

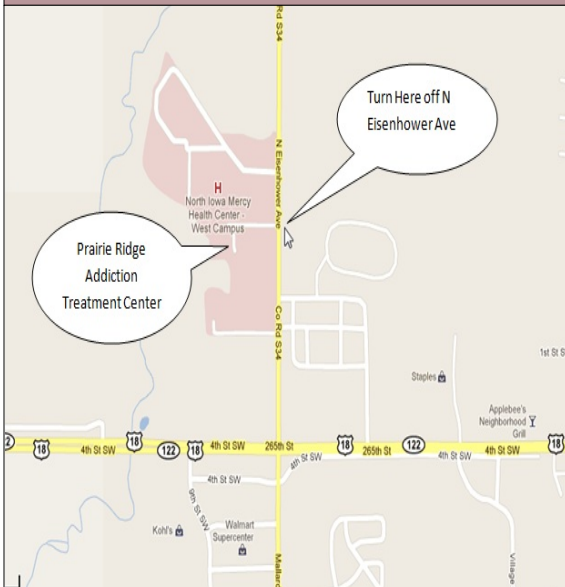
Directions

From I35: Take Mason City exit 194. Head east on Hwy 122. Turn north on Eisenhower Avenue.

From Avenue of Saints (Hwy 18/27): Take exit 183 onto Mallard Ave. N. This turns into Eisenhower Ave. Continue past Hwy 122 junction.

We are located in front of Mercy West Campus.

Outreach offices are located in Charles City and Algona, Iowa.



PAYMENT OPTIONS:

Prairie Ridge is a private, not-for-profit, community-based organization. Prairie Ridge accepts the following payment options:

- Payment for services from most major health insurance plans.
- Medicaid reimbursement.
- Self-pay.
- Sliding-scale fee available for Iowa residents only.

WALK-IN CLINIC HOURS:

Prairie Ridge offers a walk-in clinic format for assessment focused on providing fast and easy access to clients seeking services. No appointment are necessary and clients are seen on a “first-come, first-served” basis. Hours are as follows:

- Monday: 9:30 a.m. to 10:30 a.m.
- Tuesday: 12:30 p.m. to 1:30 p.m.
- Wednesday: 12:30 p.m. to 1:30 p.m.
- Thursday: 12:30 p.m. to 1:30 p.m.

Assessments are available in the outreach offices in Charles City and Algona by appointment only. In Charles City, call (641) 228-1477 and in Algona, call (515) 295-5158.



Phone: 641-424-2391
Toll Free: 1-866-429-2391
Fax: 641-424-0783

(641) 424-2391

*Prairie Ridge Addiction
Treatment Services*



www.prairieridge.net

Providing Comprehensive Treatment
Services to Communities of North
Iowa and Beyond

MISSION:

The Prairie Ridge mission is to promote recovery, health, and wellness for individuals and families receiving Prairie Ridge Behavioral Health Services.

VISION:

Prairie Ridge will be a preferred source of Behavioral Health Services, offering innovative and proven programs that best meet the needs of our clients and customers. We will be an asset to our community by partnering in a Recovery Oriented System of Care.

VALUES:

Dignity and respect; responsive to the needs of our customers and clients; open communication; trust and honesty in all our interactions, professional development and personal growth of our staff; continually improving all aspects of our organization.

Prairie Ridge offers services in their primary location in Mason City as well as in outreach offices in both Algona and Charles City.

***Prairie Ridge Addiction
Treatment Services***

PROGRAMMING:

Prairie Ridge utilizes evidence-based practices emphasizing flexible programming designed to meet the needs of the individual client. Skill-specific programming includes motivation-enhancement therapy, dialectical behavioral therapy, MATRIX (including relapse prevention skills and development of personal recovery program), and 12-step programming. Treatment is offered at several different levels of intensity, including both outpatient and inpatient services.

MEDICATION/HEALTH NEEDS:

Prairie Ridge is committed to working with clients who have co-occurring concerns related to both physical and emotional health concerns. We recognize that our clients benefit from coordinated care services with primary care physicians, understanding the connection between the substance use disorder and its impact on physical and emotional health. It is our goal to work in cooperation with each client's primary health-care provider to better treat the whole person.

For clients entering residential treatment, we ask that they present with a 30-day supply of medications at admission. The following classes of medication will, in most cases, be discontinued if admitted to residential services:

- Benzodiazepines
- Opiates

ADMISSION CRITERIA FOR RESIDENTIAL SERVICES:

Clients must meet ASAM (American Society of Addiction Medicine) criteria for level III.5 Clinically Managed High-Intensity Residential Treatment. Clients must have minimal problems with intoxication or withdrawal, few biomedical complications, and relatively stable mental health status. Appropriate referrals will likely have significant deficits in relapse or continued problem potential or in their recovery environment.

Given that we do not have 24-hour medical coverage, clients must be ambulatory and fully able to address their own medical needs and manage their daily care, including showering, dressing, changing dressings, etc.

Although we attempt to meet the Dual Diagnosis Enhanced standard of care as defined by ASAM, we have found the following psychiatric issues are not manageable and/or do not result in positive outcomes in our residential treatment unit:

- Any Axis I condition where the person is unstable to the point of being a danger to self or others, or where the person is not solidly oriented X3.
- Evidence of active psychosis not controlled by medication.
- Cognitive functioning significantly low enough to seriously impair abstract thinking.