

## **Referrals for Caregiver/Adult or Child?**

- o Caregiver/Adult
- $\circ$  Child

#### Which caregiver or child was involved?

Date of Activity (Referral): \_\_\_\_/\_\_\_/

# Is this a confidential Family Planning Visit? (Select one)

- o Yes
- o No

#### Program: (Select one)

- Becoming A Mom
- Family Planning
- Healthy Families
- Maternal Child Health (MCH/M&I)
- Pregnancy Maintenance (PMI)
- Teen Pregnancy (TPTCM)

#### **Crisis / Emergency Services**

#### **Child Protection Referral?**

o Yes

## **Child Protection Referral completed?**

- o No
- Yes-Client Accepted Services
- Yes-Client Declined Services
- Yes-Child Protective Services Case Not Opened
- Yes-Client Lost to Follow-up

#### **Domestic Violence Referral?**

o Yes

#### **Domestic Violence Referral completed?**

- o No
- Yes-Client Accepted Services
- Yes-Client Declined Services
- Yes-Client Lost to Follow-up

#### Rape/Sexual Assault Referral?

o Yes

## Rape/Sexual Assault Referral completed?

- o No
- Yes-Client Accepted Services
- Yes-Client Declined Services
- Yes-Client Lost to Follow-up

# Suicide Prevention Referral?

o Yes

# KDHE Program Referral Form

# Suicide Prevention Referral completed?

- o No
- Yes-Client Accepted Services
- Yes-Client Declined Services
- Yes-Client Lost to Follow-up

# **Education Services**

Early Childhood Services Referral (Headstart, PAT)?

GED/High School Completion Referral?

# Parenting Education/Support Referral?

Pregnancy Education/Support Referral?

## Health Services

Alcohol/Substance Abuse Referral?

o Yes

# Alcohol/Substance Abuse referral completed?

- **No**
- o Yes-Client Accepted Services
- Yes-Client Declined Services
- Yes-Client Lost to Follow-up

#### **Breastfeeding Referral?**

o Yes

#### **Breastfeeding Referral completed?**

- o No
- Yes-Client Accepted Services
- Yes-Client Declined Services
- Yes-Client Lost to Follow-up

#### Cancer Treatment/Diagnosis Referral?

o Yes

#### Cancer treatment/diagnosis referral completed?

- **No**
- Yes-Client Accepted Services
- Yes-Client Declined Services
- Yes-Client Lost to Follow-up

#### Dental services Referral?

o Yes

# **Dental referral completed?**

- o No
- Yes-Client Accepted Services
- Yes-Client Declined Services
- Yes-Client Lost to Follow-up



# Developmental Assessment/Screening Referral?

o Yes

# Developmental assessment/screening referral

- o No
  - Yes-Client Accepted Services
  - Yes-Client Declined Services
  - Yes-Client Lost to Follow-up

# **Diabetes Management Referral?**

o Yes

# **Diabetes management referral completed?**

- **No**
- Yes-Client Accepted Services
- Yes-Client Declined Services
- Yes-Client Lost to Follow-up

# Early Childhood Intervention Referral (Part C, Tiny-K)?

o Yes

# Early childhood intervention referral completed?

- o No
- Yes-Client Accepted Services
- Yes-Client Declined Services
- o Yes-Client Lost to Follow-up

# Abnormal PAP Test Follow-up Referral?

o Yes

# Abnormal PAP test follow-up referral completed?

- $\circ \quad \text{No}$
- Yes-Client Accepted Services
- Yes-Client Declined Services
- Yes-Client Lost to Follow-up

# **Clinical Breast Exam Follow-up Referral?**

o Yes

# Clinical breast exam follow-up referral completed?

- No
- Yes-Client Accepted Services
- Yes-Client Declined Services
- Yes-Client Lost to Follow-up

# **Hearing Referral?**

o Yes

#### Hearing referral completed?

- **No**
- Yes-Client Accepted Services
- Yes-Client Declined Services
- Yes-Client Lost to Follow-up

# KDHE Program Referral Form

# **HIV Treatment Referral?**

 $\circ \quad \text{Yes} \quad$ 

# HIV treatment referral completed?

- o No
- Yes-Client Accepted Services
- Yes-Client Declined Services
- Yes-Client Lost to Follow-up

# Immunizations Referral?

o Yes

# Immunization referral completed?

- o No
- Yes-Client Accepted Services
- Yes-Client Declined Services
- Yes-Client Lost to Follow-up

# MCH/HSHV Referral (Referral made by program other than MCH)?

o Yes

# MCH/HSHV referral completed?

- o No
- Yes-Client Accepted Services
- Yes-Client Declined Services
- Yes-Client Lost to Follow-up

# **Mental Health Referral?**

o Yes

#### Mental Health referral completed?

- o No
- o Yes-Client Accepted Services
- Yes-Client Declined Services
- Yes-Client Lost to Follow-up

# **Out of County MCH/HSHV Referral?**

o Yes

# Out of County MCH/HSHV referral completed?

- o No
- Yes-Client Accepted Services
- Yes-Client Declined Services
- Yes-Client Lost to Follow-up

# Prenatal Care or Education Referral?

o Yes

# Prenatal Care or Education referral completed?

- o No
- Yes-Client Accepted Services
- Yes-Client Declined Services
- Yes-Client Lost to Follow-up



# Postpartum Care or Education Referral?

Yes 0

# Postpartum Care or Education referral

- completed?
  - No 0
  - **Yes-Client Accepted Services**  $\cap$
  - Yes-Client Declined Services 0
  - Yes-Client Lost to Follow-up  $\circ$

# **Reproductive Health/Family Planning Referral?**

0 Yes

## **Reproductive Health/Family Planning referral** completed?

- No 0
- **Yes-Client Accepted Services** 0
- **Yes-Client Declined Services**  $\circ$
- Yes-Client Lost to Follow-up

## **Smoking Cessation: Kansas Tobacco Quitline Referral**?

• Yes

#### **Smoking Cessation: Kansas Tobacco Quitline Referral completed?**

- o No
- **Yes-Client Accepted Services** 0
- Yes-Client Declined Services  $\circ$
- Yes-Client Lost to Follow-up

# Smoking Cessation: Baby & Me Tobacco Free **Referral?**

- (Select one)
  - Yes

#### Smoking Cessation: Baby & Me Tobacco Free referral completed?

- o No
- Yes-Client Accepted Services 0
- Yes-Client Declined Services  $\circ$
- Yes-Client Lost to Follow-up

# **Smoking Cessation: Smoking Cessation and** Reduction in Pregnancy Treatment (SCRIPT<sup>™</sup>) **Referral?**

o Yes

#### **Smoking Cessation: Smoking Cessation and** Reduction in Pregnancy Treatment (SCRIPT<sup>™</sup>) referral completed?

- No 0
- **Yes-Client Accepted Services** 0
- Yes-Client Declined Services
- Yes-Client Lost to Follow-up

# **KDHE Program Referral** Form

#### Smoking Cessation: Other Program Referral? Yes

0

#### **Smoking Cessation: Other Program referral** completed?

- o No
- **Yes-Client Accepted Services**  $\circ$
- **Yes-Client Declined Services** 0
- Yes-Client Lost to Follow-up 0

# KDHE Special Health Care Needs Program Referral?

o Yes

# **KDHE Special Health Care Needs Program** referral completed?

- **No**
- **Yes-Client Accepted Services** 0
- Yes-Client Declined Services 0
- Yes-Client Lost to Follow-up

# Speech/Language Referral?

o Yes

# Speech/Language referral completed?

- o No
- 0 Yes-Client Accepted Services
- 0 Yes-Client Declined Services
- Yes-Client Lost to Follow-up

# Vision Referral?

• Yes

# Vision referral completed?

- o No
- Yes-Client Accepted Services 0
- Yes-Client Declined Services 0
- Yes-Client Lost to Follow-up

#### Weight Management Referral?

o Yes

#### Weight management referral completed?

- o No
- **Yes-Client Accepted Services** 0
- **Yes-Client Declined Services** 0
- Yes-Client Lost to Follow-up

#### Well Woman Visit Referral?

• Yes

# Well Woman Visit referral completed?

- o No
- Yes-Client Accepted Services 0
- Yes-Client Declined Services
- Yes-Client Lost to Follow-up



# WIC Referral?

o Yes

## WIC Referral completed?

- **No**
- Yes-Client Accepted Services
- Yes-Client Declined Services
- Yes-Client Lost to Follow-up

# **Other Medical Referral?**

o Yes

#### Other medical referral completed?

- **No**
- o Yes-Client Accepted Services
- o Yes-Client Declined Services
- Yes-Client Lost to Follow-up

# Social Services

# **Referral made regarding Cash Assistance?**

 $\circ$  Yes

# Child Care Subsidy Referral? (Select one)

o Yes

# **Employment Resources Referral?**

o Yes

- Food/Food Stamps (not WIC) Referral?
  - o Yes
- Health Care Coverage Referral?
  - o Yes

# Health Care Coverage referral completed?

- o No
- o Yes-Client Accepted Services
- Yes-Client Declined Services
- Yes-Client Lost to Follow-up

# Comments: \_\_\_\_\_

# KDHE Program Referral Form

# Support Services / Systems

Adoption Counseling Referral?

Child Care Referral?

Clothing Referral?

Fatherhood Initiatives Referral?

Housing Referral?

Immigration Services Referral?

Legal Assistance Referral?

Transportation Referral?

Utilities Assistance Referral?

Youth Services Referral?

Other Referral? o Yes

Specify other referral: