increase performance on ABCS clinical quality measures (i.e., aspirin use, blood pressure control, cholesterol management, cardiac rehab)
- ✓ Identify patients at high-risk for developing kidney disease & improve outcomes
- ✓ Identify patients at high risk for diabetes-related complications & improve outcomes



Quality of Care Transitions

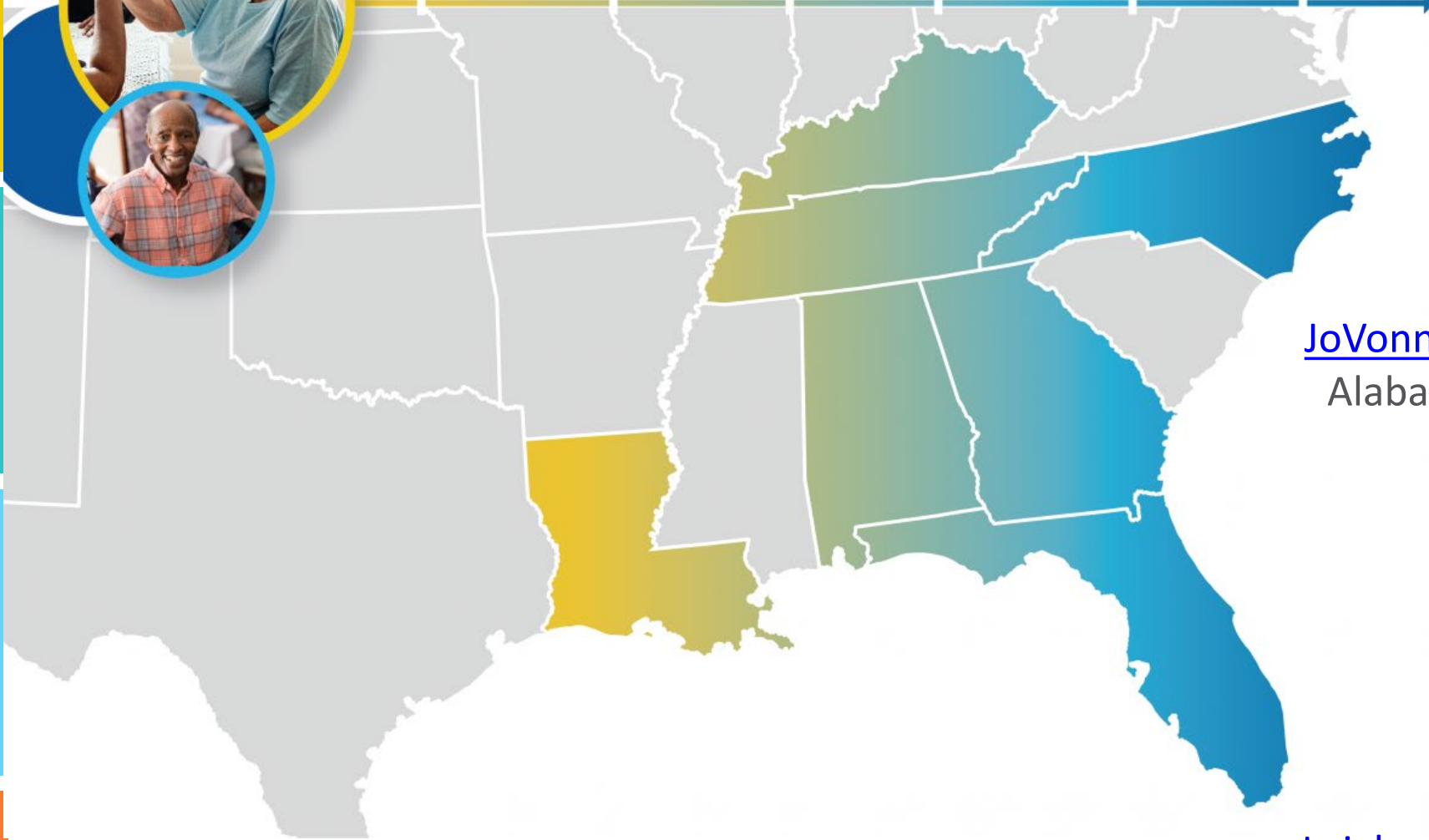
- ✓ Convene community coalitions
- ✓ Identify and promote optimal care for super utilizers
- ✓ Reduce community-based adverse drug events



Nursing Home Quality

- ✓ Improve the mean total quality score
- ✓ Develop national baselines for healthcare related infections in nursing homes
- ✓ Reduce emergency department visits and readmissions of short stay residents

Making Health Care Better *Together*



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Program Directors

Making Health Care Better Together



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