



**Connecticut Children's Medical Center**  
**Special Kids Support Center**  
 282 Washington Street  
 Hartford, CT 06106  
 Toll Free: 877 835-5768



**North Central Connecticut**  
**Medical Home Initiative for**  
**Children and Youth with**  
**Special Health Care Needs\***

**NEEDS ASSESSMENT AND PORTABLE CARE PLAN**

DATE: \_\_\_\_\_

Screened Y  N   
 Chart / Needs Y  N

Child's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
 Parent / Caregiver: \_\_\_\_\_ Relationship: \_\_\_\_\_  
 Phone #: \_\_\_\_\_ PCP: \_\_\_\_\_  
 Diagnosis /History: \_\_\_\_\_  
 Specialists: \_\_\_\_\_  
 Medications: \_\_\_\_\_

**NEEDS ASSESSMENT:**

	<u>Has</u>	<u>Needs</u>		<u>Has</u>	<u>Needs</u>		<u>Has</u>	<u>Needs</u>
Birth to 3	<input type="checkbox"/>	<input type="checkbox"/>	Financial Assistance	<input type="checkbox"/>	<input type="checkbox"/>	Mental Health	<input type="checkbox"/>	<input type="checkbox"/>
Child Care	<input type="checkbox"/>	<input type="checkbox"/>	Food/Nutrition	<input type="checkbox"/>	<input type="checkbox"/>	Shelter/Housing	<input type="checkbox"/>	<input type="checkbox"/>
Dental	<input type="checkbox"/>	<input type="checkbox"/>	SNAP	<input type="checkbox"/>	<input type="checkbox"/>	SSI	<input type="checkbox"/>	<input type="checkbox"/>
Education	<input type="checkbox"/>	<input type="checkbox"/>	WIC	<input type="checkbox"/>	<input type="checkbox"/>	Transition	<input type="checkbox"/>	<input type="checkbox"/>
Emergency Planning	<input type="checkbox"/>	<input type="checkbox"/>	Medical	<input type="checkbox"/>	<input type="checkbox"/>	Transportation	<input type="checkbox"/>	<input type="checkbox"/>
Safety	<input type="checkbox"/>	<input type="checkbox"/>	Developmental Screening 0 – 5 yrs	<input type="checkbox"/>	<input type="checkbox"/>			

Other: \_\_\_\_\_

**PORTABLE CARE PLAN:** N/A

<u>GOALS</u>	<u>ACTION</u>	<u>Completed By:</u>
		<input type="checkbox"/> Family <input type="checkbox"/> MHI <input type="checkbox"/> Other
		<input type="checkbox"/> Family <input type="checkbox"/> MHI <input type="checkbox"/> Other
		<input type="checkbox"/> Family <input type="checkbox"/> MHI <input type="checkbox"/> Other

Care Coordinator: \_\_\_\_\_ Date: \_\_\_\_\_

**Care Coordinators at Special Kids Support Center**

Aixa Rodriguez	Debbie McAdams, RN	Rachelle Tirell, RN
Allison Matthews-Wilson, LCSW	Katherine Ramirez	Rosa Rodriguez
Ann Riley, RN	Laura Knapp	Susan Roman, MPH RN

\*The Connecticut Medical Home Initiative for Children and Youth with Special Health Care Needs is a program supported by the State of Connecticut Department of Public Health. Information is available on their website at [www.ct.gov/dph](http://www.ct.gov/dph)