**We want to make sure that you know about the community resources that are available to you and your family. Many of these resources are free of charge. Please answer each question and hand it to your child’s doctor at the beginning of the visit. Thank you!**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | |  |  | | --- | --- | | **Do you need childcare for your child?** | | | YES  **If YES, would you like help finding it?** | | **🞎** | | NO | | **🞎** | |  |
|  | **Do you have a full-time job?**   |  | | --- | | YES | | **🞎** | | NO  **If NO, would you like help finding employment?** | | **🞎** | |  |
|  | **Do you think you are at risk of becoming homeless?**   |  | | --- | | YES  **If YES, would you like help with this?**  **?** | | **🞎** | | NO | | **🞎** | |  |
|  | **Do you always have enough food for your family?**   |  | | --- | | YES | | **🞎** | | NO | | **🞎**  **If NO, would you like help with this?**  **?** | |  |
|  | **Do you have a high school degree?**  **If NO, would you like help to get a GED?**  **?**   |  | | --- | | YES | | **🞎** | | NO | | **🞎** | |  |
|  | **Do you have trouble paying your heating/cooling, water or electricity bill?**   |  | | --- | | YES  **If YES, would you like help with this?**  **?** | | **🞎** | | NO | | **🞎** | |  |

\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\***FOR PROVIDER/STAFF USE ONLY**\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| If a parent has needs and wants help, please give the appropriate WE CARE information sheet(s) from your practice’s ***Family Resource Book***. 1 screener per family. Store copy in patient EMR or chart. | **Please check off below if you provided WE CARE information sheet(s) and/or referral(s) for the following needs:**   |  |  |  | | --- | --- | --- | | 🞎 Childcare | 🞎 Housing | 🞎 Education | | 🞎 Employment | 🞎 Food | 🞎 Utilities |   **Referral provided by:**  Provider  MA  Nurse  Other |

*Developed by Arvin Garg, MD, MPH*