



Referral Form for The Essex Pregnancy & Parenting Connection (EPPC)

The EPPC links pregnant women and parents with a child up to 3 months with voluntary home visiting and other services when appropriate. Client is referred based on the Plan of Care below and contacted by outreach staff. If ineligible for those programs, the EPPC will provide information for other community resources. This form is to be completed by the referring agency. Client being referred must sign the consent statement. Accurate completion will expedite referrals.

Items with an asterisk (*) are required.

Today's Date: / /

For office use only:
Client ID #: _____

*Provider/Agency/Facility Making Referral: _____

*Person Making Referral: _____

*Title: _____ *E-Mail Address: _____

*Phone: _____ *Fax: _____

Referral Type:
Direct Referral
Staff Outreach
Self Referral

Information About Client Who Is Being Referred

*First Name: _____ *Last Name: _____ MI: _____

*Date of Birth: / / Age _____ E-mail Address: _____

Street Address: _____ Apt #: _____ *City/State/Zip: _____

*Phone Number: _____ *Other Phone: _____

Best time to reach by phone: Morning (8am-12pm) Afternoon (12pm-5pm) Evening (5pm-8pm)

*Primary Language Spoken: English Spanish French/Creole Other: _____

*For this pregnancy, client received: 1st trimester prenatal care Late prenatal care No prenatal care Unknown
Start date of prenatal care: / /

***If Client is Pregnant:**
Date of expected delivery: / / Estimated gestational age: weeks
Trimester currently in: 1st 2nd 3rd First-time parent? Yes No

***If Client has an Infant/Child:**
Child's DOB: / /
Child's age: _____

Race/Ethnicity: Is client Hispanic or Latino? (choose one) Yes No What is client's race? (choose one or more) White Black/African American Asian American Indian or Alaskan Native Other (specify): _____	Identified Health/Risk Concerns: Alcohol or Other Drug Use Tobacco Use Depression/Mental Health Domestic Violence Transportation Housing/Homelessness Other (specify): _____	Current Health Insurance: (check all that apply) Uninsured Private NJ Family Care Medicare Medicaid PE Medicaid MC (specify MCO): AmeriGroup Healthfirst NJ Horizon NJ Health UnitedHealthcare None Don't Know
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Plan of Care (choose services; see reverse side for descriptions) Home Visitation (all clients are referred to HV) Baby & Me Healthy Start	Services Client is Receiving (check all that apply) TANF/GA/EA Food Stamps WIC
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Additional Information (optional):

Consent of Client Being Referred:
Checking this box indicates that the client gives permission to share the information on this form with the Essex Pregnancy and Parenting Connection (EPPC) and understands that they may be contacted by EPPC if more information is needed. If additional referrals are needed under the "Plan of Care" section above, client gives permission for EPPC to share information with programs who provide those services and the client understands that they may be contacted by staff from those programs.

To submit completed form, please print and fax to (862) 763-9222

OR

Email it by saving as 'jpeg' and sending as an attachment to info@essexpregnancyandparenting.org

Questions? Please call us at (973) 621-9157

Primary Partner Programs

The client who is being referred will be connected to one of the programs below and contacted by outreach staff. If the client is ineligible for the programs, information will be provided regarding additional community resources as appropriate. Additional programs may be added over time; please visit our web site at www.essexpregnancyandparenting.org for our most current referral form and up-to-date list of our partners.

Free and Voluntary Evidence-Based Home Visitation Programs

Healthy Families (HF-TIP)

A free and voluntary intensive home visitation program by specially trained family support workers that provide education, support, and parenting skills to pregnant women or moms with infants under 3 months of age. HF-TIP will work the mother and family until the child's 3rd birthday. Participants may enroll during pregnancy until the child's 3rd month.

Nurse-Family Partnership (NFP)

A national evidenced-based nurse home visitation program that improves the health of low-income, first-time parents and their children. The program is voluntary and no cost to client. Enrollment to the program is early in the pregnancy (before the 28th week). NFP will work with the mother and family until the child's 2nd birthday.

Early Head Start (EHS)

A federal program to promote healthy prenatal outcomes for pregnant women, enhance the development of very young children, and promote healthy family functioning. Home visits through EHS are available in some Essex communities; services are for low-income pregnant women and families with infants and toddlers.

Community Based Programs for Expect and Newly-Parenting Women/Families

Baby & Me

Helping women in the Greater Newark area have healthy pregnancies by offering personalized case management, access to health care, moms' support groups, and social networking. All services are free.

Healthy Start

Serving pregnant women in East Orange, Orange, and Montclair to improve pregnancy outcomes through case management, referrals, bus tickets, essential baby supplies, and educational workshops. All services are free.

**For any questions about this form or the referral process, please contact
The Essex Pregnancy and Parenting Connection at
(973) 621-9157 or info@essexpregnancyandparenting.org**



www.essexpregnancyandparenting.org