

How to Make Referrals to Mental Health and Community Supports for NYC Youth and Families

New York City’s Department of Health and Mental Hygiene (DOHMH) and Administration for Children’s Services (ACS) ensure that **free and low-cost mental health and community support services** are available to NYC families.

Both agencies address youths’ and families’ mental, emotional, and behavioral health challenges, avert crises, and strengthen family functioning.

This guide includes:



7 Stages of the Referral Process
A Best Practice Framework for Effective, Collaborative Referrals



Youth and Family Choice Worksheet
A Tool for Identifying Preferences in Service Delivery



Service Array Summary
A Centralized Directory of Cross-Agency Programs



NowPow Tip Sheet
A Set of Tips for Using NowPow to Search for Additional Support Services

This guide supports:

- Therapists
- Case planners
- Parent/family advocates
- School staff
- Healthcare providers

Note: ACS Child Protective Services (CPS) staff have their own process for making initial referrals into preventive services. However, providers servicing families in an ACS program can use these tools to make subsequent referrals when beneficial.



7 Stages of the Referral Process

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A Best Practice Framework for Effective, Collaborative Referrals

Ensure Readiness

Identify Needs and Preferences

Search for Appropriate Services

Discuss Options

Make the Connection

Gather Information

Follow Up

This process should be used by provider staff to support referral-making during intake, service delivery, and discharge.

⚠️ If a youth or family member needs immediate mental health support, text “WELL” to 65173; or call 888-NYC-WELL (888-692-9355).

1

Ensure Readiness

When appropriate, have a conversation about the types of programs or services that might benefit the youth/family and why. Use these **7 stages** to describe what will happen when making a referral and ensure the youth/family is ready and interested.

TIPS AND BEST PRACTICES FROM OTHER PROVIDERS

💡 Youth/Families who manage multiple services and providers can feel overwhelmed with appointments. Before referring a youth or family to additional services, always have an open conversation with them to make sure they feel ready for it.

2

Identify Needs and Preferences

Use the 📄 **Youth and Family Choice Worksheet** to guide the youth/family through a series of questions about their service preferences and eligibility criteria.

💡 Be clear about how you plan to use any information shared with you. Remind families that they don't have to answer anything that makes them uncomfortable.

💡 If the youth/family is comfortable with it, save this information so that you have a reference when working to connect them with the right provider.

3

Search for Appropriate Services


Use the 📄 **Service Array Summary** to look for NYC programs that meet the youth/family's needs. If needed, perform a search for additional CBO services using NowPow and the 📄 **NowPow Tip Sheet**.


💡 Youths/Families may have had a referral fall through in the past because of a long waitlist, a far commute, or because they didn't meet eligibility criteria. For a successful referral, always make sure to discuss the youth or family's service preferences, such as program location, program hours of operation, language, youth/family's current availability, and program costs.

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4

Discuss Options


Present the youth/family with a choice of program and provider options that meet their needs and use the talking points in the  **Service Array Summary** to guide a conversation about how specific programs may benefit them.


 Contact at least four organizations that meet initial search criteria to learn more about provider staff and confirm availability. Present at least two options and share the organization's information with youth/families in the language and communication channel they prefer.

5

Make the Connection

When the youth/family has selected a program they would like to participate in, schedule a meeting or a call with the new provider to facilitate a warm hand-off.


 Youth/families may be hesitant to start the process of building trust and communicating with a new provider. When making a referral, always have a conversation with the youth and caregiver to make sure they feel emotionally prepared for the process.


 Provide the youth/family with a written confirmation of the appointment and a point person they can contact with questions. Whenever possible, join the youth/family on the call to ensure they feel comfortable with the next steps and to provide context for the new provider, where necessary.

6

Gather Information

If the youth/family would like to proceed with intake, help them gather information about their current service plan and any documents required by the new service provider.


 Offer to help review the new provider's paperwork and consent forms if the youth/family is unsure about anything.

 If the new provider asks for things like proof of insurance, proof of guardianship, medical records, you can help the youth/family scan or take photos of their paperwork.

7

Follow Up

Check in with the youth/family within 1–2 months to ensure the referral was completed and that the program and provider are a good fit.

 If the youth/family remains in your care, it is your responsibility to help them maintain the services for as long as needed. Check in periodically with the provider and family to ensure the referral is going well.



Youth and Family Choice Worksheet

A Tool for Identifying Preferences in Service Delivery

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Use this worksheet during **Stage 2: Identify Needs and Preferences** to guide the youth/family through a series of questions about their service preferences.

💡 If any information has already been captured on other referral forms, make sure you have it handy to avoid asking the youth/family redundant questions.

YOUTH/FAMILY LOCATION

Zip code (*home and/or school*):

Acceptable travel distance (*miles*):

Means of transportation

(select all that apply):

- Car
- Subway
- Biking
- Walking
- Bus

PREFERRED SESSION TYPE

- In-person sessions
- Virtual sessions
- A mix of both, as needed

PREFERRED DAY AND TIME

- Evenings (5PM–12AM)
- Weekdays (8AM–5PM)
- Weekends

PREFERENCES IN PROVIDER

Provider gender:

- Female
- Male
- Non-binary
- Trans Woman
- Trans Man
- Any

Knowledge of and sensitivity to:

- Cultural background or religion
- LGBTQIA community
- Other:

Communication channel(s):

(select all that apply)

- Email
- Mail
- Phone
- Text

Appointment logistics:

- Allow clients to change/schedule appointments online
- Provider offers flexibility with rescheduling visits
- Send appointment reminders

Access to a peer advocate:

- Interested in connecting with a peer advocate
- No preference

Training or experience with a particular condition:

Additional services available on-site (*e.g. child care*):

CAREGIVER INSURANCE

- Has no insurance
- Medicaid
- Private insurance
- Requires free services
- Caregiver is able to pay no more than \$ ____ per session.

SOCIAL NEEDS

You can also use [NowPow](#) to search for social services.

Family/youth is interested in signing up for:

- Cash assistance
- Child care
- Employment assistance
- Food assistance (SNAP, WIC)
- Housing services
- Immigration assistance

Duplicate this page if you need to input information for more than four youths.

	1	2	3	4
Name				
Age				
Date of Birth <i>(dd/mm/yy)</i>				
Preferred Language(s)				
Gender	Female Male Non-binary Trans woman Trans man Other	Female Male Non-binary Trans woman Trans man Other	Female Male Non-binary Trans woman Trans man Other	Female Male Non-binary Trans woman Trans man Other
Special Conditions <i>(select all that apply)</i>	Developmental disabilities Mental or behavioral health disabilities Physical disabilities Substance-use disorder	Developmental disabilities Mental or behavioral health disabilities Physical disabilities Substance-use disorder	Developmental disabilities Mental or behavioral health disabilities Physical disabilities Substance-use disorder	Developmental disabilities Mental or behavioral health disabilities Physical disabilities Substance-use disorder

CAREGIVER INFORMATION

Duplicate this page if you need to input information for more than three caregivers.

	1	2	3
Name			
Preferred Language(s)			
Household income and % Federal Poverty Level (FPL)* <i>(if relevant)</i>			
Special Conditions <i>(select all that apply)</i>	Substance-use disorder Survivor of domestic violence	Substance-use disorder Survivor of domestic violence	Substance-use disorder Survivor of domestic violence

*%FPL is a percentage calculated by the federal government using household size and income. For more information on how to calculate %FPL, visit aspe.hhs.gov/poverty-guidelines.



Service Array Summary

A Centralized Directory of Cross-Agency Programs

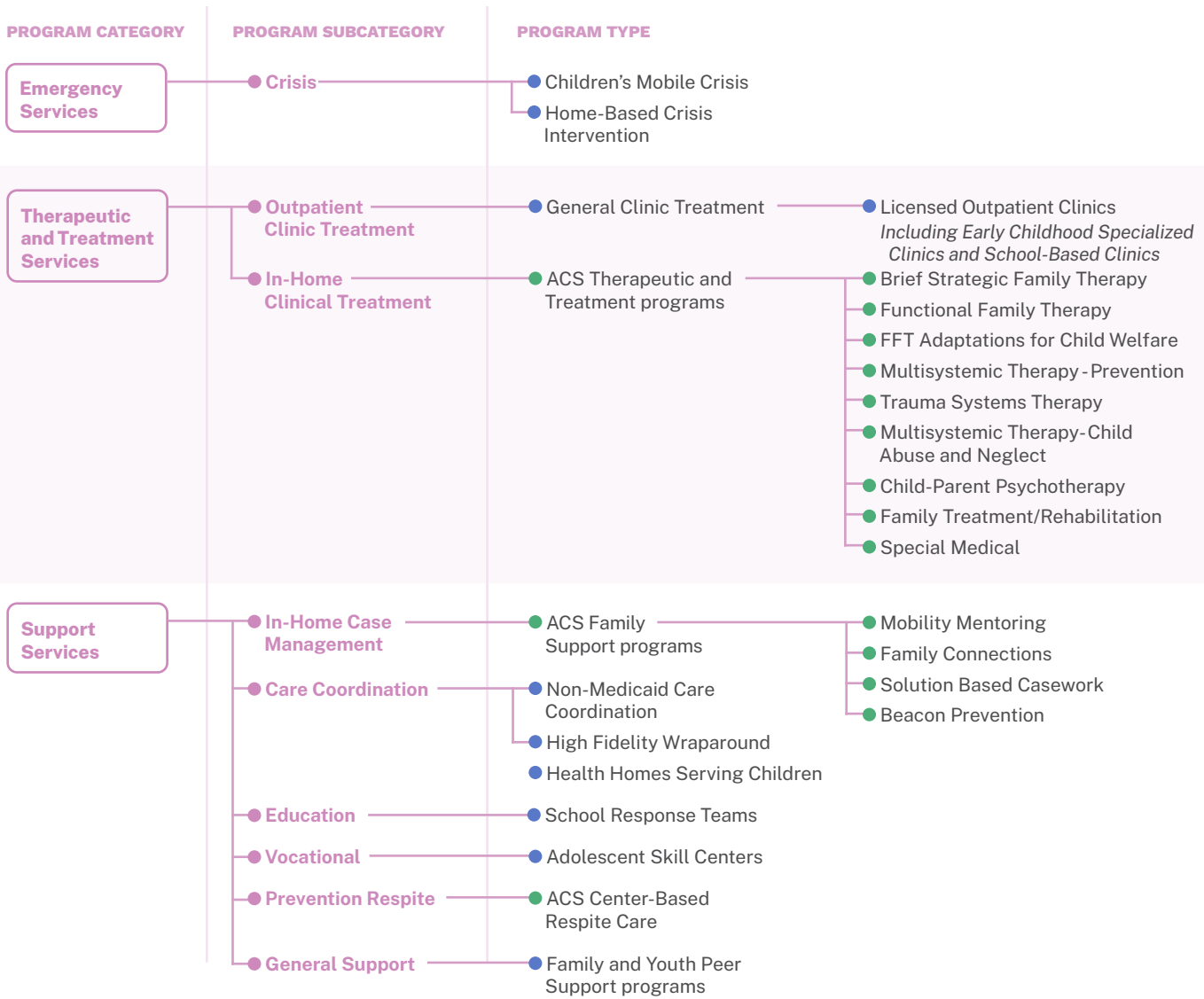
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Use this during **Stage 3: Search for Appropriate Services** to look for programs that meet the youth/family’s service needs.

The mental health and community support programs listed below are provided by DOHMH and ACS **free of charge**, regardless of income, insurance, or citizenship status. Program and provider information can be accessed in the Service Array Summary **Airtable directory**.

💡 Use the Airtable link below to access the Service Array Summary. Once there, use the filter and group functions to sort the information as needed.

Explore the Service Array Summary at: airtable.com/shrbSHd2eCW5mzXfK



KEY

- ACS Programs
- OMH/DOHMH Programs

New York State Office of Mental Health (OMH) oversees many more emergency, inpatient, outpatient, and support services city- and state-wide. The full mental health program directory can be searched, sorted, and downloaded at omh.ny.gov.



NowPow Tip Sheet

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A Set of Tips for Using NowPow to Search for Additional Support Services

Use NowPow during **Stage 3: Search for Appropriate Services** to perform a search for additional CBO services to support youths' and families' health and well-being.

Access NowPow at: www.nowpow.com

NowPow CommRx is available at no cost for any community organization willing to keep their service profile updated in NowPow.

1

Set Location

Enter address, zip code, or neighborhood in the **[location]** bar.

2


Choose a Service Category

Select a relevant service category.

e.g. [Mental Health], [Child Care and Parenting], [Substance Abuse], [Employment], [Financial Stability], [Legal Assistance], etc.

3

Adjust Filters and Search

Adjust **[mile radius]** and click **[filter]** button in the top right corner to narrow the search. Use the information collected on the  **Youth and Family Choice Worksheet** to multi-select filters related to eligibility information and unique needs.

Each organization which matches the search criteria displays sorted automatically by distance from the location entered. Scan for information about the provider's **[COVID-19 service status]**, **[hours of operation]**, **[fee for services]**, **[intake process]**, and **[required documents]**.

NOWPOW

The NowPow referral platform helps CBOs connect their community with vital information and services, validated with updated availability during the COVID-19 crisis, so they can stay well, meet basic needs, and care for others.

Your agency may already have access to the NowPow platform. Talk to you program director about accessing a license.

If your agency is not already using NowPow, email: engagement@nowpow.com for additional information or support getting signed up.