

South Bay is a community-based, behavioral health care organization offering a continuum of services including adult behavioral health, substance abuse counseling, children's behavioral health, day services, autism services, and early childhood services. Our extended consumer outreach program allows our expert team of clinicians to come to you. In addition, we offer a full range of services at 20+ facilities serving Massachusetts, Connecticut, and Rhode Island.

Services Include:

Individual Therapy 🧖 Family/Couples Therapy

School Based Services 🤄 Outreach & Office Based 🦃 In-Home Therapy

Therapeutic Mentoring 🤵 Medication Management

Insurances Accepted:

Massachusetts Behavioral Health Plan
Beacon (Neighborhood Health Plan, Boston Health Net and Fallon)

Medicare/Medicaid

United Behavioral Health/Harvard Pilgrim

And others!!

Services can take place in the home, school, or community settings

Please see our website for additional locations where services are offered throughout the state http://www.southbaycommunityservices.com/

To Make a Referral:

Please contact us at 508-427-5362 and have available the following information regarding the person being referred:

- * Address
- ★ Date of Birth
- * Reason for Referral
- ★ Type of Insurance and Insurance Number
- ★ Any Special Requests (i.e., Outreach/Office Appointments, Female/Male Therapist)

Not sure if you should make a referral?

Some reasons to refer someone for our services:

- ★ Depression, Anxiety, or Excessive anger
- ★ Trauma (i.e. abuse, neglect, car accident)
- ★ Grief (loss of a loved one, a job, a home)
- ★ Family system change (divorce, marriage, new baby)
- * Relationship Issues
- ★ Gender Dysphoria
- ★ Chronic/Terminal illness
- ★ Substance abuse
- ★ Self-harm behaviors (cutting, suicidal gestures, eating disorder)
- ★ Inadequate school or work performance
- ★ Psychiatric hospitalization
- ★ Financial stress/hardship
- ★ A 51A is filed
- ★ Legal involvement
- ★ Parenting or behavior concerns

Children's Behavioral Health Initiative

★ Therapeutic Mentoring

Therapeutic Mentoring offers structured, one-to-one, strengths-based support services between a therapeutic mentor and a youth for the purpose of addressing daily living, social, and communication needs. These services are provided to youth (under the age of 21) in any setting where the youth resides and/or any other community setting.

★ In-Home Therapy

In-Home Therapy is a family driven, strengths based, collaborative, team based approach that provides intensive in-home family centered therapy services aimed at treating a youth's behavioral and emotional health needs while improving the family's ability to provide effective support.

South Bay Community Services Intake Form 1115 West Chestnut Street, Brockton Mass 02301 Telephone # 508-427-5362 Fax # 508-427-5461

Intake@Southbaycommunityservices.com OFFICE LOCATION _____ Client # _____ Intake Date Client's Legal Name ___ First Middle Last Gender SS#______ Race or Ethnicity_____ Home Phone # Cell or Other # Any Children Under the Age of 3:_____ Name of School Child Attends: Services Requested: Name of Person Referring: Referred By (Name of Agency and #)_____ Is client Currently on meds/Name of Prescriber & # Other ACTIVE South Bay Services Is DCF Involved (If yes DCF Name and #)_____ Any Court Inv. P.O /Incarceration Hx. Any CSA Involvement OR Community providers____ Language(s) Spoken by Client _____Lang. Spoken by Parents/Guardian _____ Who Has Custody of Client Doctor Appt__ Therapist Appt Parent/Guardian or Emergency Name and #_____ Any Present Domestic Violence: Yes _____No____ Any Present Suicidal _____ or Homicidal ideation_____ Any Present Aggressive Behaviors: Yes___No____ Any Current Substance Use: ____Yes PRESENTING COMPLAINT **INSURANCE INFORMATION**



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