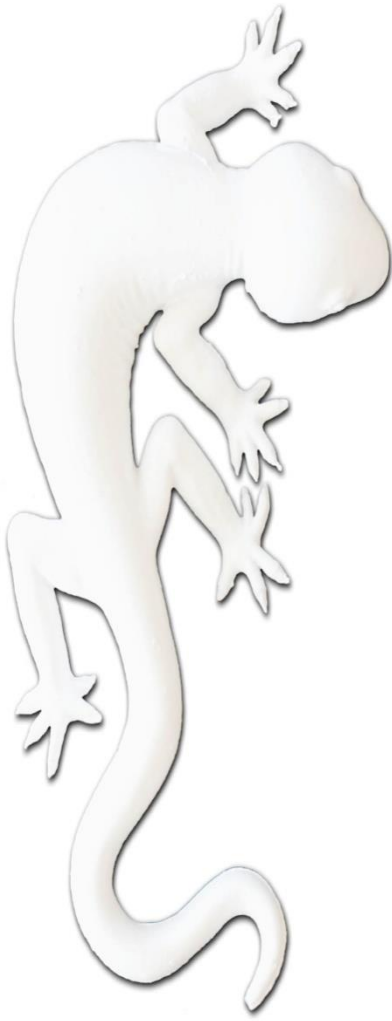


**SEA TAKA NA'ASUKU  
PASCUA YAQUI  
Centered Spirit Program  
NEW BEGINNINGS  
Opioid Treatment Program**



**New Beginnings Member Handbook  
2023**



*"It is the mission of the  
Centered Spirit Program  
(CSP) to provide  
professional, confidential,  
and culturally compatible  
behavioral health services  
to promote healing,  
personal growth, and  
healthy living for Pascua  
Yaqui Tribal members and  
their families in the  
Communities we serve"*

**Tucson:** (520) 879-6060  
24/7 Crisis Line: (520) 591-7206  
7490 S. Camino De Oeste  
Tucson, AZ 85757



**CSP – St. Mary’s:** (520) 879-5450  
24/7 Crisis Line: (520) 591-7206  
1775 West St. Mary’s Road, #115  
Tucson, AZ 85715

**CSP - Guadalupe:** (480)768-2021  
24/7 Crisis Line: (480) 736-4943  
9405 S. Avenida Del Yaqui  
Tempe, AZ 85283



## Table of Contents

Welcome! . . . . .	3
Centered Spirit Program Mission Statement. . . . .	3
Centered Spirit Philosophy. . . . .	3
Centered Spirit Values. . . . .	3
Clinic Hours. . . . .	4
New Beginnings Staff and Phone Numbers. . . . .	4
In Case of Emergency. . . . .	4
<b>Medication Assisted Treatment Overview</b>	
Addiction, Defined. . . . .	4
The Advantages of Medication-Assisted Treatment. . . . .	5
Why Methadone or Buprenorphine are not Worse than Heroin. . . . .	6
What Does Medication-Assisted Treatment Do? . . . . .	6
Side Effects. . . . .	6
Tolerance. . . . .	8
Withdrawals. . . . .	8
Other Side Effects Including Constipation, Sweating, and Itching. . . . .	9
Use of Alcohol. . . . .	9
Overdose and Death. . . . .	9
Detoxification (Detox). . . . .	10
Diseases Common with Addiction. . . . .	11
Tuberculosis (TB) . . . . .	11
Hepatitis, Types C and B. . . . .	11
Sexually Transmitted Diseases and Infections (STDs and STIs) . . . . .	12
HIV/AIDS. . . . .	12
Common Sexually Transmitted Diseases/Infections. . . . .	13
Symptoms of STDs and STIs in Men. . . . .	13
Symptoms of STDs and STIs in Women. . . . .	13
Treatment for STDs and STIs. . . . .	13
Prevention. . . . .	14
Legal Suggestions. . . . .	14
Misuse and Diversion of Medication-Assisted Treatment. . . . .	14
Medication-Assisted Treatment and Driving. . . . .	15
<b>New Beginnings Medication-Assisted Treatment</b>	
Getting Started in New Beginnings. . . . .	16
Medication-Assisted Treatment and Medical Care. . . . .	16
Dosing Schedule. . . . .	18
Call Back Policy. . . . .	18
Drug Testing. . . . .	18
Lock Boxes. . . . .	18
Empty Bottles and Medication Packets. . . . .	19
Take Home Doses. . . . .	19
Exception Take Home Privileges. . . . .	19
Termination from New Beginnings. . . . .	19
Patient Complaints. . . . .	19
Courtesy Dosing. . . . .	20
Safety. . . . .	20



## Welcome!

This New Beginnings Member Handbook provides information about the New Beginnings medication-assisted treatment program, offered by the Pascua Yaqui Tribe, Centered Spirit Behavioral Health Program.

Methadone and buprenorphine are medications designed to eliminate the cravings for and withdrawal effects of illegal drugs. At New Beginnings, we honor your individual needs. We help you make positive changes to improve your health and quality of life through a combination of medication and counseling.

To assist in your recovery, New Beginnings is a specialized clinical program that offers therapeutic services for individuals with opioid addiction. A substance abuse therapist will be assigned to assist you in addressing your individual needs. Ongoing meetings—whether individual counseling with your substance abuse therapist, group sessions, or both—are a requirement of the New Beginnings program.

## Centered Spirit Program Mission Statement

It is the mission of the Pascua Yaqui Centered Spirit Program (CSP) to provide professional, confidential and culturally compatible behavioral health services to promote healing, personal growth, and healthy living for Pascua Yaqui Tribal members and their families in the communities we serve.

## Centered Spirit Philosophy

CSP provides services in an atmosphere of dignity, harmony, and respect for the Yoeme and other Native Americans we serve. We join our clients on their healing journey with a holistic, multi-disciplinary, and person-centered approach. We honor other tribal cultures and Yoeme cultural uniqueness. We encourage active participation in counseling and open expression of thoughts and feelings. We support our clients in reaching their goals: encouraging healthy lifestyle changes to improve wellness. We honor our clients' spirituality, history, and wisdom.

## Centered Spirit Values

- We value the culture and traditions of the Pascua Yaqui Tribe.
- We value our clients and their extended families.
- We value the strength of the circle that includes our various divisions, outside agencies, clients, and their extended families. As the circle becomes stronger, the people are better served.
- We value the integration of Traditional, Alternative, and Western medicine to provide better outcomes for our clients.
- We value education and professional/personal growth opportunities for our employees.



### Clinic Hours

Monday through Friday, 5:30am – 11:00am.  
Saturday, 7:00am – 9:00am.

We are closed on all Federal and Tribal Holidays. We will make arrangements for your dosing in advance of those days when we are closed.

### New Beginnings Staff and Phone Numbers

Staff Position	Daytime Phone Number
Centered Spirit Program, Medical Director	(520) 879 - 6060
Centered Spirit Program, Behavioral Health Director	(520) 879 - 6060
New Beginnings Program Manager	(520) 879 - 6112
Dispensing Nurses	(520) 879 - 6003
Substance Abuse Therapist #1	(520) 879 - 6344
Substance Abuse Therapist #2	(520) 879 - 5859
Substance Abuse Therapist #3	(520) 879 - 6089
Case Manager #1	(520) 879 - 6038
Case Manager #2	(520) 879 - 6353
Peer Support Specialist #1	(520) 879 - 6393
Peer Support Specialist #2	(520) 879 - 5940
Administrative Assistant	(520) 879 – 6003
Counselor of the Day	(520) 879 - 6060

### In Case of Emergency.

In case of an emergency during business hours (8:00 am – 5:00 pm, Monday through Friday), a crisis counselor can be reached at Centered Spirit. In case of an emergency on weekends or after regular business hours (5:00 pm – 8:00 am), a crisis counselor can be reached 24 hours/7days a week at the crisis line **520-591-7206**.

## Medication-Assisted Treatment Overview

### Addiction, Defined.

The Merriam-Webster Dictionary defines addiction as:

1. The quality or state of being **addicted** <addiction to reading>
2. Compulsive need for and use of a habit-forming substance (as heroin, nicotine, or alcohol) characterized by tolerance and by well-defined physiological symptoms upon withdrawal; *broadly* : persistent compulsive use of a substance known by the user to be harmful



Addiction is considered a neurological disease. Addiction causes those affected with it to repeat behavior despite adverse consequences. Drug abuse, excessive exercise, food, computer, sex, and gambling addictions are just a few examples of addictions. Addiction creates the physiological conditions of tolerance and withdrawal, discussed further below. Common symptoms of addiction include:

- Inability to stop using substances or self-medicating behavior, even if negative consequences are known;
- Preoccupation with the substance or behaviors;
- Problems with the criminal justice system due to the addiction; and
- Denial of the preoccupation with the substance or behaviors.

### **The Advantages of Medication-Assisted Treatment.**

Many people believe that it is preferable for heroin users to stop taking drugs altogether. Although this is achievable for some heroin users, for others there is a high risk of relapse of heroin use. Medication-assisted treatment has helped many people reduce the recurrence of compulsive heroin use.

Medication-assisted treatment, like any other drug treatment, is not a 'cure' for heroin dependence. However, research has shown that it can improve the health of people dependent on heroin in several ways:

- People are less likely to use heroin if they're aware the heroin may be contaminated with other substances;
- The medications are taken orally, which is cleaner and safer than injecting heroin. This reduces the risks of sharing needles and becoming infected with blood-borne viruses such as hepatitis B, hepatitis C (which may lead to long-term liver problems) and HIV, the virus causing AIDS;
- The routine involved in medication-assisted treatment encourages people to lead a balanced and stable lifestyle, including improved diet and sleep;
- People are less stressed, as they do not have to worry about where their next 'hit' of heroin is coming from;
- The medication lasts longer in the body than heroin, so it is taken only once a day;
- The medication allows people to handle the withdrawal process with less discomfort;
- Criminal activities conducted to obtain illegal drugs are reduced; and
- Medication-assisted treatment helps people cut their connections with the drug scene.

Medication-assisted treatment is free to Pascua Yaqui tribal members, their families and other community members. Under certain conditions, take-home doses of medication are available which help patients return to a more stable lifestyle. To be eligible, patients must meet the definition and behaviors of addiction.



### **Why Methadone or Buprenorphine are Not Worse Than Heroin.**

The withdrawal symptoms from methadone or buprenorphine usually last longer than heroin, but the symptoms are not worse. All withdrawal requires medical supervision. Dozens of studies have shown that people who were dependent on heroin and are prescribed methadone or buprenorphine are able to:

- Stop using heroin;
- Inject heroin less often and with less risk;
- Reduce the amount of crime they are involved in in order to support their habits; and
- Have more stable family and personal relationships.

For many people, becoming opiate free is a long-term goal. Medication-assisted treatment helping avoid and lessen the risks of illicit drug use can be safely prescribed for years.

### **What Does Medication-Assisted Treatment Do?**

The main differences people notice between prescribed methadone and buprenorphine and heroin are:

- The lack of any sense of a 'hit;' and
- The prescribed medications are long acting. Most people can be dosed once a day without experiencing serious withdrawal symptoms.

Since methadone and buprenorphine are both opiates, the effects are broad, like those of heroin or other opioids. Both legal and illegal drugs influence many areas of the mind and body. Everyone's reaction to medications will be different. When someone says "medication-assisted treatment makes you sick/tired/itchy,' etc.," what they mean is that medication-assisted treatment has had that effect on them. It may or may not have a similar effect on you.

Methadone and buprenorphine do not damage the body as they are digested. The liver easily breaks down those medications into forms which can pass harmlessly through your kidneys into your urine. For most people this is a harmless process but the strain on the liver can cause overdose or liver failure in people who have impaired liver function, by illnesses such as Hepatitis B or C, or by the excessive use of alcohol. The dangers are greatest:

- At the start of a methadone or buprenorphine prescription;
- When the physician increases the dose; or
- If the condition of the liver deteriorates further.

### **Side Effects.**

Some people on medication-assisted treatment programs will experience unwanted symptoms during their treatment. These may be caused because the dosage they are receiving is too low or too high, which can occur especially at the beginning of treatment. Some symptoms may also occur due to the side effects of the drug itself.



Symptoms of **too low** a medication-assisted treatment dose include:

- Runny nose, sneezing
- Abdominal cramps
- Feeling physically weak
- Loss of appetite
- Tremors
- Muscle spasm and jerking
- Goose bumps
- Tears
- Difficulty sleeping
- Nausea/vomiting
- Yawning
- Diarrhea
- Back and joint aches
- High temperature but feeling cold
- Sweating
- Irritability/aggression/feelings of uneasiness
- Cravings for the drug

A person who suddenly stops medication-assisted treatment or use of any opioid may experience many of the symptoms listed above. The symptoms may be like having an acute case of the flu. The withdrawal symptoms usually begin one to three days after the last dose, and peak around the sixth day, but can last one to three years in a more subtle form.

Symptoms of **too high** a medication-assisted treatment dose include:

- Drowsiness/nodding off
- Nausea/vomiting
- Shallow breathing
- Pinpoint pupils
- Below normal drop in body temperature
- Slow blood pulse, lowered blood pressure
- Heart palpitations
- Dizziness
- Problems with sexual functioning
- Poor blood circulation

Methadone, even if taken for years, causes no direct physical damage to its users and is much healthier than being dependent on illicit opiates. However, being constipated for long periods can cause problems in later life.

Medication-assisted treatment does not attack your teeth, but medication-assisted treatment can restrict the production of saliva, which is one of the body's natural defenses against plaque. Apart from finding a good dentist (we can help with that) and regular dental care, it is helpful to:

- Cut sugary foods out of your diet;
- Brush your teeth right after you take your dose of medication-assisted treatment every time;
- At least rinse your mouth with water after you've taken methadone or buprenorphine; and
- Chew sugar free gum.





Medication-assisted treatment is no worse for your teeth than eating sweets or taking sugar in tea and coffee. Research has shown that the teeth of opiate users on medication-assisted treatment are no worse than those of illicit opiate users.

### **Tolerance.**

Tolerance is the way the body adapts in order to cope with the regular presence of some drugs. Once a tolerance has developed, it takes bigger and more frequent doses to achieve the same effect. Your tolerance to other opiates is transferred to the medication-assisted treatment when you start medication-assisted treatment. If you stop using methadone, your opiate tolerance will quickly drop back to original levels. That makes it easy to overdose after a break in using opiates or methadone.

One of reasons why medication-assisted treatment is prescribed is that tolerance to medication-assisted treatment usually builds up very slowly. The body builds up tolerance to most of the effects individually and at different rates. So, your tolerance to one effect such as feeling sedated may have built up while you were taking heroin to the extent that you don't feel sedated at all when you start methadone. Side effects, such as a dry mouth may occur while on methadone. Please report any and/all side effects to the New Beginnings doctor.

### **Withdrawals.**

Because your body has developed a tolerance to methadone, it may react or withdraw when the level of medication-assisted treatment in your system drops below a certain level.

Every part of you that is affected by the medication-assisted treatment becomes geared up to function with the drug inside you. If you stop taking methadone, your body takes time to adjust to not having it there. During that time, you may suffer withdrawal symptoms such as:

- A high temperature but feeling cold, with goose bumps alternating with sweating;
- Feeling restless;
- Feeling anxious and aggressive;
- Having disturbed sleep;
- Having diarrhea, feeling or being sick;
- Having runny eyes and nose;
- Pains in muscles, bones and joints; and
- Yawning and sneezing.

Too much medication-assisted treatment can cause sweating, feeling sick and sleeping poorly too. Either too little or too much medication-assisted treatment can feel like withdrawal from opioids.

Because methadone and buprenorphine are longer-acting drugs, some people find the withdrawals more uncomfortable and longer lasting than with heroin. Once the



medication-assisted treatment is out of your system, the mechanism of readjustment is the same whether you've stopped medication-assisted treatment or any other opiate.

Withdrawal symptoms can be due to over-secretion of noradrenalin (the production of which is suppressed by opiates). Withdrawal symptoms can also be due to your daily doses of medication-assisted treatment having reduced the secretion of the body's natural opiates called endorphins. Due to the over-and under-secretion of noradrenalin and endorphins, people can still feel anxious, cold and/or have difficulty sleeping for months after stopping methadone.

### **Other Side Effects Including Constipation, Sweating, and Itching.**

If you dose with medication-assisted treatment over a long period of time, adding lots of fruit and vegetables and alcohol-free drinks in your diet should help with the chronic constipation that opiates cause. If you experience constipation, excessive sweating and itching, discuss those signs with the New Beginnings physicians. Simply using laxatives to relieve constipation can make things worse in the long run. The doctor can also make recommendations to reduce the sweating and itching.

### **Use of Alcohol.**

Medication-assisted treatment and alcohol boost each other's effect. If you overdo either or both, you are much more likely to overdose. They both can leave you unconscious and make you throw up. You do not have to end up choking to death on your vomit while passed out.

If you find that your daily dose of medication-assisted treatment does not keep the withdrawal symptoms away, talk to your doctor about it rather than drinking more alcohol. The effects of alcohol are not altogether different from methadone. Sometimes when people feel like they need more drugs, they use alcohol. If alcohol could be a problem, please talk to your doctor.

### **Overdose and Death.**

Medication-assisted treatment deaths are rare. Methadone-related deaths have almost always been due to combining medication-assisted treatment with other drugs, particularly alcohol or benzodiazepines such as Valium and Rohypnol. Research has shown that medication-assisted treatment is effective in reducing deaths among heroin-dependent people. Deaths involving those in medication-assisted treatment have occurred mainly due to the following reasons:

- Accidental overdose. Research indicates that the abuse of alcohol and benzodiazepines is common among medication-assisted treatment patients. Any combination of sedative drugs such as heroin and methadone, alcohol, and benzodiazepines result in an increased risk of respiratory depression, coma and death.
- Suicide. Emotional disorders are common among medication-assisted treatment patients; and
- Accidents, including those involving a motor vehicle.



As little as 10 mg of methadone can kill small children. A few mouthfuls of methadone can kill an adolescent. Tranquilizers and/or alcohol with medication-assisted treatment kill more people each year than heroin overdoses. Most of the people who die from medication-assisted treatment overdoses bought it illegally.

Less than 50mg of medication-assisted treatment can kill a non-tolerant adult (and that could include you), especially if your dosage of medication-assisted treatment is decreased over time. As you reduce the amount of medication-assisted treatment you take, your tolerance will reduce too. So if you do use alcohol or other illegal drugs on top of a low dose, or go back to heroin after a break, you could easily overdose on the amount you used to take.

If you suspect someone has overdosed on medication-assisted treatment and is unconscious, lay them on their side so that if they vomit, they will not choke on it. Call 9-1-1 immediately. If you have a Narcan syringe, apply the Narcan gel to the person's nostrils. The person should regain consciousness quickly. If the person doesn't respond, give them a second dose of the Narcan.

### **Detoxification (Detox).**

Detoxification is your body getting weaned off illegal drugs or alcohol, getting clean and sober. Most people find it takes about four days to get over the worst of the withdrawal symptoms when they first drop to lower doses of the drugs or alcohol, but it can take up to 14 days for the symptoms to ease up. After any opiate detoxification, poor sleep and feeling depressed can last for months. The causes of insomnia or depression may not all be chemical. Talking to your doctor can help determine if the problems are due to detoxification or something else.

If you use heroin while in detoxification, your chances of staying drug free afterwards are not good. If you want to get off heroin, stop using when you enter detox. If quitting using when entering detox is not the right time, it will be hard to find a better one.

Each time your dose is reduced in a long or a quick detox, there are several things you can do to help make the adjustment easier.

- If you can, plan to take it easy for a few days after each drop;
- Keep things as stress-free as you can; and
- Look after yourself. Stay warm, eat well and drink plenty of alcohol-free fluids.

Do not keep an emergency supply of illegal drugs. If you do, the temptation will always be right there. If you have the drugs on hand, you will only find emergencies and excuses to use.

Detoxification is not just about withdrawal from heroin. You may wonder what life will be like without heroin. There will be changes. Medication-assisted treatment tends to flatten out emotional highs and lows so you will probably find that your feelings are less intense than you are used to. It can feel strange not having strong emotional responses to situations.



## Diseases Common with Addiction.

**Tuberculosis (TB).** TB is a contagious infection that usually attacks your lungs and is caused by bacteria that spread through the air, just like a cold or the flu. TB can spread from person to person, but it is not easy to catch. You usually have to spend a lot of time around someone who has active TB. You are most likely to catch it from co-workers, friends, and family members. Most cases are cured with antibiotic medications taken for at least 6 to 9 months.

There are two types of TB. Latent TB means you have the germs in your body but have no symptoms. Active TB usually has signs that include:

- A cough that lasts more than 3 weeks
- Chest pain
- Coughing up blood
- Feeling tired all the time
- Night sweats
- Chills
- Fever
- Loss of appetite
- Weight loss

If you have any of these symptoms, see your doctor to get tested. Get medical help right away if you have chest pain.

## Hepatitis, Types C and B.

**Hepatitis C.** Hepatitis means inflammation of the liver. The liver is a vital organ that processes nutrients, filters the blood, and fights infections. When the liver is inflamed or damaged, its function can be affected. Heavy alcohol use, toxins, some medications, and certain medical conditions can cause hepatitis. However, hepatitis is often caused by a virus. In the United States, the most common types of viral hepatitis are hepatitis A, hepatitis B, and hepatitis C.

According to the Centers for Disease Control and Prevention (CDC), up to 80% of those with acute hepatitis C won't experience symptoms. In some cases, people will experience symptoms not long after being infected. These symptoms can be mild or severe and include:

- Fever;
- Feeling tired; and/or
- Poor appetite.

If you develop hepatitis C symptoms soon after being infected, you might also have these symptoms:

- Nausea or vomiting;



- Stomach pain;
- Joint or muscle pain;
- Abnormalities in urine or bowel movements; and/or
- Yellowing of eyes or skin.

Early symptoms usually occur around six or seven weeks after exposure to the hepatitis C virus. Some people may develop hepatitis C symptoms within two weeks of infection. Others might experience a longer delay before noticing symptoms. It could take from six months to 10 years or more before someone with the virus becomes aware of any symptoms. This is because it can take years for the virus to lead to liver damage.

**Hepatitis B.** Hepatitis B is highly contagious. It spreads through contact with infected blood and certain other bodily fluids. Possible methods of transmission include:

- Direct contact with infected blood;
- Transfer from mother to baby during birth;
- Being pricked with a contaminated needle;
- Intimate contact with a person with HBV;
- Oral, vaginal, and anal sex; and
- Using a razor or any other personal item with remnants of infected fluid.

### **Sexually Transmitted Diseases and Infections (STDs and STIs).**

**HIV/AIDS.** HIV stands for human immunodeficiency virus. It harms your immune system by destroying the white blood cells that fight infection. This puts you at risk for serious infections and certain cancers. AIDS stands for acquired immunodeficiency syndrome. It is the final stage of infection with HIV. Not everyone with HIV develops AIDS.

HIV most often spreads through unprotected sex with a person who has HIV. It may also spread by sharing drug needles or through contact with the blood of a person who has HIV. Women can give it to their babies during pregnancy or childbirth.

The first signs of HIV infection may be swollen glands and flu-like symptoms. These may come and go within two to four weeks. Severe symptoms may not appear until months or years later. The early acute stage of HIV happens because the body is reacting to HIV, and the immune system tries to fight it off. The symptoms at this stage can include:

- Fever
- Headache
- Upset stomach
- Sore throat
- Swollen glands
- Rash



- Aches and pains in muscles and joints

A blood test can tell if you have HIV infection. Your health care provider can do the test, or you can use a home testing kit. Or to find free testing sites, call the national referral hotline at 1-800-CDC-INFO (1-800-232-4636 in English and en español; 1-888-232-6348 - TTY).

There is no cure, but there are many medicines that fight HIV infection and lower the risk of infecting others. People who get early treatment can live with the disease for a long time.

Strategies to reduce the risk of HIV infection include not having sex, limiting your number of sexual partners, never sharing needles, and using condoms the right way every time you have sex. People who are at high risk may take HIV prevention medicines

**Common Sexually Transmitted Diseases/Infections.** The term sexually transmitted disease or infection (STD or STI) is used to refer to a condition passed from one person to another through sexual contact. You can contract an STD/STI by having unprotected vaginal, anal, or oral sex with someone who has the STD/STI. That doesn't mean sex is the only way STD/STIs are transmitted. Depending on the specific STD/STI, infections may also be transmitted through sharing needles and breastfeeding. STDs and STIs include gonorrhea, syphilis, chlamydia, genital warts, and human papilloma virus (HPV).

**Symptoms of STDs and STIs in Men.** Specific symptoms can vary, depending on the STD. It's possible to contract an STD without developing symptoms. But some STDs cause obvious symptoms. In men, common symptoms include:

- Pain or discomfort during sex or urination;
- Sores, bumps, or rashes on or around the penis, testicles, anus, buttocks, thighs, or mouth;
- Unusual discharge or bleeding from the penis; and/or
- Painful or swollen testicles.

**Symptoms of STDs and STIs in Women.** In many cases, STDs don't cause noticeable symptoms. When they do, common STD symptoms in women include:

- Pain or discomfort during sex or urination;
- Sores, bumps, or rashes on or around the vagina, anus, buttocks, thighs, or mouth;
- Unusual discharge or bleeding from the vagina; and/or
- Itchiness in or around the vagina.

**Treatment for STDs and STIs.** STDs and STIs caused by bacteria are generally easier to treat. Viral infections can be managed but not always cured. If you are



pregnant and have an STI, getting treatment right away can prevent or reduce the risk of your baby becoming infected. Treatment for STIs usually consists of one of the following, depending on the infection:

**Antibiotics.** Antibiotics, often in a single dose, can cure many sexually transmitted bacterial and parasitic infections, including gonorrhea, syphilis, chlamydia and trichomoniasis. Typically, you'll be treated for gonorrhea and chlamydia at the same time because the two infections often appear together.

In addition, it's important to abstain from sex until seven days after you've completed antibiotic treatment and any sores have healed. Experts also suggest women be retested in about three months because there's high chance of reinfection.

**Antiviral drugs.** If you have herpes or HIV, you'll be prescribed an antiviral drug. You'll have fewer herpes recurrences if you take daily suppressive therapy with a prescription antiviral drug. However, it's still possible to give your partner herpes.

Antiviral drugs can keep HIV infection in check for many years. But you will still carry the virus and can still transmit it, though the risk is lower. The sooner you start treatment, the more effective it is. If you take your medications exactly as directed, it's possible to reduce your virus count so low that it can hardly be detected.

### **Prevention.**

Hepatitis, HIV, and STDs/ STIs live in body fluids: mainly blood, semen and vaginal fluid. They are passed on when the infected body fluids of one person pass into the blood of another person. This happens most easily during unsafe sex: the walls of the vagina and the skin on the penis are very thin and easily damaged. When people have sex without a condom the virus can pass easily into their bloodstream.

Condoms not only help to prevent pregnancy but can also protect you and your partner against HIV, hepatitis and other sexually transmitted diseases. It is not only people who share needles who get HIV and hepatitis. Those diseases are also spread through unprotected sex. Be sure you have condoms with you if there is any chance you may need them. Safer sex is sex with reduced risk of your partner's semen, vaginal fluid or blood getting into your bloodstream. Condoms and lubricants are always available, free for the taking, at New Beginnings' front desk.

### **Legal Suggestions.**

**Misuse and Diversion of Medication-Assisted Treatments.** Injecting methadone, taking more than one dose at a time, or giving your New Beginnings' prescribed medication to somebody else is illegal. Selling, sharing or giving away your methadone or buprenorphine is known as diversion. Diversion activity can easily jeopardize your participation in New Beginnings treatment. Methadone and buprenorphine are only legal when they are dispensed by a medication-assisted treatment center and taken as prescribed.



**If you are charged with any drug-related offense, seek legal advice.**

**Medication-Assisted Treatment and Driving.** It is illegal and dangerous for anyone to drive while being under the influence of a drug; they are incapable of having proper control of a vehicle. This can include medication-assisted treatment and, if suspected, the driver can be subjected to a drug test. Talk to a member of the clinical team if you believe that your dose is too high or in any other way is incapacitating. Driving under the influence of any drug or alcohol carries penalties including suspension from driving, heavy fines and/or imprisonment. Mixing your prescribed medication with other substances further increases the risk of accident. For instance, even a small amount of alcohol taken with methadone or buprenorphine can impair an individual's driving skills, creating a risk of a serious accident.

**If you suspect that any medication you are taking may affect your driving (or any other activity), avoid driving and talk to your doctor. It is important that you don't stop taking your medication.**







## **New Beginnings Medication-Assisted Treatment**

### **Getting Started in New Beginnings.**

All patients are initially enrolled in the Centered Spirit Program by completing screening and comprehensive assessments. In addition, all patients are screened for AHCCCS eligibility. If you are eligible for AHCCCS, applying for it is required.

The initial treatment plan that you will develop with your substance abuse therapist is tailored to meet your unique needs. Patients are required to attend a minimum of one therapeutic counseling activity per month. Depending upon your individual needs, you may be offered up to daily counseling, as appropriate.

We offer a wide range of New Beginnings program options, including:

- Auricular acupuncture;
- Group, individual, and family counseling;
- Twelve step meetings;
- Sweat lodge and talking circles;
- Parenting classes;
- Art therapy;
- Peer support one-to-one interactions;
- Psychiatric care;
- Referrals to detoxification programs; and
- Referrals to inpatient residential treatment.

Your substance abuse therapist will keep tabs on your participation in therapy. If you have not seen your substance abuse therapist in the last month, your substance abuse therapist will ask the nurses to hold your dose until you meet with him/her. All patients have the right to refuse counseling services. However, those patients are subject to discharge for non-compliance and will be referred to another agency.

All New Beginnings patients are required to give urine samples at least monthly for drug testing. Patients are randomly selected to give urine samples each day. In rare situations, hair sample or cheek swab testing may be performed.

All patients will be given a breathalyzer test before dosing. Likewise, the dispensing nurses will not dispense your dose unless you have completed a breathalyzer test for blood alcohol levels (BAC). A maximum of two (2) breathalyzer tests can be done in one day. A BAC over 0.08 will cause the dose to be held unless the second breathalyzer test reads under that number.

All patients will also have an EKG at intake and annually thereafter. The EKG will be reviewed with your primary care provider (PCP).

### **Medication-Assisted Treatment and Medical Care.**

All new patients at New Beginnings meet with a New Beginnings doctor for an assessment and examination. At that appointment, the doctor will discuss which



medication option may work better for you – methadone or buprenorphine. The doctor will write a prescription of the type and dosage of medication. Over time, the doctor may increase or decrease your dosage, based upon your body’s reaction to it. It usually takes some time to adjust the levels of medication to just the right dose for you.

The ideal opioid treatment dose for you is one that:

- Stops you suffering from bad withdrawal symptoms;
- Does not make you sleepy; and
- Is enough to get you adjusted to taking the prescribed medication instead of other drugs.

There are differences between the oral medications for opioid treatment and heroin. Using methadone or buprenorphine as clinically prescribed should prohibit a sense of getting a rush or a hit. The prescribed medications have calming effects, allowing patients to feel “normal.” The calming effects come on more slowly and are less intense than heroin. Some people find the change takes some getting used to, others do not find it a problem at all.

Our medical team will carefully monitor your medication-assisted treatment and your physical reactions. As the doctor adjusts your dosages, you may feel minor symptoms of withdrawal. Even starting out with a low dosage of your medication can make you feel tired or with slowed reactions. Please discuss any uncomfortable symptoms with the doctor, the dosing nurse or your substance abuse therapist.

If you find it difficult to stop using drugs even after you begin treatment at New Beginnings, more counseling may be required and is readily available to you. Continued illicit drug use is discouraged and your focus should be abstinence. If you are struggling with using street drugs, speak to your substance abuse therapist about harm reduction safety methods.

Although methadone or buprenorphine may not feel like powerful drugs, they are. Using heroin, alcohol or other street drugs like cocaine, methamphetamines or opiates like Percocet or Oxycontin, etc., in addition to the prescribed medication can all result in overdose and death.

Methadone and buprenorphine are slowly metabolized by your body. Like many drugs, including all opiates like heroin, it takes several (five or six) doses to achieve a steady level of the medicine in your blood system. Since these prescribed medications do not provide a high like heroin, you may often feel like you need a higher dose. Dosing is directly related to physical withdrawal symptoms. If you continue to experience physical withdrawal symptoms, then your dose will be assessed for increase by a New Beginnings doctor.

Medication-assisted treatment is much more effective at helping people to stop using heroin when taken every day. If you take the prescribed medication every day, there are only relatively small changes in the blood levels of methadone or buprenorphine. Using



heroin some days and dosing with the prescribed medications other days results in your body not maintaining consistent and appropriate blood levels of the prescribed medication. You will likely continue to experience withdrawal symptoms.

### Dosing Schedule.

Most patients start with daily dosing privileges (take home doses are given for Sundays and holidays). However, patients transferring from other medication-assisted treatment programs will be evaluated by the clinical team who will decide the patient's dosing frequency. Each person's individual dosing schedule and privilege is determined based upon:

- Absence of illicit drug use and abuse of alcohol as demonstrated by negative drug tests and breathalyzer results;
- Engagement in individual and group counseling sessions;
- Absence of behavioral problems;
- Improving and stable home environment;
- Assurance of safe take-home medication storage;
- Length of time in medication-assisted treatment; and
- Recommendation of the New Beginnings clinical team.

### Call Back Policy.

Patients must comply with the call back policy. Patients will be called or otherwise directly contacted and given 24 hours to return to the clinic with all their take home medications, both empty and full containers. Any discrepancy will result in an immediate reduction in take home privileges. If the patient fails to respond within 24 hours after being notified, the patient's privileges will be decreased to daily dosing.

### Drug Testing.

On a randomly selected day, each patient is required to provide a monthly drug test. If a patient is given the "drop notice" slip when checking in, he/she must complete a urine drug test before dosing that morning. Refusal to complete the drug test when required to do so will result in the patient not being dosed that day, nor any subsequent day until the patient does complete a urine drug test.

**Positive drug tests:** Counseling is an important part of our program, especially for patients who test positive for drug use or are struggling with alcohol-related problems. Patients who test positive will need to meet with their substance abuse therapist prior to receiving their medication-assisted treatment dose.

### Lock Boxes.

All patients are provided with an assigned lock box at admission to New Beginnings. It is the patient's responsibility to replace the box if it is lost or stolen. The patient must also notify the New Beginnings staff of the missing lock box. Lock boxes can be purchased at most discount stores. Patients may not use other patients' lock boxes. Failure to have the lock box with you when arriving for take-home doses means you will not be given the take-home doses.



### Empty Bottles and Medication Packets.

All emptied bottles and medication packets must be returned to the New Beginnings nursing staff. The nurses will dispose of empty bottles and packets appropriately.

### Take Home Doses.

All take home bottles and buprenorphine packets will be clearly marked with the patient's name, dosage, and the date the medication was dispensed. Bottles and medication packets are child resistant. All empty bottles and medication packets must be returned. Patients who do not return take home bottles or medication packets may lose take home privileges. **Take home bottles and medication packets can only be dispensed to the patient receiving the dose.**

If the patient is in residential treatment, a staff member of that residential treatment facility must accompany the patient to the clinic and enter the dosing room with the patient. The staff member will observe the patient taking the medication and receiving any take home doses. The staff member will receive the refilled medication box and carry it back to the residential treatment facility, where it is kept in a locked medication storage area.

### Exception Take Home Privileges.

Additional take homes may be approved by obtaining approval of the assigned substance abuse therapist, Program Manager, and nursing staff. Reasons for exception take homes may include, but not be limited to: Tribal holidays, death or other emergency in the patient's family, the patient's disability, or job- or transportation-related problems. In cases of emergencies such as acute physical disability or illness, personal or family crisis, take homes doses MAY be approved by the clinical team.

### Termination from New Beginnings.

A patient may be discharged from the program for serious offenses such as physical or verbal intimidation or assault of staff or other patients, theft, possession of illicit drugs, or the possession of weapons. Patients may also be discharged for non-compliance with their treatment plans. In all cases, the New Beginnings clinical team will review the case and make a final decision. Patients involuntarily discharged will be referred to other agencies to receive services. However, patients may also be re-evaluated by the New Beginnings clinical team for readmission to New Beginnings at any time.

### Patient Complaints.

Patients are encouraged to file a complaint if they have concerns regarding treatment and/or staff behavior. The procedure for the patient is to discuss the issue first with his or her substance abuse therapist. If the patient wishes to proceed with a formal complaint, he/she will be invited to complete a formal complaint form. The patient also has the option of meeting with the Quality Manager to discuss the complaint. The Quality Manager will then investigate the complaint and work with the clinical team to remedy the situation. Patients who still do not receive satisfaction are encouraged to meet with the Behavioral Health Director or other senior administration staff.



The complaint process, Code of Conduct and Ethics, and the Centered Spirit Program's confidentiality policy are outlined in the Centered Spirit Program Member Handbook you received on admission. You will be offered an updated version each year.

### **Courtesy Dosing.**

Courtesy dosing will be allowed for persons not enrolled in New Beginnings but who are enrolled in a medication-assisted treatment program outside of Tucson, Arizona. The New Beginnings program retains the right to refuse any guest dosing that they deem necessary. The New Beginnings clinic is not responsible for any financial burdens that may occur during the guest's visit to our facility. Our facility has a no charge policy for dosing. Short term counseling for visiting patients is available.

For the guest to receive dosing:

- Support staff must verify that the guest is not receiving dosing at another medication-assisted treatment center via a registry check and by calling all area medication-assisted treatment clinics;
- The guest must have the required documentation needed from the referring program;
- The guest's dosing must occur within 24 hours of notification;
- The guest must provide proof of drug screen within the last 3 months; and
- The guest dosing can be provided for up to two (2) weeks. If an extension is needed, the guest will be enrolled in the Centered Spirit Program.

### **Safety.**

We are very concerned for the safety of our patients, staff, and the community. Therefore, those patients displaying violent behavior toward staff or other patients or possessing illicit drugs or weapons are subject to an immediate administrative discharge. Those patients will be referred to another medication-assisted treatment program. Loitering inside or outside New Beginnings is not allowed. All patients are expected to leave the clinic area after receiving their medication. The Pascua Yaqui campus also does not allow smoking within 50 feet of any building.

