



THE NEST PROGRAM

NEW IN-HOME PARENTING PROGRAM

All of us want happy, healthy, well-rounded children. However, there can be times when meeting that goal is difficult. Whether your family is facing changes or your child is showing behaviors that you're unsure of, we can help!

The Nest Program is designed to help the whole family. This in-home parenting program focuses on your family's strengths and facilitates attainable goals that will support it for years to come. Our approach includes connecting, empowering, and correcting principles based in TCU's Trust-Based Relational Intervention (TBRI). This method is evidence-based and results driven, so we are able to best help your family.

in-home parent coaching • telehealth & in-home counseling • parent-child activities

For more information on the program and the unmatched benefits, please visit theparentingcenter.org or call Program Director Kathryn Thalken at 817-632-5537.



NEST REFERRAL FORM

Clients can be referred by community agency or self-referred

Today's Date: _____

Primary Caregiver Information

First Name: _____ Last Name: _____ Date of Birth: _____

Gender: Female Male Identify as: _____

Primary Language: English Spanish Other: _____

Phone: _____ Email: _____

Address: _____
Street City State Zip County

In order to be eligible for this program, the family must answer **YES** to the following questions:

Do you have a child/children between the ages of 3 and 16 years old? Yes No

Does the child/children live with you at least half of the time? Yes No

Do you currently reside in Tarrant County? Yes No

Are you willing to commit to 10 sessions with a Parent Coach? Yes No

Are you willing to make a life change? Yes No

Have you or your child experience one of the following (check all that apply):

Moderate/high stress in family Difficult/stressful pregnancy Difficult/complicated birth Early hospitalization (birth-3 years old)

Abuse or neglect Trauma of some kind (domestic violence witness, natural disaster survivor, divorce, etc.) Adoption or foster care

Other: _____

Is there a current open CPS case? Yes No

A current open case will be considered for services.

What is the presenting issue for the family? _____

Referred By: _____

Agency Name (if applicable): _____

Date Referral Sent: _____

Email: _____

Phone: _____

If this form is being filled out by an agency, is the client aware of this referral? Yes No

Please fax back to 817-332-6489 attention: Kathryn Thalken or email to kthalken@theparentingcenter.org.

TPC Use Only:

Date Referral Received: _____

Parent Coach Assigned: _____

Date of 1st contact with family: _____ Type and Coach: _____

Date of 2nd contact with family: _____ Type and Coach: _____

Date of 3rd contact with family: _____ Type and Coach: _____