



# Lincoln County Child & Family Behavioral Health

## Lincoln County Intensive Outpatient Services Referral Checklist

- Inform the parents/guardians prior to submitting this referral
- A completed Release of Information for LCHHS
- Complete the Lincoln County Referral Form
- Attach the most recent mental health assessment to include referral to Wraparound/ICM/ICC/ IIBHT
  - If recommending a higher level of care like day treatment/PRTS/Acute include that recommendation as well
- Demographic Form
- Attach copy of proactive crisis safety plan, supervision plan, or school safety plan if available

**You can secure email to IOSS Team at [IOSS@co.lincoln.or.us](mailto:IOSS@co.lincoln.or.us)  
or fax to: LCHHS Children's Behavioral Health – Attn: IOSS Team at  
541-265-0601.**