

Lehigh Valley Drug and Alcohol Intake Unit

548 N. New St., 1st Floor, Bethlehem, PA 18018

Phone: 610-849-2406 Fax: 610-419-6061

Recovery Support Services Referral Form

Client: _____ Date: _____ File# _____

(Intake Unit Staff ONLY)

Address: _____ Phone Number: (Home) _____

(Other) _____

*Mark here if homeless

*Mark here if client will require a Spanish speaking CRS

Social Security Number: _____ Date of Birth: _____

Emergency Contact Person and Relation: _____

Phone Number: _____

Referral Contact and Title: _____ Phone Number: _____

Agency/Facility: _____

DIAGNOSIS (Required): _____

Current **OR** Recommended Level of Care : 1A 1B 2A 2B 3A 3B 3C 4A 4B

Other: _____

Agency Providing These Services: _____ Phone Number: _____

Admission Date: _____ Discharge Date: _____

Does Client have a Mental Health Intensive Case Manager? Yes No

Name of Case Manager: _____ Phone Number: _____

Recovery Support Services Domains	Based on information obtained at assessment, including client and clinician perceptions; is the client in need of assistance in the following areas? <i>(Check all that apply)</i>	Referred for Recovery Support Services: <input type="checkbox"/> Yes <input type="checkbox"/> No Referral Accepted by Client: <input type="checkbox"/> Yes <input type="checkbox"/> No Willingness to work collaboratively toward a goal of recovery: <input type="checkbox"/> Yes <input type="checkbox"/> No
EDUCATION / VOCATION		
EMPLOYMENT		
PHYSICAL HEALTH		
DRUG AND ALCOHOL		
EMOTIONAL / MENTAL HEALTH		
SOCIAL		
LIVING ARRANGEMENTS / HOUSING		
LEGAL STATUS		
BASIC NEEDS (food, clothing, utilities)		
RECOVERY SUPPORTS		
PARENTING		
TRANSPORTATION		
SAFETY		
SPIRITUALITY/OPTIMISM		
FAMILY (PRIMARY PARTNERSHIP)		
ACCESS TO SERVICES		
HEALTH INSURANCE		
	Domains Identified _____/17	Behavior Health Insurance Carrier: <input type="checkbox"/> Magellan – Lehigh County <input type="checkbox"/> Magellan – Northampton County <input type="checkbox"/> Northampton County Funded <input type="checkbox"/> Other: _____ _____ _____