

DSMP PLUS DATA COLLECTION CHECKLIST

The following steps are to be completed by workshop leaders unless specified otherwise.

WORKSHOP REGISTRATION		
	 Register workshop on ILPTH: Refer to the ILPTH User Guide for instructions. Set the maximum capacity to "1" to prevent online participant registration and add "Only open to participants with a doctor referral" in the public note section. Update ILPTH with any changes (e.g., dates, leaders, cancellations, etc.). Screen referrals and recruit participants by discussing program details. Register participants using your own process. 	
PREPARATION (1-2 WEEKS PRIOR TO WORKSHOP START DATE)		
	Prepare and print workshop materials (available on the <u>ILPTH Leader Resource Page</u> ; Password: <u>leaders1!</u>) Send workshop reminders to participants (email, call, text).	
SESSION 1: INDIVIDUAL ASSESSMENT (1-2 WEEKS PRIOR TO 1 ST GROUP SESSION)		
	Explain evaluation forms to participants using the Data Collection Script . Assist participants with the Registration Form , Privacy Policy Acknowledgement , Liability Waiver , Information , Assessment/Pre-Survey , and Media Release Form (if photos will be taken). Scan participant IDs and insurance cards. Provide participants with the DSMES Order Form and Physician Cover Letter (customize with your site contact info) which must be returned prior to the first group session. RD conducts assessments: Review Pre-Survey form and create the DSMP Plan and Smart Goal with the participant using the Intervention Tracking Form . If assessment is virtual, the participant completes the Pre-Survey verbally with the RD. RD provides the participant with the SMART Goal Participant Sheet . RD returns the completed Intervention Tracking and Assessment forms to the leader.	
SESSION 2: 1 ST GROUP SESSION		
	 Begin Group Session 1. Attendance requirement: No one is permitted to join the workshop after Week 1 Assessment. Follow instructions for during/after each session (detailed below). 	
DURING/ AFTER EACH SESSION		
	Complete attendance form. Print legibly or fill in electronically. Record session details the <u>Intervention Tracking Form</u> . Email Action Plan reminder to participants 3 days after each session.	



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	Follow-up with participants who missed the session or failed to return.
S	ESSION 7: LAST GROUP SESSION
	Verify attendance sheet for accuracy. In the last 15 min of the session, participants complete the <u>Post-Survey</u> .
S	ESSION 8: INDIVIDUAL FOLLOW-UP SESSION
	Provide the RD with the filled-in Intervention Tracking Form. RD collaborates with participants to create the <u>Participant Support Plan</u> (provide a copy to the participant). RD returns the Intervention Tracking Form and the completed Support Plan to the leader or Program Coordinator.
P	POST-WORKSHOP TASKS
	Program Coordinator completes the Provider Follow-Up Letter (customized with your site's information and logo), includes the participant's outcomes, attaches a copy of the completed Participant Support Plan, and sends it to the physician. Retain a copy. Program Coordinator should mark their calendar for 3-month participant follow-up. Enter workshop data into ILPTH or submit to AgeOptions. Note that some additional questions from the pre-survey are not included in ILPTH. Enter responses to those questions at this link . Refer to the <a follow-up="" href="https://lipschild.org/lipschild.o</td></tr><tr><td colspan=2>PARTICIPANT 3 MONTH FOLLOW-UP</td></tr><tr><td></td><td>Program Coordinator sends participants the Participant Follow-Up Letter and Follow-Up Survey . Submit completed surveys to AgeOptions or enter them at this link . Send all completed forms securely to Joan Fox at AgeOptions: joan.fox@ageoptions.org If all data is entered in ILPTH, email the Health Promotion Team at AgeOptions to confirm completion. Retain all participant forms.

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