

## **Instructions for Completing a Referral to the VCBH Provider Network**

### ***Making the referral***

- STEP 1** Complete the information on the Consent Page and the Screening form.
- STEP 2** Have the guardian/adult client read and sign the consent for referral statement on the Consent Page in the appropriate language: A client cannot be referred without consent.
- STEP 3** Fax the completed Consent Page AND Screening form to the appropriate program, listed below.

### ***What happens next?***

- STEP 4** VCBH completes the Follow-Up form to triage and assign the referral to a an appropriate provider, which may be a VCBH program or contract provider.
- STEP 5** The assigned provider informs the referring party about the disposition of the referral.

*If you need assistance with a referral, an update regarding the referral process, or to provide more information regarding the referral, please contact the Clinic Administrator or Officer of the Day (OD) from the appropriate program, listed below. Thank you for your patience!*

<i>Dependency care youth</i>	<i>Young adults (18 to 23)</i>
Child Welfare Subsystem	VCBH Transitions Program
<b>Fax 289-1676</b>	<b>Fax 981-9271</b>
Phone 289-3383	Phone 982-9270

### ***For all other referrals:***

Oxnard Options	Ventura Options	Santa Paula Options	Conejo Options	Simi Options	Fillmore Options
<b>Fax 981-8461</b>	<b>Fax 289-3395</b>	<b>Fax 933-0057</b>	<b>Fax 777-3574</b>	<b>Fax 582-7514</b>	<b>Fax 524-8655</b>
Phone 981-8460	Phone 289-3100	Phone 525-1618	Phone 777-3505	Phone 582-7507	Phone 524-8660