



Please take some time to complete this questionnaire. Your name, if given, and other specific information will not be shared with your project site. Information may be tabulated per project site as a summary report. This questionnaire helps us learn more about the FPS specialist job, thereby allowing us to consider the demands that are placed on FPS specialists. Your input is important to us.

When completed please mail to: Anna Stone, FPS Project Director, Division of Family Services, P.O. Box 88, Jefferson City, MO 65103.

AGENCY		DATE
BASE COUNTY (DFS PERSONNEL ONLY)	SALARY UPON LEAVING (MONTHLY) \$	
TOTAL MONTHS HAVING WORKED WITH THIS AGENCY AS A FPS SPECIALIST	NAME (OPTIONAL)	

1. TYPE OF TERMINATION AS A FPS SPECIALIST (CHECK ONE):

- LEAVING EMPLOYER
- REMAINING WITH AGENCY BUT NOT AS A FPS SPECIALIST
- TRANSFERRING TO ANOTHER FPS PROJECT SITE, TO WORK AS A FPS SPECIALIST
- PROMOTED WITHIN AGENCY TO ANOTHER FPS POSITION
- PROMOTED WITHIN AGENCY TO ANOTHER POSITION

OTHER: _____

2. WHY TERMINATION AS A FPS SPECIALIST WAS (CHECK ONE):

- VOLUNTARY
- INVOLUNTARY

3. HOW SATISFIED WERE YOU WITH YOUR JOB AS A FAMILY PRESERVATION SERVICES (FPS) SPECIALIST?

- NOT AT ALL SATISFIED
- SOMEWHAT SATISFIED
- VERY SATISFIED

COMMENTS: _____

4. AFTER WORKING AS A SPECIALIST, HOW ACCURATELY DO YOU FEEL THAT THE FPS JOB DUTIES HAD BEEN EXPLAINED TO YOU PRIOR TO BEING HIRED?

- NOT VERY ACCURATELY
- SOMEWHAT ACCURATELY
- VERY ACCURATELY

COMMENTS: _____

5. HOW COMFORTABLE DID YOU FEEL IN DOING A FPS INTERVENTION AFTER RECEIVING THE FOUR DAY LINE STAFF TRAINING?

- NOT VERY COMFORTABLE
- SOMEWHAT COMFORTABLE
- VERY COMFORTABLE

COMMENTS: _____

6. PLEASE LIST THE TRAINING ACTIVITIES THAT WERE DONE FOR YOUR ON-THE-JOB TRAINING. FOR EXAMPLE, "I SPENT A DAY IN THE FIELD WITH A CO-WORKER."

7. HOW HELPFUL WAS YOUR ON-THE-JOB TRAINING IN HELPING YOU FEEL SUPPORTED AND KNOWLEDGEABLE ABOUT LOCAL FPS PROCEDURES?

- NOT VERY HELPFUL
- SOMEWHAT HELPFUL
- VERY HELPFUL

COMMENTS: _____

8. HOW MANY OPPORTUNITIES DO YOU FEEL YOU RECEIVED WHICH ENABLED YOU TO RECEIVE FPS AS WELL AS NON-FPS SPONSORED ON-GOING TRAINING?

- OPPORTUNITIES FOR ON-GOING TRAINING WERE NOT VERY AVAILABLE
- OPPORTUNITIES FOR ON-GOING TRAINING WERE SOMEWHAT AVAILABLE
- OPPORTUNITIES FOR ON-GOING TRAINING WERE VERY AVAILABLE

COMMENTS: _____

9. IF ANY OF THE THINGS BELOW CONTRIBUTED TO THE DECISION TO NOT CONTINUE AS A FPS SPECIALIST (OR CONTINUE AS A FPS SPECIALIST IN THE SAME PROJECT SITE) PLEASE PLACE A CHECK NEAR THAT ITEM AND COMMENT BELOW:

- | | | |
|---|--|--|
| <input type="checkbox"/> WORK HOURS | <input type="checkbox"/> JOB SECURITY | <input type="checkbox"/> COMMUNITY REGARD |
| <input type="checkbox"/> SALARY | <input type="checkbox"/> CREATED DIFFICULTIES (CONFLICT) | <input type="checkbox"/> AGENCY I WORKED FOR |
| <input type="checkbox"/> CO-WORKERS | WITH MY OWN FAMILY | (NON FPS REASONS) |
| <input type="checkbox"/> FAMILIES I WORKED WITH | <input type="checkbox"/> SUPERVISOR | <input type="checkbox"/> THERAPEUTIC INTENSITY |
| <input type="checkbox"/> MY SAFETY | <input type="checkbox"/> DISTANCE TO FAMILIES HOME | <input type="checkbox"/> PLANNED CAREER MOVE |
| | | <input type="checkbox"/> OTHER (EXPLAIN) |

COMMENTS: _____

10. WHAT THINGS COULD HAVE BEEN DONE DIFFERENTLY WHICH WOULD HAVE RETAINED YOU AS A FPS SPECIALIST?

11. WHAT THINGS DID YOU LIKE ABOUT BEING A FPS SPECIALIST?
