

Home Visitor's Name:		EHS 2nd TRIMESTER HOME VISIT RECORD				
HOME VISIT PLAN FOR: Month _____ Year _____		Social Dates	Mo. HV's Possible	Mo HV's Comp	Staff Cancel Date(s)	Family Cancel Date(s)
Pregnant Mom's Name :		/				
4th 5th 6th Month (circle)	DUE DATE:					
Curriculum	Weekly Content	Birth Plan / Planning & Follow Up				
Education:	HV #	Date:	Prenatal visit dates: Dental appt:			
Curriculum PAT _____ (2x per month) Florida/Triple P Benefits of breastfeeding Nurturing and Responsive caregiving How big is my baby How is my baby developing Childbirth preparation						
Nutrition/Dental:	HV #	Date:				
Nourishment for you and the baby UC Davis Lesson # Importance of dental care during pregnancy Morning sickness How mother's food nourishes the baby						
PFCE/School Readiness/Transitions:	HV #	Date:				
Pregnancy journaling Father Engagement Policy Council FPA/SR monthly f/up Web activities Socials						
Health/Safety:	HV #	Date:				
How smoking can hurt the baby How drugs and alcohol can hurt the baby Prenatal care Accessing WIC services Discomforts of pregnancy/Weight gain Infant care and Safe sleep practices Signs of preterm labor						
Mental Health/Social Service:	HV #	Date:				
Positive / affirmations during pregnancy Family Opportunity & Interest Assessment (FOIA) Individual Transition Plan (ITP) Accepting the pregnancy Coping with Stress Edinburgh Depression Assessment Accessing substance abuse treatment						
PARENT COMMENTS:					Family Strength:	
Parent's Signature: _____		Date: _____				