

**MATERNAL INFANT HEALTH PROGRAM (MIHP)
MATERNAL PLAN OF CARE
Part 2
Interventions By Risk Level**

		<p>4. Assist with referral to homeless assistance programs in the community including:</p> <ul style="list-style-type: none"> ✓ Homeless shelters ✓ Transitional housing programs ✓ DHS relocation assistance <p>5. Assist with locating more permanent housing or refer to the appropriate community agency to assist</p>	
<input type="checkbox"/> EMERGENCY	<input type="checkbox"/> * Homeless, without regular nighttime temporary housing and on the street with no temporary housing	<p>EMERGENCY:</p> <ol style="list-style-type: none"> 1. Assist with securing emergency, temporary housing (e.g. shelter, with family/friends, etc.) 2. Inform MHP and medical provider 	

* *Based on observation or additional beneficiary interview*