



Cedar Family Centers

For children and youth with special health care needs and their families

What are Cedar Family Centers?

A Cedar Family Center is a site that provides evolving, family-centered, intensive care management and coordination in order to assist families in reaching their full potential and thrive in their own communities.

A Cedar can assist you with:

- ✓ Obtaining clinical services
- ✓ Referrals to community and social supports
- ✓ Health Promotion (i.e. education and prevention)
- ✓ Screenings for physical and mental health
- ✓ Transitional Care (between levels of service)
- ✓ Family advocacy

Who is eligible for Cedar Services?

- Families of children birth to age 21 having two or more chronic conditions or have one chronic condition and are at risk of developing a second
- Children having a severe mental illness or severe emotional disturbance

Who would benefit from using a Cedar Family Center?

Families who require intensive care management and coordination services related to Behavioral Health, Social development, and/or Medical intervention.

How do I access Cedar Family Services?

You do not need a referral to receive services. You can contact a Cedar Family Center at any time. In addition, you may also speak to your current provider about making a referral on your behalf.

Is there a cost involved in going to a Cedar?

If your child has Medical Assistance coverage (Medical Assistance, RIte Care or RIte Share), there will be no out-of-pocket expense for the services that you and your child receive from Cedar.

What should I expect from Cedar?

- Cedar staff are experienced professionals who will work closely with you to complete a current needs assessment and develop an action plan with goals you have for your child and family. If it is determined Cedar Services are not required, Cedar staff may assist the family in identifying alternatives.
- Cedar enrollment can be short or long-term. Once you have been linked to the services and supports identified, or you have achieved your goal and have no unmet needs, you can be successfully discharged from Cedar.
- Families are able to return to Cedar Family Centers after completion of services for readmission as needed.
- Cedar Family Center services are available statewide. Families can meet with a Cedar staff in their home, community, or at the Cedar Center.

Cedar Family Centers

RI Parent Information Network Cedar 1210 Pontiac Ave. Cranston, Rhode Island 02920 Tel. (401) 270-0101	Three Cedar Family Center 335 R Prairie Ave., Suite 1A Providence, RI 02905 Tel. (401) 444-7703
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Please FAX to RIPIN Cedar Family Center: 401-270-7049
Cedar Referral and Triage Tool

Child's First Name:		MI:	Last Name:	
DOB:		Current Age:		Gender:
Address:				
City:		State:		Zip:
Mother's Name:		Father's Name:		
Phone Number: <input type="checkbox"/> Home <input type="checkbox"/> Cell		Phone Number: <input type="checkbox"/> Home <input type="checkbox"/> Cell		
Email Address:		Email Address:		
Interpreter Needed? <input type="checkbox"/> Yes <input type="checkbox"/> No		Interpreter needed? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Primary Health Insurance:			Member ID#:	
Secondary Health Insurance:			Member ID #:	
Enrolled in Current Care? <input type="checkbox"/> Child <input type="checkbox"/> Mother <input type="checkbox"/> Father				
Date of referral:		Referral Source:		Phone:
Primary Care Physician:				Phone:
Social Security #:			MID:	

Chronic Conditions requiring Intensive Care Coordination: (Please check all that apply)

<input type="checkbox"/> ADD/ADHD	<input type="checkbox"/> Brain Injury	<input type="checkbox"/> Down Syndrome	<input type="checkbox"/> Seizure Disorder
<input type="checkbox"/> Anxiety	<input type="checkbox"/> Cerebral Palsy	<input type="checkbox"/> Epilepsy	<input type="checkbox"/> Sickle Cell Anemia
<input type="checkbox"/> Asthma	<input type="checkbox"/> Depression	<input type="checkbox"/> Hearing Problems	<input type="checkbox"/> Speech Problems
<input type="checkbox"/> Autism, Asperger's, ASD	<input type="checkbox"/> Developmental Delay	<input type="checkbox"/> Intellectual Disability	<input type="checkbox"/> Tourette Syndrome
<input type="checkbox"/> Behavioral Problems	<input type="checkbox"/> Diabetes	<input type="checkbox"/> Learning Disability	<input type="checkbox"/> Vision Problems
<input type="checkbox"/> Bone, joint, or muscle problems		<input type="checkbox"/> Other (please specify):	

Child/Family Risk Factors:	Current Need	Current Services (please specify)	Past services (please specify)	Current Barriers (please specify)
Current hospitalization/inpatient admission	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2+ ED visits related to chronic condition	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inability to follow through (appts/med regimen)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
School issues (low performance, absenteeism, behavior)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Difficulties with daily living	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Unable to socially interact	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Trauma	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Parent/Caregiver MH concern or cognitive delay	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Domestic Violence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Substance Use <input type="checkbox"/> Parent <input type="checkbox"/> Caregiver <input type="checkbox"/> Child	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Food uncertainty	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Housing Issues	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Does the family require Intensive Care Coordination through Cedar? ☐ Yes ☐ No

Suggested Alternatives

Cedar Staff/Date