

**MFP Transition Coordinator Informational Survey**

Date \_\_\_\_\_ First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Gender  Female  Male Email Address \_\_\_\_\_

Agency Name \_\_\_\_\_

Agency Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Professional Information: Please check the box with the appropriate answer.**

1. Do you currently have access to a computer at your agency location?  Yes  No

2. If yes, does your computer have internet access?  Yes  No

3. What is your highest level of education?  Some High School  High School Diploma or GED  Some College  Under-Graduate degree  Post-Graduate Courses or Degree

4. How long have you been in your current job?  6 months or less  6 months - 1 year  1 - 2 years  More than 2 years

**Use the following definition of care management to answer the remaining questions:**

Care management is a collaborative process of assessment, planning, facilitation and advocacy for options and services to meet an individual's health needs through communication and available resources to promote quality cost-effective outcomes. Source: Case Management Society of America, 2002.

5. How much care management experience do you have?  6 months or less  6 months - 1 year  1 - 2 years  More than 2 years

6. Which populations or types of people will you be providing care management service to for MFP? Check the appropriate box.  Illinois Dept. on Aging  Division of Rehab Services  Division of Developmental Disability  Division of Mental Health

7. What is your **past** work experience in care management, if any?  
A. Employer/agency, B. Types of people you served, C. Activities you performed.

Check all that apply and fill in the blanks where indicated.

**A. Past Care Management Employer/Agency**

- State Agency \_\_\_\_\_
- Hospital \_\_\_\_\_  Community/Private Agency \_\_\_\_\_
- Physician Clinic \_\_\_\_\_  Other \_\_\_\_\_

**B. Past Populations or Types of People Served (Check all that apply)**

- Older Adults
- Persons with developmental disabilities
- Persons with mental illnesses
- Persons with disabilities
- Persons who are substance-abusers
- Other

**C. Past Care Management Activities Performed (Check all that apply)**

- Care coordination
- Advocacy
- Authorize services
- Recruit/enroll participants
- Monitor services
- Develop plan of care
- Evaluate services/Plan of care
- Other

8. Select the boxes that describe your **current** care management work (A. Employer/agency, B. Types of people you served, C. Activities you performed.) Check all that apply and fill in the blanks where indicated.

**A. Current Employer/Agency**

- State Agency \_\_\_\_\_
- Hospital \_\_\_\_\_
- Physician \_\_\_\_\_
- Clinic \_\_\_\_\_
- Community/  
Private Agency \_\_\_\_\_
- Other \_\_\_\_\_

**B. Current Populations or Types of People Served (Check all that apply)**

- Older Adults
- Persons with developmental disabilities
- Persons with mental illnesses
- Persons with disabilities
- Persons who are substance-abusers
- Other

**C. Current Care Management Activities Performed (Check all that apply)**

- Care coordination
- Advocacy
- Authorize services
- Recruit/enroll participants
- Monitor services
- Develop plan of care
- Evaluate services/Plan of care
- Other

9. What is transition coordination, in your own words?

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10. What will be (or what are) your top 3 challenges as an MFP transition coordinator?

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11. What resources are available to assist you with linking consumers to needed services?

<input type="checkbox"/> Nurse	<input type="checkbox"/> Social Worker	<input type="checkbox"/> Manager/Director	<input type="checkbox"/> Institution/hospital discharge planner
<input type="checkbox"/> Colleague	<input type="checkbox"/> Library	<input type="checkbox"/> Internet	<input type="checkbox"/> Other
<input type="checkbox"/> State Staff	<input type="checkbox"/> Housing Information		

12. In your own words, briefly describe the Money Follows the Person (MFP) program.

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13. Based on your understanding of MFP, what training or resources do you need to be successful in your role as a transition coordinator?

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Thank you for completing this survey.