



# VENTURA COUNTY PUBLIC HEALTH NURSING REFERRAL

Submit by E-mail

<http://www.vchca.org/public-health-nursing>

Office: (805) 981-5115 FAX: (805) 654-7610 E-mail: [CHNReferrals@Ventura.org](mailto:CHNReferrals@Ventura.org)

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## SECTION I REFERRING SOURCE

Date: \_\_\_\_\_ Referral by: \_\_\_\_\_

Agency: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_ Phone: \_\_\_\_\_ FAX: \_\_\_\_\_

If from **CalWorks/Family Stabilization ONLY** -  West County  East County

## SECTION II CLIENT INFORMATION

(Print) Last Name: \_\_\_\_\_ First: \_\_\_\_\_ AKA: \_\_\_\_\_

DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_ SEX:  M  F Primary Language  English  Spanish  Other: \_\_\_\_\_

MediCal #: \_\_\_\_\_ Chart #: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ ZIP: \_\_\_\_\_

CELL: \_\_\_\_\_ OTHER: \_\_\_\_\_ EMAIL: \_\_\_\_\_ TEXT OK:

NAME OF PERSON LIVING WITH: \_\_\_\_\_ RELATIONSHIP TO CLIENT: \_\_\_\_\_

## SECTION III REASON FOR REFERRAL -

Client Aware of Referral

Pregnancy EDC: \_\_\_\_\_ Next OB Appointment: \_\_\_\_\_  First Time Parent < 28 wks  4P's attached

Postpartum Delivery Date: \_\_\_\_\_

Medical diagnoses/Identified problem/needs are:

Signature/Title: \_\_\_\_\_ Date: \_\_\_\_\_

## SECTION IV REFERRAL STATUS (For use by Nursing Referral Center Staff Only)

No follow-up  Unable to locate  No such address  Client refused  Case open

Plans/Goals: \_\_\_\_\_

Notified Referral Source by:  Phone Date: \_\_\_\_\_  Fax Date: \_\_\_\_\_  E-mail Date: \_\_\_\_\_

Signature/Title: \_\_\_\_\_ Date: \_\_\_\_\_

### (Nursing Referral Center Staff use only)

Referral Review: \_\_\_\_\_

Date: \_\_\_\_\_ Initials: \_\_\_\_\_ Program \_\_\_\_\_ Nurse \_\_\_\_\_ Priority \_\_\_\_\_ NRS # \_\_\_\_\_

Researched  Previous Providers/NRS # \_\_\_\_\_

# Nursing Referral Center

## Ventura County Public Health

### When To Initiate A Public Health Nursing Referral

Public Health Nurses (PHNs) will collaborate with you to improve your client's quality of life and access to care by providing comprehensive nursing assessments, education and linkage to community resources.

Types of referrals that can be made to Public Health Nursing are:

- ◆ Assistance with access to health care services
- ◆ Complex issues that endanger the existing level of health
- ◆ Inconsistent, late-entry into or no prenatal care
- ◆ At-risk for or currently using harmful substances during pregnancy
- ◆ Maternal or postpartum mental health concerns
- ◆ Premature births (under 37 weeks gestation)
- ◆ Newborn or child prenatally exposed to harmful substances
- ◆ Failure to thrive infant
- ◆ Concerns regarding infant or child growth and/or development