

Umatilla County
Fax: 541-278-5433
Call: 541-278-5432
Email: health@umatillacounty.gov

Morrow County
Fax: 541-676-5652
Call: 541-676-5421
Email: health@umatillacounty.gov



UMHS  **Family Support & Connections**
 Every Child Deserves a Head Start in Life

Prenatal, Maternal, and Child Services Referral

This is a shared referral form: ANY client referred will be connected to the appropriate Public Health or UMHS program available in their county. Thank you for joining with us to serve our community!

Nurse Family Partnership Babies First! CaCOON Early Head Start/Early Head Start Classroom
 Yellowhawk/ILaunch Early Head Start/ Head Start Home Visiting Family Support & Connection
 WIC OHP

Today's date: _____ **EDD (Estimated Delivery Date):** _____

Person being referred: _____ **DOB:** _____

Parent/Guardian name (if child): _____ Relationship: _____

Home Phone: () _____ **Cell Phone:** () _____

Home Address: _____ **City, State, Zip:** _____

Primary Language (circle one): English Spanish

Client Consents to be contacted by any of the above programs: YES / NO

Please check all that apply:

- | | |
|--|--|
| <input type="checkbox"/> 1st pregnancy | <input type="checkbox"/> Risk of maternal depression |
| <input type="checkbox"/> Newly pregnant needing assistance | <input type="checkbox"/> Isolation/lack of support |
| <input type="checkbox"/> Teen parent | <input type="checkbox"/> Lack of client/patient follow through |
| <input type="checkbox"/> Child with/at risk for developmental delays | <input type="checkbox"/> Domestic violence (present or history of) |
| <input type="checkbox"/> Parent with developmental delays | <input type="checkbox"/> Tobacco/alcohol use |
| <input type="checkbox"/> Lack of adequate parenting skills | <input type="checkbox"/> Substance abuse- <i>describe below</i> |
| <input type="checkbox"/> Infant feeding/weight gain issues | <input type="checkbox"/> Other- <i>describe below</i> |
| <input type="checkbox"/> Challenging child behaviors | <input type="checkbox"/> Medical Condition: _____ |

Additional Info: _____

Referring Source Information:
 Organization/Department: _____

Person/Provider submitting referral: _____

Phone Number:() _____ Fax Number: () _____ Email: _____

Do you need follow up information about client's enrollment into services? Yes No

Umatilla County
Fax: 541-278-5433
Call: 541-278-5432
Email: health@umatillacounty.gov

Morrow County
Fax: 541-676-5652
Call: 541-676-5421
Email: health@umatillacounty.gov



Family Support & Connections
Every Child Deserves a Head Start in Life



RESPONSE to Referral:

Referral assigned to:

Nurse Family Partnership Babies First! CaCOON Early Head Start/Early Head Start Classroom
Yellowhawk/ILaunch Early Head Start/ Head Start Home Visiting Family Support & Connection
WIC OHP

Please contact referral partner listed below for further follow up:

Organization/Department: _____

Person/Provider assigned to client: _____

Phone number: _____ Fax number: _____

Notes: _____
