



Patient Handbook

MISSION

The Prairie Ridge mission is to prevent and reduce behavioral health symptoms and associated stigma.

VISION

Prairie Ridge will be the preferred provider of integrated behavioral healthcare through holistic, patient-centered, feedback-informed prevention, and treatment services.

WE VALUE

Treating all individuals with dignity & respect.
Integrity, clarity, and precision in all our interactions.
Continual improvement of all aspects of our organization.
Accountability, positivity, and responsiveness to feedback.
Resiliency of the individual.
Building and improving strong alliances.

www.prairieridge.net

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Our Philosophy of Care

At Prairie Ridge our care is based on the ideas of hope and recovery, working to ensure we provide the highest quality behavioral health services at the most appropriate level of care and in the most cost effective manner. The foundation of our services is a person-centered culture of dignity, respect and personal accountability. We welcome people into services at any point and at all points in their personal change/recovery efforts. Through our individualized and person-centered care, we provide services to address: problem exploration and harm reduction, recovery initiation and stabilization, long-term recovery maintenance, and quality of life improvements for individuals and families affected by mental health, substance abuse and/or gambling concerns.

Patient Rights:

1. All persons receiving services from Prairie Ridge shall retain all rights, benefits and privileges guaranteed by Federal, State, and local law, except those specifically lost through the due process of law.
2. Patients have the right to live in the community of their choice without restraints on their independence, except those restraints to which all citizens are subject.
3. Patients have the right to be treated with courtesy and dignity, and are at all times entitled to respect for their individuality, and the recognition that their strengths, abilities, needs, and preferences are not determinable on the basis of a psychiatric diagnosis.
4. Patients have the right to be notified of all rights accorded them as recipients of services at time of admission or intake, and in terms that he or she understands.
5. Patients have the right to be treated in the least restrictive setting to meet their needs. Prairie Ridge does not utilize seclusion or restraint as part of its clinical practices.
6. Patients have the right to receive services conducted in a manner reflecting quality professional and ethical standards of practice, and shall be apprised of the organization's code of ethics/conduct.
7. Patients have the right to receive services without discrimination based on race, color, sex, sexual orientation, age, religion, national origin, domestic/marital status, political affiliation or opinion, veteran status, physical/mental handicap or ability to pay for services.
8. Patients have the right to be treated in an environment free from physical abuse, sexual abuse, physical punishment, or psychological abuse by threatening, intimidating, harassing, or humiliating actions on the part of staff.
9. Patients have the right to be fully informed of the services to be provided, the right to consent to services, and the right to refuse services (with the exception of legally mandated services) without fear of retaliation or loss of rights.
10. Patients have the right to express choice regarding the composition of their treatment team. To the extent possible, Prairie Ridge will attempt to accommodate this choice.
11. Patients have the right to privacy during facility visits. Individuals and/or group visits are permitted only when the purpose of the visitation is education or professional in nature. Planning for outside visitors shall provide for limited interruption of patient routine, therapeutic or rehabilitative programs, and related activities. Patients will be given notice of such visitation.
12. Patients have the right to confidentiality. Information may not be released without the patient's written permission, except as the law permits or requires.
13. Patients have the right to review the patient's record at any reasonable time upon request and shall be afforded the assistance of an appropriate clinical employee in cases where a reasonable concern exists of possible harm to the patient through the misinterpretation of information in the record.
14. Patients, along with family or significant other(s), when appropriate, have the right to participate in their treatment and treatment planning. Patients have a right to a full and complete explanation of the nature of treatment and any known or potential risks involved therein.
15. Patients have the right to an individualized, written treatment plan to be developed promptly following admission, treatment based on the plan, periodic review and reassessment of needs, and appropriate revisions of the plan including a description of services that may be needed following discharge from services.

16. Patients have the right to request and receive outside (other than Prairie Ridge employees) professional consultation regarding their treatment at their own expense.
17. Legally competent patients have the right to refuse treatment, except in emergency situations or other circumstances required by law. Patients shall not be denied treatment, services, or referral as a form of reprisal, excepting that no individual provider shall be obligated to administer treatment or use methods contrary to his or her clinical judgment.
18. Patients shall have access to written information about fees for services and their rights regarding fees for services, and will not be refused services due to an inability to pay.
19. Patients have the right to an explanation if services are refused to them for any reason including admission ineligibility or continued care ineligibility, and have the right to appeal such decisions.
20. Patients have the right to informal complaint and/or formal grievance regarding practices or decisions that impact their treatment or status without fear or concern for reprisal by the organization or its staff, and have the right to have this process clearly communicated to them upon entry to services and throughout participation in services.
21. Patients have the right to refuse to participate in research without loss of services, and participate in research on a voluntary basis only with full written informed consent.
22. Patients have the right to access guardians, self-help groups, advocacy services, and legal services. Access will be facilitated through the person responsible for the patient's service coordination.
23. Patients have the right to be treated in the least restrictive environment, be provided evidence-based information about alternative treatments, have access to their records, and have equal access to treatment regardless of race ethnicity, gender, age, sexual orientation and sources of payment.
24. Patients have the right to be informed of appeal procedures, initiate appeals, have access to grievance procedures, receive a grievance appeal decision in writing, and appeal a grievance decision to an unbiased source.
25. Patients have the right to be protected from the behavioral disruptions of other persons served.
26. Patients have the right to a written request outlining all disclosures of protected health information made within the past two years.
27. These rights will be reviewed annually with a patient for each year the person remains an active patient. This review will occur within the context of the larger Patient Informed Consent and Orientation review process.

Confidentiality of Patient Records

Information regarding health care, including payment for health care, is primarily protected by two federal laws: the Health Insurance Portability and Accountability Act of 1996 "HIPAA" and the Federal Drug and Alcohol Confidentiality Law, along with other applicable federal and state rules. Under these laws, Prairie Ridge may not say to a person outside Prairie Ridge that you attend the program, nor may Prairie Ridge disclose any information identifying you as a person with a mental health disorder, substance use disorder and/or gambling problem, or disclose any other protected information except as permitted by federal and state law.

Prairie Ridge must obtain your written consent before it can disclose information about you for payment purposes. For example, Prairie Ridge must obtain your written consent before it can disclose information to your health insurer in order to be paid for services. Generally, you must also sign a written consent before Prairie Ridge can share information for treatment purposes or for health care operations. However, federal law permits Prairie Ridge to disclose information without your written permission in the following situations:

1. Pursuant to an agreement with a qualified service organization/business associate;
2. For research, audit or evaluations;
3. To report a crime committed on Prairie Ridge premises or against Prairie Ridge personnel;
4. To medical personnel in a medical emergency;
5. To appropriate authorities to report suspected child abuse or neglect;
6. As allowed by a court order.

Patients receiving gambling services are covered under applicable state and federal confidentiality laws.

Expectations and Responsibilities of our Patients

1. Patients have the responsibility to supply the counseling staff with pertinent information that is needed in the course of successful treatment.
2. Patients are responsible for being the primary motivator of change in the treatment process.
3. If the patient feels that his/her rights are being violated or that the program is not responding to his/her problems and needs, it is the patient's responsibility to inform the program for appropriate grievance procedures to be utilized.
4. Patients have the responsibility to follow all of Prairie Ridge's safety rules and posted signs.
5. Patients are responsible for keeping appointments and communicating with staff to ensure continuity of care.
6. Patients are responsible for the performance of assigned duties and tasks as part of his/her treatment process.
7. Patients are responsible for agreed upon payment of provided services.
8. Patients are responsible for behaving in a way that is respectful of other patients and Prairie Ridge staff. Any behavior that infringes upon the rights, safety and/or physical or emotional integrity of another patient or of Prairie Ridge staff may result in termination from services.
Persons may be deemed inappropriate or ineligible for services at Prairie Ridge for the following reasons:
 - a. If a person is determined to be a risk to the safety and/or welfare of another patient and/or staff member for any of the following reasons: a) risk of physical injury, b) risk of emotional injury, c) risk to jeopardize recovery, d) risk to jeopardize service integrity.
 - b. If the person has a contagious disease and Public Health guidelines recommend quarantine.
 - c. Persons where the Clinical opinion is that recommending substance abuse and/or gambling treatment is likely to sustain the overall problems and not result in benefit or potentially make things worse.
9. If a patient has experienced a loss of privileges at Prairie Ridge, he or she may request a meeting with the Executive Director, Clinical Director or designee, to discuss having his or her privileges reinstated.
10. During the process of treatment, patients will be exposed to information about other patient's lives and experiences. While not technically covered under Federal Confidentiality Laws, it is Prairie Ridge's policy that no patient information be shared outside of our programs or facility. Any breach by one patient of another's confidential information may result in termination from services. In more simple terms, "**what you see here, what you say here, let it stay here.**"
11. It is unlawful for Prairie Ridge to enroll any patient who is an informant for law enforcement entities.

General Nature and Goals of Services

The goal of Prairie Ridge's behavioral health care services is to reduce the impact of behavioral health concerns and symptoms upon the affected individuals, families and communities of North Iowa.

Placement Screening

The screening process will include a preliminary clinical impression of a diagnosis and any recommendation for services, a screening for emergency needs and/or referrals, and referral of the individual to the most appropriate program for admission.

Assessment

Patients will participate in a comprehensive psychosocial assessment after admission to any service program. The purpose of the assessment is to collect information in addition to that which was collected during the screening. This information will aid in gaining a better understanding of the patient historically and currently, with greater detail than the screening. This information will be used in developing the initial individual plan.

Treatment

At the time of admission, patients are assigned a primary counselor who is responsible for their overall treatment, including developing an individual plan, regular review of progress, and transition or discharge planning and coordination. Depending on the specific course of treatment, the primary counselor assigned

may change over time.

Prairie Ridge provides the following types of treatment services: Individual, Group, Couples/Family, Prescribing Services, Primary Healthcare Services, Drug Testing and Medication Evaluation/Management for residential patients. You may participate in any or all of these services based on the strengths and needs identified in the psychosocial assessment. Prairie Ridge provides these types of services at the following levels of intensity.

- Adult Patients

Residential (Substance Use Disorders only): The residential program is a level of care where patients reside in the residential facility. The preferred length of time a patient is in the residential program is 28 days. The focus of the residential program is on skill acquisition in the areas of establishing abstinence, relapse prevention, mindfulness, emotion regulation, distress tolerance and interpersonal effectiveness. High-intensity level residential care consists of a minimum of 50 therapeutic hours per week. Prairie Ridge also offers a low-intensity residential program that consists of a minimum of 35 therapeutic hours per week. This option has been helpful for patients who are taking classes at the local community college or patients needing residential treatment who are trying to maintain at least part-time employment.

Day Treatment: Prairie Ridge offers a day-treatment level of service which operates Monday through Friday and requires patients participate in a minimum of 20 hours per week of therapeutic services. Participants also have the option of attending on the weekends or in the evenings, if they find that they are in need of additional support during these times. The typical format for day treatment patients involves participation in therapeutic activities with residential patients and occurs between the hours of 9 a.m. and 5 p.m. Monday through Friday. Services will include a combination of individual and group services and the patient will work with an individual counselor to select appropriate groups from the menu of options. The preferred length of time a patient is in day treatment level of service is four weeks.

Intensive Extended Outpatient: Patients have an option of participating in the Intensive Extended Outpatient level of service. The program is held 4-5 days per week in order for greater support and contact.

Outpatient: Patients who are involved in outpatient level services at Prairie Ridge have a variety of clinical services from which to choose to address their behavioral healthcare concerns. A catalogue of groups is used to help patients understand these options and to work with their primary counselor to set up their individual plan. The length of time a patient participates in Outpatient level of services varies depending on his/her needs and desired outcome(s).

- Gambling Patients

Outpatient: Prairie Ridge offers an outpatient level of service to assist and support persons with problem gambling concerns. These services can be any combination of traditional on-site individual and group services. The length of time a patient participates in Outpatient level Gambling services varies depending on his/her needs and desired outcome(s).

- Adolescents

Outpatient: Prairie Ridge offers an outpatient level of service for adolescent patients in our outreach offices only. Patients in the Mason City office are referred to services at Francis Lauer Youth Services. These services can be any combination of individual and group services. The length of time adolescents participate in Outpatient level of services varies depending on their needs and their own and their parent/guardian's desired outcome(s).

Individual Plan for Services

All persons served will have an Individual Plan which serves as a guide to be sure the counselor and patient are in agreement on the individual's desired outcome from their involvement in services at Prairie Ridge, building on current strengths and patient preferences and specifying the services in which the person will participate to reach their goal(s).

The individual plan will be developed as soon after the patient's admission as is possible and at a minimum within 7 days of admission for Residential and Day Treatment, within 14 days for Intensive Outpatient and within 30 days of admission for Outpatient and Gambling services. The patient and his/her primary counselor will regularly review the Individual Plan and make updates to it as necessary. Review of the plan will occur

at a minimum every 7 days in Residential and Day Treatment, every 14 days in Intensive Outpatient and every 30 days in Outpatient, including Gambling services. A copy of the individual plan will be provided to a patient, if requested.

Continued Service Review

In addition to and in conjunction with the regular review of a patient's Individual Plan, a patient and counselor will review whether the current level of care (Residential, Day Treatment, Intensive Outpatient or Outpatient) continues to be the most effective and appropriate level of service to meet the patient's desired outcome. As with the Individual Plan, this review will occur at a minimum every 7 days in Residential and Day Treatment, every 14 days in Intensive Outpatient and every 30 days in Outpatient, including Gambling services.

Transition & Discharge Planning

Transition planning is intended to help patients move to less intensive levels of care within Prairie Ridge, at a different facility, or out of the program to community resources. Transition plans will be developed with the person served and will be integrated within individual plans during the course of involvement. A written discharge plan will be developed when a patient is leaving services with Prairie Ridge, and a copy will be provided to the patient.

Incentives

Prairie Ridge believes that positive reinforcement of behaviors is an effective support to motivation for change. As a result, patients are provided incentives for regular attendance at treatment services. Incentives may not be used for all services or with all patients. Incentive use and changes to how they are used is monitored and decided through the continuous quality improvement program.

Behavioral Health Emergency

Prairie Ridge is committed to protecting the health and safety of the persons we serve. In the case of suicidal or homicidal risk, we work with the patient to set up a safety plan to ensure the health and welfare of the patient and/or other person(s) considered at risk. If after discussion with a patient we continue to believe there is significant potential for serious injury or death, or if the situation does not allow for discussion, we will notify the appropriate medical and/or law enforcement entities to intervene in the situation.

Continuous Quality Improvement (CQI) and Patient Input

Prairie Ridge is committed to actively seeking input from persons served and their families, and committed to providing services in a manner that utilizes this information to ensure that the needs and preferences of all stakeholders are consistently met, and to improve services provided. The following is Prairie Ridge's plan to obtain input from persons served:

Focus Groups:

Focus groups will occur with patients in all programs and levels of care on a schedule determined by the Management Team.

Outcome Rating Scale (ORS) and Session Rating Scale (SRS)

Prairie Ridge believes that patient feedback is important to ensuring services are meaningful and are assisting patients to meet the outcomes they desire from their involvement with Prairie Ridge. Both of these tools are designed to be used weekly. The ORS is a patient progress measurement tool to allow patients to rate how well they see themselves doing on four life areas: Individually, Interpersonally, Socially and Overall. The SRS allows patients the opportunity to give immediate feedback about their satisfaction with the Therapeutic Relationship, Current Goals and Topics being addressed, Approach or Method being used and Overall satisfaction.

Suggestion Boxes

Suggestion boxes are located throughout the building in locations accessible to patients. Patients can make

anonymous suggestions for improvements to services at Prairie Ridge. Suggestions are reviewed by the agency's CQI team at meetings held every other week.

Professional Standards of Conduct for Prairie Ridge Staff

At the time of hire, all Prairie Ridge staff agrees to follow the Prairie Ridge Code of Conduct. A copy of the Code of Conduct can be reviewed upon request. Additionally, Licensed and/or Certified counselors have a Code of Ethics which guides their professional behavior.

Financial Information

Methods of Payment:

Prairie Ridge accepts payment for services from most major health plans under substance abuse benefits:

- Prairie Ridge Accounts Receivable Staff will assist you in investigating and authorizing such payments as provided by your insurance carrier.
- Prairie Ridge accepts Medicaid and Medicare reimbursement.
- Should the health plan refuse authorization for payment of services, the patient will either be placed in a level of care authorized for payment, or be responsible for payment of services at the time they are provided.

Prairie Ridge accepts reimbursement in the following forms:

- Cash
- Check
- Money-Order
- Credit Card

Sliding Fee Scale

Many individuals may qualify for the agency's sliding-fee scale which is supported through the Substance Abuse Mental Health Services Administration (SAMHSA) block grant and annual appropriations from the Iowa Legislature and Iowa Gambling Treatment Program. To qualify for such assistance, individuals must meet certain income guidelines and agree to pay fees based on a sliding-fee scale. All individuals must provide verification of income, to include one of the following: most recent tax return, most recent pay stub, or a print out of reported income from Workforce Development. The sliding-fee scale assigned to the individual represents the balance of the full cost of treatment not reimbursed by federal and state appropriations. The continued availability of federal and state funding for an individual's care is dependent upon the regular payment of assigned fees. In addition, individuals seeking services for a primary mental health diagnosis are eligible for a sliding-fee scale through application to county social services funding.

Individuals without third-party insurance and not qualifying for sliding-fee scale assignment will be required to pay the full cost of treatment through fee-for-service arrangements. If there are questions or concerns regarding applicable fees, contact a member of the Accounts Receivable Staff.

No one will be denied access to services due to inability to pay.

Screening for Substances/Drug Testing

Drug screening services are provided to Prairie Ridge patients by Millennium Health. Prairie Ridge does not provide their own drug screening or UAs. Patients are responsible for payment of drug testing. Millennium accepts most third party payers, including Medicaid, and offers assistance for patients with the inability to pay. Information regarding how to access bill forgiveness can be obtained through Millennium. All questions regarding costs and billing for drug screens can be directed to:

Millennium Health
Patient Billing Services

Health & Safety Policies

Tobacco Products

To reduce addiction, assist in other patients trying to quit, and reduce the chances of disease and death caused by use of tobacco products, Prairie Ridge provides a tobacco-free environment, tobacco education programs, and treatment of tobacco use disorders. In line with our mission to provide comprehensive treatment for all chemical dependencies, treatment services address tobacco use and integrate tobacco use treatment as a routine part of our services. Following are our policies regarding tobacco products:

1. The Tobacco Free Campus policy defines that Patients, Guests, and Staff are to refrain use of all tobacco products including but not limited to cigarettes, cigars, pipes, water pipes (hookah), bidis, kreteks, smokeless tobacco, chewing tobacco, snus, snuff, electronic cigarettes, and vape devices. The policy also prohibits the use of any non-FDA approved nicotine delivery devices while on Prairie Ridge property. Anything plant based that is being inhaled or exhaled is not allowed on Prairie Ridge property.
2. By receiving and signing acknowledgment of this brochure, you are in agreement of the goals and rationale of this policy. Violation of this policy may result in discharge from services.
3. All patients will be screened for tobacco use at admission as part of the psychosocial assessment. This will include age of onset, duration of use, amount and frequency of use, methods of use and previous attempts to stop using.
4. Regardless of the patient's immediate interest in addressing his/her tobacco use, medication treatment information will be provided at each level of care within the first month of treatment.

Substances of Abuse

Substances of abuse are not allowed on Prairie Ridge grounds. A violation of this policy may result in discharge from services.

Prescription Medications

Prairie Ridge supports the use of prescription medication to address health and behavioral health concerns. Our preference is that prescription medication is brought onto Prairie Ridge grounds in situations where the patient will be residing in a Prairie Ridge facility or the prescribed schedule of use of the medication requires the person to take the medication when he or she is on-site to participate in services. Patients living in a residential setting at Prairie Ridge will be required to turn their medications over to Prairie Ridge staff who will lock up the medication in the unit's medication storage area. Patients will be provided access to their medication at times and schedules which allow for them to take the medication as prescribed. Patients in any of the non-residential levels of care who must bring medication on-site in order to take the medication as prescribed, are expected to keep their medication with them at all times, take the medication inconspicuously and not engage in casual discussion of their medication use with other patients.

Weapons

To ensure the safety of persons served, staff members, and visitors weapons of any form are prohibited within any of the organization's facilities by anyone other than law enforcement acting in an official capacity.

TB/HIV-AIDS

Because the use of alcohol and other drugs is a high-risk factor associated with HIV/AIDS, we are required by the Iowa Substance Abuse Licensure regulations to provide you with information concerning reducing exposure to HIV /AIDS and information on testing options available.

Video Surveillance

To ensure the security of our facility, patient possessions, and medications, Prairie Ridge utilizes video surveillance in specific areas of our buildings. Video from these cameras is kept for 120 hours and then

recorded over. Notification of where video surveillance is being used will be posted to ensure patients are aware of these locations.

Emergency Plans

Emergency response to the following situations will result in evacuation of the building where the situation is occurring. Emergency response drills are performed on a regular, scheduled basis to ensure the health and safety of patients and staff.

1. Fires: If it is immediately determined that the extent of the fire cannot be contained with quick and direct actions, the building will be evacuated.
2. Violence and/or Aggression: If a crisis situation occurs that involves a direct threat to any persons in the building, the building will be evacuated.
3. Utility Disruption or Crisis: Situations that necessitate evacuation in this area include gas leaks and electrical malfunctions determined to present a health risk.
4. Noxious Odors or Fumes: If determined that there are odors or fumes that are a health risk due to eye, skin, or lung irritation, the building will be evacuated.
5. Bomb Threat: In the event of a credible bomb threat made toward the organization, the building will be evacuated.

In the event of severe weather or natural disaster the following steps will be taken to ensure patient safety.

1. If a severe weather or tornado watch is issued, the site will access radio and/ or television reporting that provides information from the National Weather Service and/or National Oceanic Atmospheric Administration.
2. During "watch" periods, all patients and employees will be encouraged to limit trips and transportation to and from the site.
3. If a severe weather or tornado warning is issued, all persons in the facility will immediately move to the basement of the facility near a wall.
4. Employees will assist patients in arriving at the designated safety locations conduct a head count to ensure all patients are accounted for.
5. Staff will secure a first aid kit, flashlights, and a radio, and maintain them in the area being used for shelter.
6. Once the warning has been lifted, staff will inspect the premises to ensure the safety of occupancy. When safe to occupy the facility, all persons may return. In the case of damages, all persons should be to stay in the basement until safe evacuation can be arranged by staff or emergency personnel.
7. Accompanying this handbook is a map of the Prairie Ridge main facility denoting location of fire extinguishers and first aid kits, emergency/fire exits and outside gathering places, as well as severe weather gathering locations within the building.

Maps of the building will be located in all Waiting/Reception and Clinical areas, including group rooms and counselor offices on which the emergency exits and location of fire extinguishers and emergency shelter areas are identified.

Patient Grievance Process

Patients have a right to address complaints about service provision without fear of reprisal for doing so. Prairie Ridge's process for addressing a complaint is as follows:

1. Patients are encouraged to address concerns/complaints with their counselors and attempt to work out the perceived problem in an informal manner.
2. If the informal attempt to address the complaint does not result in a satisfactory outcome for the patient, a formal complaint may be initiated.
3. To file a formal complaint, a complaint form can be obtained from your counselor or at the reception desk.
4. Complete the complaint form and submit it to the program supervisor.

5. Upon receipt of the complaint form, the program supervisor will begin an investigation of the complaint, which may include interviews with the person submitting the complaint, and other persons noted on the form and/or within Prairie Ridge that may offer relevant information in resolving the complaint.
6. Within 5 working days of receiving the complaint, the program supervisor will respond in writing to the person who submitted the complaint, noting the result of the investigation. The written response will be provided during a meeting between the program supervisor and the patient and the outcome of the investigation will be discussed.
7. Should the patient be dissatisfied with the result of the response to the complaint, an appeal can be made to the Executive Director of Prairie Ridge by indicating to the program supervisor that an appeal of the outcome is requested.
8. Within 5 working days, the Executive Director will respond in writing to the patient as to the outcome of the appeal review.
9. If no resolution is achieved through appeal to the Executive Director, the patient may contact the Iowa Department of Public Health, Division of Behavioral Health Program Licensure and Regulation to file a formal complaint or the Iowa Department of Human Services.
10. At any time in the process, from the initial informal attempt to resolve the complaint to the receipt of the written response from the Executive Director, the patient has the right to seek assistance from an advocate outside of the organization.

Facility Locations & Hours of Operation

Mason City Office 320 N. Eisenhower Ave., Mason City, IA 50401

Administrative and Support services occur during standard business hours from 8:00 am to 5:00 pm Monday through Friday. Intensive Outpatient and Outpatient Clinical services primarily occur between the hours of 8:00 am to 8:30 pm Monday through Thursday, and from 8:00 am to 5:00 pm Friday.

Prairie Ridge residential level services operate seven days a week, 24-hours per day.

Charles City Office 703 North Main, Suite #1, Charles City, IA 50616

Clinical and Support services occur primarily during standard business hours from 8:00 am to 5:00 pm Monday through Friday. Clinical services provided outside of standard business hours change in both day and time to best meet patient needs.

Algona Office 117 East Call St., Algona, IA 50511

Clinical and Support services occur primarily during standard business hours from 8:00 am to 5:00 pm Monday through Friday. Clinical services provided outside of standard business hours change in both day and time to best meet patient needs.

Forest City Office 138 North Clark St., Forest City, IA 50436

Clinical and Support services occur primarily during standard business hours from 8:00 am to 5:00 pm on: Monday afternoon, Tuesday all day, Thursday afternoon and Friday afternoon. Clinical services provided outside of these hours may change in both day and time to best meet patient needs.

Hampton Office 123 1st Ave. S.W., Hampton, IA 50441

Clinical and Support services occur primarily during standard business hours from 8:00 am to 5:00 pm Monday through Friday. Clinical services provided outside of standard business hours change in both day and time to best meet patient needs.

Emergency access to behavioral health services are provided through Mercy Medical Center - North Iowa's Access Center. To contact call: 641-428-6070.



Mariannette Miller-Meeks, B.S.N., M.Ed., M.D.
Director

Terry E. Branstad
Governor

Kim Reynolds
Lt. Governor

SUBSTANCE ABUSE TREATMENT OUTCOMES MONITORING

Dear Patient:

The Iowa Consortium for Substance Abuse Research and Evaluation (Consortium) is an independent research office that houses the Health Research Network (HRN). The Consortium is under contract with the Iowa Department of Public Health (IDPH) to monitor the effectiveness of substance abuse treatment in the state. The role of the HRN is to contact patients who have been in substance abuse treatment to ask how well the treatment worked for them. The focus is on evaluating the services you received while in treatment, not on evaluating you as a patient.

This letter is provided by your treatment agency to let you know that you may be one of the patients contacted by HRN. HRN personnel are required by law to keep all identifying information confidential. Identifying information is never used in reports.

Each month, patient names are randomly selected from those who have been recently admitted for treatment at the publicly-funded agencies in the state. These patients are contacted by HRN staff and invited to participate in a six-month follow-up interview. You may or may not be one of the people randomly selected. If your name is selected, you will be contacted while you are in treatment or at some point during the six months after you have left treatment. You will be asked if you want to participate in a telephone interview. At that point, HRN staff will give you the details of the process and answer any questions you may have. You then can decide if you want to participate. If you say yes, they will schedule an interview time that is convenient for you. You will receive a \$20 gift certificate once the interview is completed. If you say no, you will not have to do anything and will not be penalized in any way.

If your name is selected, it is very important for HRN staff to contact you and invite you to participate. If you agree to participate, they will want to interview you no matter how you are doing, and whether or not you have returned to using substances. HRN wishes you the best in your treatment experience and looks forward to the possibility of talking with you at follow-up.

If you have any questions, you may call Suzy Hedden or Stephan Arndt, PhD, at the Health Research Network at 319-335-4128 or toll-free 1-877-366-0413.

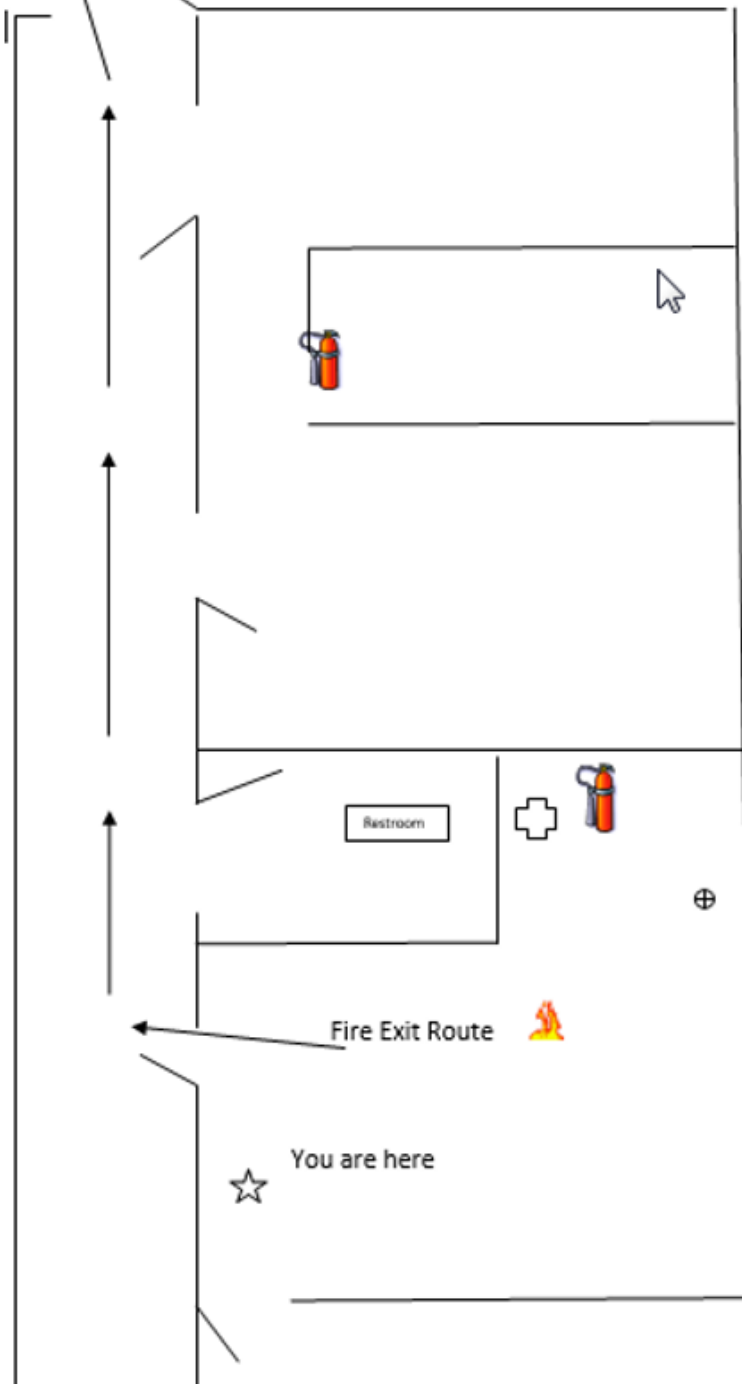
Sincerely,

A handwritten signature in black ink that reads 'Kathy Stone'. The signature is written in a cursive, flowing style.

Kathy Stone, Director
Division of Behavioral Health

Main Entrance to Building

Forest City Prairie Ridge Office Fire/Bomb Threat Exit Map



Fire Extinguisher

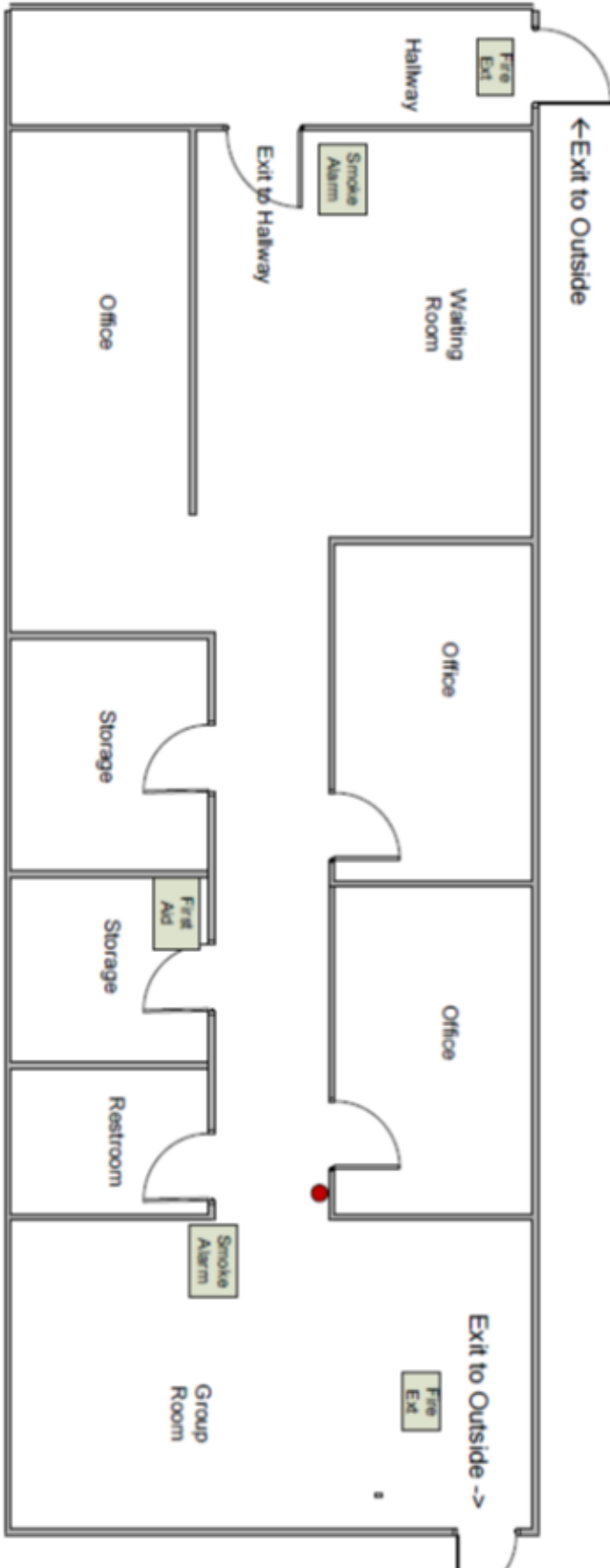


First Aid Kit



Carbon Dioxide Detector

Charles City Facility



● = Fire Extinguisher



The Phoenix Group Evacuation Plan

Red - Fire Escape Route

Green - Tornado Safety Route

↑
Exit

← Exit

Hallway

↑
Exit

↑
Exit

Waiting Room

Office 1

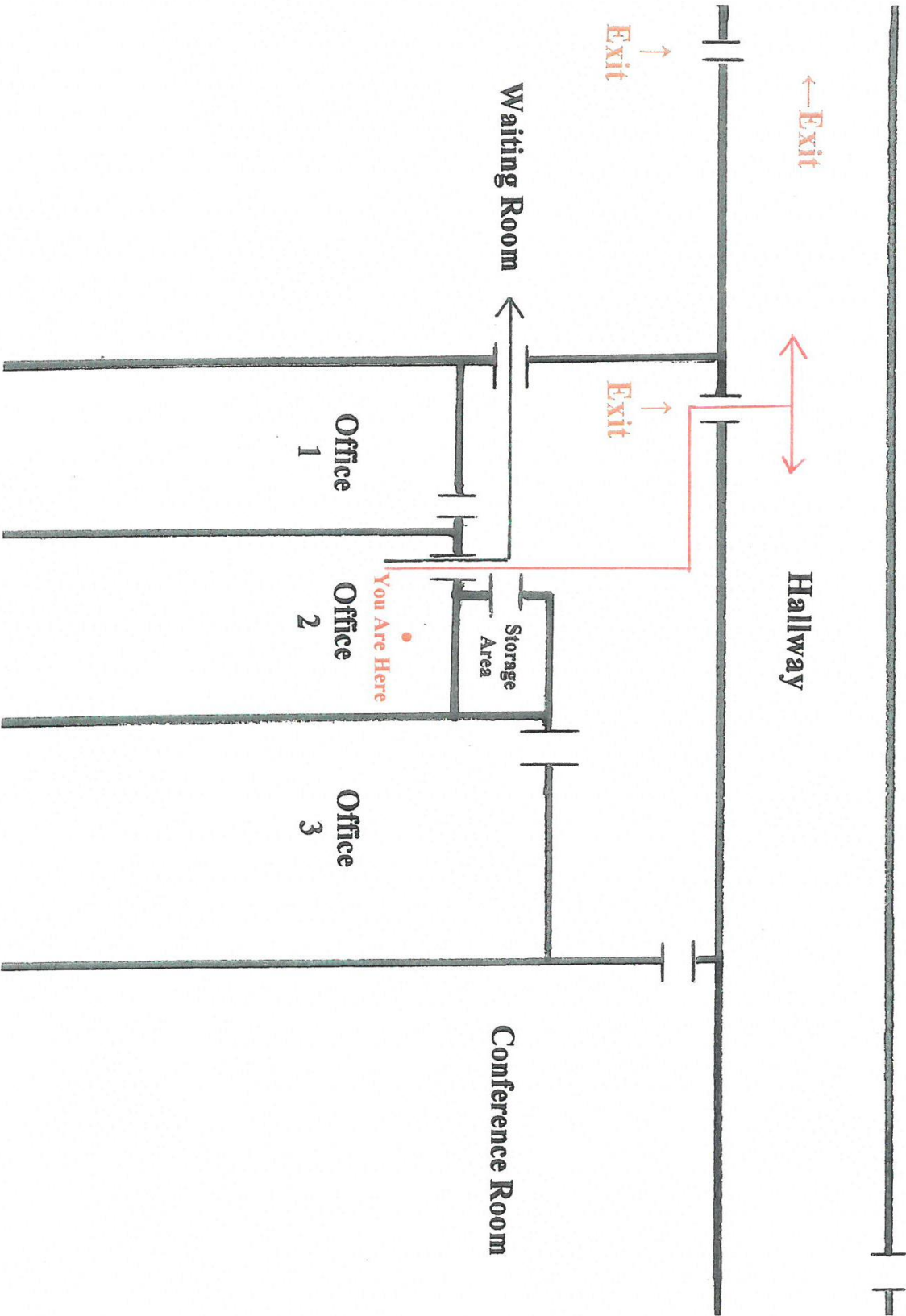
Office 2

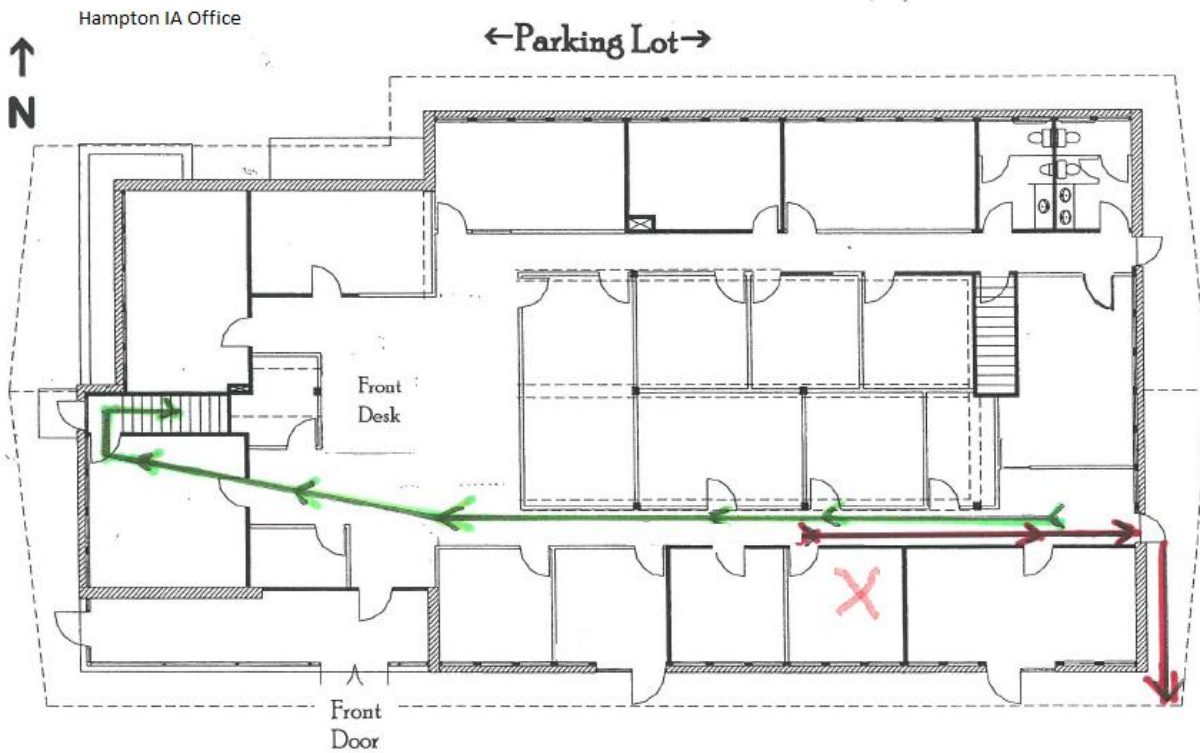
Office 3

Storage Area

Conference Room

You Are Here



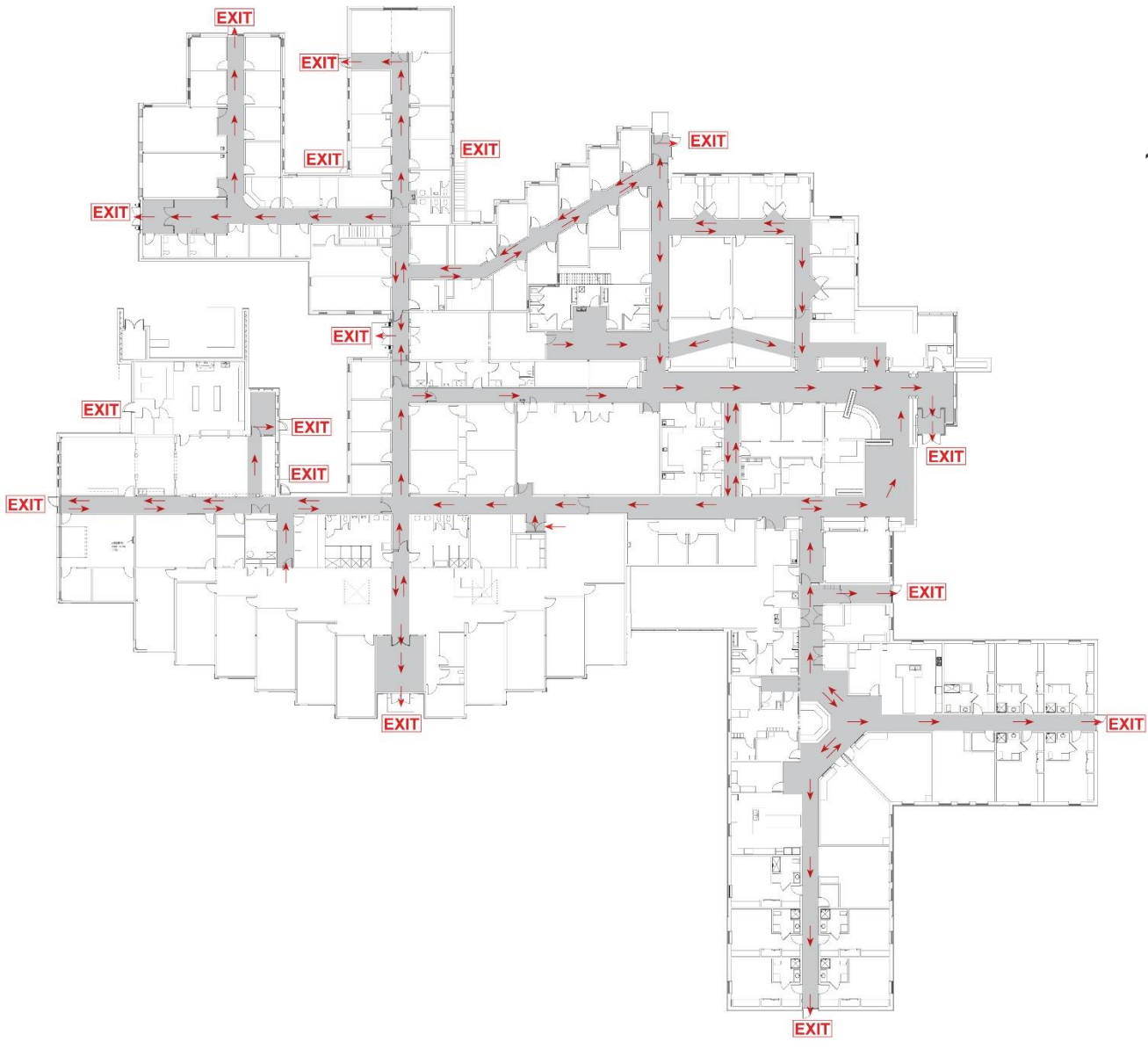


Severe Weather - Follow Green Line

**FIRE Evacuation - Follow Red Line
ACROSS FIRST AVE**



Hampton Office



Mason City Office