

# GENERAL ADMINISTRATION 7.0

## Service Coordination Guidelines -- 7.23

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**Signature:**



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### **POLICY**

- All programs that work with children, adolescents, women of reproductive age, and pregnant women must include language in their program manuals or guidance requiring service coordination and referrals as appropriate.
- All health departments must establish and/or maintain a system which links children, adolescents, women of reproductive age, and pregnant women to the full array of services needed to ensure healthy outcomes and to assure the full developmental potential for the child.

### **APPLICABILITY**

This policy applies to all of the programs within the Bureau of Health Services that work with children, adolescents and pregnant women including:

- Regional Health Offices
- Local Health Departments

### **PURPOSE**

Ensure healthy outcomes for pregnant women and to achieve the full developmental potential for children and adolescents in an effort to have an

impact on low birth weight/infant mortality, inadequate prenatal care and adolescent pregnancy

## **PROCEDURE**

The Central Office and field personnel have joint responsibility in complying with all of the elements of the guidelines of this policy.

- Central Office is responsible for updating their respective program manuals and guidance as they relate to service coordination and referrals.
- Field personnel are responsible for the day to day operation of program service delivery and for developing procedures for referrals and maintaining current
- Referral resource lists
- Regional and County Directors are responsible for ensuring that a positive clinic environment is created which clearly endorses and supports service coordination and referrals as appropriate.

There are other standards, protocols, and manuals that exist to identify opportunities for referral and outreach, and this policy ties all of the program guidance together and strengthens the policy on care coordination for children, adolescents, women of reproductive age, and pregnant women.

All programs will participate in service coordination and guidance to ensure that children, adolescents, women of reproductive age, and pregnant women are linked to the full array of health department services and/or local community services. Therefore it is each health department's responsibility to ensure that all staff are aware of the services available within the health department and those services available within the community.

The language that should be included in program manuals or guidance may not necessarily contain the exact language utilized in this policy; however, the intent and the basic components of the service coordination guidelines that are outlined below must be included in program manuals.

### **Service Coordination**

Programs must have an established, standardized system of identifying the potential health concerns of children, adolescents, women of reproductive age, or pregnant women and addressing those health concerns accordingly either through service provision or by making referrals to programs within the health department or to local community service providers.

Care should be coordinated with all disciplines within the health department as appropriate, i.e., nutrition, home visiting programs, STD/HIV, family planning, EPSDT, WIC, and other programs as directed by existing procedures, protocols and manuals.

### *Some Examples of Service Coordination:*

- A. If it is determined during a WIC visit that a pregnant mother is a smoker, the pregnant mother should be given information on how smoking can negatively impact her pregnancy and offered the S.M.A.R.T. Moms Program.*
- B. There is a link between periodontal disease and pre-term low birth weight babies; therefore, all pregnant women should have a dental referral at their first prenatal visit.*
- C. Women with a negative pregnancy test who do not currently desire to be pregnant will be referred for family planning services.*

### **Outreach and Referrals and Community System Level Coordination**

Referrals for services should be made within the health department and to local community service providers, organizations, agencies, non-profits, and other agencies as appropriate if such services exist within a particular community.

Each health department must maintain a community-specific resource list that is updated at least annually. This resource list should contain information for other community health services such as abuse counseling, mental health, social service agencies, TennCare, etc.

### **Monitoring and Evaluation**

Each local and/or regional health department must be able show that the client's identified health concern was addressed and services were coordinated and/or referrals were made appropriately.

### **REFERENCE DOCUMENTS**

#### **OFFICE OF PRIMARY RESPONSIBILITY**

Office of the Director, Bureau of Health Services, (615)741-7305