

Transition Coordinators are responsible for the following items in the CRM web app

- Review the unassigned cases “view” in order to find new cases that need contact (this is when you would assign a case to yourself)
- Entering a case contact when you contact the individual, via the Case Contact form on the CRM case
 - (Return cases to HFS that need follow up from a different agency)
- **If participant is Considering MFP, advance to Informed Consent stage.**
- Enter Case notes throughout process to document contacts with/about participant
- Upload signed informed consent to Attachments
- Complete Informed Consent stage documentation and checklist
- Input Level of Care Assessment (as required)
- **Advance to Pre-Transition Stage**
- Complete Pre-Transition Documentation
 - Face Sheet
 - Medication List
 - Risk Inventory and Mitigation Plan
 - Backup Plan and Personal Resource List
- Participate in Pre-Transition staffing (up to one month prior to transition)
- Complete QOL Baseline Survey (one week prior to transition)
- **Advance to Transition Stage when participant moves to the community setting**
- Complete Transition Form C within 2 business days of participant’s move date
- Complete Incident Reports (Form M) for any critical incidents that occur while participant is living in the community and notify UIC so a staffing can take place.
- Complete Post-Transition update Form E at 6 month intervals after transition to report critical incidents or to report changes in address or plan of service (waivers).
- Participate in post-transition staffings

Other

- Complete Disenrollment Form D for any participants who can no longer be enrolled (this form is in the Pre-Transition section and is completed for any participants who have enrolled by signing the informed consent and/or transitioned to the community and can no longer participate in MFP. If you have questions about how/when to complete a Disenrollment form, please contact UIC.
- Address Re-Referrals by re-contacting the participant
- Participate in Incident staffings and mortality reviews as warranted