

# DSMP Plus Data Collection Checklist

Workshop Paperwork: Access Participant & Leader forms on the ILPTH Leader Resource Page.

Password: **leaders1!**

## Workshop Registration

Leaders

- Register workshop- Sign in to ILPTH to register workshop.
  - **Sign-In Link** is in the upper right-hand corner on the ILPTH website: <https://ilpathwaystohealth.org>
  - Navigate to the “Classes” tab and click “Add Class” to register the workshop.
  - Contact AgeOptions to add new locations.
  - Ensure any changes are updated on ILPTH (new dates, different leaders, canceled, etc.).
- Screen referrals and recruit participants- Discuss program details.
- Register participants using your own registration process.

## 1-2 Weeks Prior to Workshop Session 1

Leaders

- Monitor ILPTH for new participant self-registrations (Sign into ILPTH, navigate to “Classes,” search for your workshop, click “view” to see registered participants).
- Prepare and print workshop documents/materials.
- Email/call/text workshop reminder to participants.

## Session 1- Individual Assessment (1-2 Weeks Prior to 1<sup>st</sup> Group Session)

Leaders

- Explain evaluation forms to participants using the [Data Collection Script](#).
- Assist participants with the [Registration Form](#), [Privacy Policy Acknowledgement](#), [Liability Waiver](#), [Insurance Authorization & Release of Information](#), and [Assessment/Pre-Survey](#).
  - If assessment with the RD is virtual, RD completes the Assessment/Pre-Survey verbally by asking the participants the questions during the one on one.
- If photos of the workshop will be taken, participants must sign the [Media Release Form](#).
- Scan participant IDs and Insurance Cards.
- Provide participants with the [DSMES Order Form](#) and [Physician Cover Letter](#). Participants need their physician to complete the DSMES Order Form, which must be returned prior to the 1<sup>st</sup> group session.
  - Customize the Physician Cover Letter with your site contact info and logo.
- No one** is permitted to join the workshop after Week 1 Assessment.

RD

- RD conducts Individual Assessment of each participant.
  - RD reviews assessment/pre-survey form and creates DSMP Plan and Smart Goal with participant using the [Intervention Tracking Form](#).
  - If assessment is virtual, RD completes the [Assessment/Pre-Survey](#) verbally.
  - RD fills out and provides the participant with the [SMART Goal Participant Sheet](#).
- Return the completed Intervention Tracking and Assessment forms to the leader.

## Session 2 (1<sup>st</sup> Group Session)

Leaders

- Group workshop Session 1 begins.
- Follow instructions for during/after each session (see next page).

## DSMP Plus Data Collection Checklist

### During/ After Each Session

Leaders

- Complete attendance form. Please print legibly or fill in electronically.
- Fill in the [Intervention Tracking Form](#): session date, attendance, participant progress, outcomes, and initial form. Document any forms received.
- Email Action Plan reminder to participants 3 days post-session.
- Contact participants who miss sessions or do not return for feedback.

### Session 7 (Last Group Session)

Leaders

- Verify that the attendance sheet is accurately completed.
- In the last 15 min of the session, participants complete the [Post-Survey](#).

### Session 8- Individual Follow-Up Session

RD

- RD creates [Participant Support Plan](#) collaboratively with each participant.
- Scan and make 2 copies of the completed Support Plan.
- Provide one copy of completed Support Plan to participant.
- Submit one copy of the Support Plan to your program coordinator, who will forward it to the participant's physician.

### After Last Session

Leaders

- Immediately after the last session concludes, enter participants, attendance, survey data and upload all legal documents to ILPTH OR send all paperwork to Joan Fox at AgeOptions: [joan.fox@ageoptions.org](mailto:joan.fox@ageoptions.org)
  - The [ILPTH User Guide](#) provides instructions for data entry.
  - If you input all data in ILPTH, email the Health Promotion Team at AgeOptions to confirm completion of the workshop. Ensure that you save the forms.
  - If you are an AgeOptions facilitator, you must send all paperwork to Joan.

P.C.

- Contact leader if you have not received the Participant Support Plan.
- Send the [Provider Follow-Up Letter](#) and a copy of the completed Participant Support Plan to the provider/physician.
  - Customize the Physician Cover Letter with your site contact info and logo.

### 3 Month Follow-Up

P.C.

- Mark your calendar for program follow-up.
- Navigate to the "Classes" tab, locate the workshop, and view participant contact info.
- Mail each participant the [Participant Follow-Up Letter](#) and [Follow-Up Survey](#).
- Once completed surveys are received, send to Joan Fox at AgeOptions: [joan.fox@ageoptions.org](mailto:joan.fox@ageoptions.org)
  - When emailing forms, send confidential.