1. Will the interdisciplinary team all have experience in working with both children and adults?
   Answer: The Murdoch Developmental Center Children’s Assessment Clinic will be serving children ranging in age from 5 to 21 years. Clinical staff performing the assessments will have expertise treating children having complex needs, as defined by the Settlement Agreement, who are within this age range. The clinician may also have experience with adults.

2. Will the assessment tool be used by clinicians across the state who also work with this population?
   Answer: The assessment process will consist of a review by an Interdisciplinary Team (IDT) of the child’s existing clinical records to include relevant medical records, psychological evaluations, psychiatric evaluations, communication evaluations, etc. The IDT will perform a direct assessment of the child’s current medical condition, parent/guardian interviews/questionnaires relative to behavioral and psychiatric functioning of the child, relevant psychiatric observations/interviews of/with the child, relevant behavioral observations/assessment of/with the child, assessment of current/previous treatment interventions, etc. There is no specific assessment tool that will be used as part of the IDT assessment process.

3. Will the clinic expand to include serving children dually diagnosed with IPRS funding?
   Answer: No

4. What is the initial estimate for the number of children receiving the assessment service at the clinic?
   Answer: The clinic will be operating as a pilot program for two half-days a month for the first six months, starting April 1, 2017. We anticipate that two children can be seen each month.
5. Will the clinic also be expanded/replicated to other parts of the state, or will it be expanded to receive more children from other counties across the state, but remain based at Murdoch?
Answer: It depends. As indicated by the Settlement Agreement, the initial six months of the clinic operation will be used to assess demand for the service. Based on that information, decisions will be made regarding expansion/replication of clinic services.

6. Has there been discussion about the evaluation plan for the success or the lack thereof for the clinic by an external person/agency/group? There should be someone on the outside who helps with the development of and tracking of metrics put into place.
Answer: DHHS and DRNC will be monitoring implementation of the Settlement Agreement.

7. Has there been discussion about the clinic linking back to the Medical Home within the community and consultation network?
Answer: Reports generated by the clinic will be provided to the child’s guardian and the LME/MCO through the Care Coordinator for the child. Consultation with the child’s existing network of supports regarding the content of the Needs Assessment is welcomed and consultation will be provided on an as requested basis.

8. Will Care Coordinators or Case Managers be present with families while their child is being assessed at the clinic?
Answer: Yes – whenever possible.

9. What is the timeframe for being identified by the LME/MCO, to the LME/MCO submitting a referral, to going to the clinic and getting assessed, to getting the clinical recommendations back to the families, LME/MCOs, and providers? What is the linkage process and has this been discussed?
Answer: Timeframes will depend on numerous factors. Each LME/MCO will need to establish a process for identifying Children with Complex Needs, and then which of those children will be referred to the clinic for assessment.
Once the Murdoch’s Children’s Assessment Clinic receives the referral from the LME/MCO, the timeframe for processing a referral will depend on the demand, particularly given the limited hours of operation during the initial six-month phase of operation (i.e., two half-days per month). Once the assessment visit to the clinic is scheduled, it is anticipated that the review, assessment and report write-up will be completed within a two-week period. Reports will be shared with the parent/guardian and LME/MCO through the Care Coordinator.

10. Will the clinic make recommendations for the appropriate services for say a child with Mental Health and Autism?
   Answer: Yes

11. Are the release of information forms going to be signed at the clinic?
   Answer: LME/MCO’s will facilitate securing consent for release of any reports they will be sending to the clinic as part of the referral packet.

12. What role do the LME/MCOs play in working in collaboration with the children’s clinic? Will the Murdoch contact the LME/MCO Medical Directors and Clinical Directors to include them in the discussion about recommended treatment for each child?
   Answer: Children will be referred to the clinic by the LME/MCO and copies of recommendations will be provided to the LME/MCO through the child’s Care Coordinator.

13. Has there been discussion about the type of assessment that is developed at the clinic to be utilized out in the community by other clinicians?
   Answer: See response to question #2.