

INTERMITTENT CLINIC

Supplemental Questions

Please complete the following supplemental questions. Intermittent Clinic Name: Parent Facility Name: Explain the Intermittent Clinic's mechanism for sick care and follow-up care of CHDP clients with health problems. Describe how Intermittent Clinic assures continuity of care. Explain how Intermittent Clinic preserves and maintains patient's primary care provider. Explain Intermittent Clinic's protocol for maintenance, privacy, and security of medical records. Describe Intermittent Clinic's procedure for obtaining patient consent and history. Protocol for Tuberculosis testing and PPD reading. Describe your Intermittent Clinic's procedure for cleaning/sanitizing after providing services.

Schedule of hours for the Intermittent Clinic:

Describe how you will differentiate care coordination for the Intermittent Clinic from the parent clinic.