

INTERAGENCY REFERRAL FORM

Public Health Nursing



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TO: LYNNAN SVENSSON, RN, PHN Date

Referred by Agency Phone

CLIENT INFORMATION:

Patient's Name Patient's DOB Age Sex: MALE FEMALE

Phone Cell Home Alternate Phone Cell Home

Patient's Medi-Cal # Patient's Physician

Mailing Address

Physical Address

Parent/Guardian Name Parent/Guardian DOB

Other Family Members/ Birthdates

SUBJECT / REASON FOR REFERRAL:

THIS SECTION TO BE COMPLETED BY PUBLIC HEALTH STAFF ONLY

Referral Disposition Nurse assigned INSIGHT #:

DATE OF CONTACT / INTERVENTION:

Nurse Date

<u>AGE ELIGIBILITY</u>	<u>PHN REFERRAL CRITERIA</u>
Pregnancy	<p>Medium-High Risk Pregnancies:</p> <ul style="list-style-type: none"> • Mother under age of 18 with limited support and/or infant care knowledge. • Current substance abuse during pregnancy, substance abuse during pregnancy but has since stopped use, and/or substance abuse during previous pregnancies or within the last year. • History of maternal mental illness/developmental delays without treatment or services. • Delivery with no or inadequate prenatal care. • History of abuse and/or neglect of other children. • Violence in home. • Physical symptoms/conditions that may complicate pregnancy: toxemia, preterm labor, severe nausea/vomiting, multiple gestation, gestational diabetes, severe anemia, inadequate or excessive weight gain, untreated or uncontrolled chronic illness.
Birth through 24 Months	<p>Medium-High Risk Infants:</p> <ul style="list-style-type: none"> • Preterm infant born at or before 34 weeks or after 34 weeks if unstable. • Drug or alcohol-exposed infant. • Newborn/infant who has physical or medical problems that may impact vital life functions or physical and/or intellectual development. • Very low birth-weight (≤ 1500 gm or 3.3 lbs) or poor weight gain.
Pregnancy and birth through 18 years	<p>At-Risk Families:</p> <p style="text-align: center;"><u>**No more than 3 risk factors listed below may be present**</u></p> <ul style="list-style-type: none"> • Infant or child under 6 years with possible developmental delays and not receiving early intervention services. • Parent/caregiver has unrealistic expectations or perceptions of infant/child's behavior or development. • Parent/caregiver is unresponsive to infant/child's needs. • Parent/caregiver needs specialized education regarding infant/child care, nutrition, and/or safety issues. • Family has one or more barriers to accessing basic needs, including: community resources, insurance, health care providers. • Family has challenges in following through with appointments and/or health provider recommendations. • One or more household members engage in at-risk behaviors including: substance use, gang involvement, violent behaviors, and/or unprotected sex. • Potential for or past history of domestic or intimate partner violence. • Family has minimal coping or problem-solving skills. • Family does not have an identifiable support network.