

**Chronic Disease Self-Management Education (CDSME)
Integrated Services Delivery System Assessment Tool**

State:

Background Information (pre-populate any known information from the NCOA database and progress reports):

1. Grant Lead Agency:
2. Funding History: AoA funded since 20 _____
3. Type of CDSME Programs Offered (check all that apply):
 - Chronic Disease Self-Management Program (CDSMP)
 - Tomando de su Salud (Spanish CDSMP)
 - Arthritis Self-Management Program (English)
 - Arthritis Self-Management Program (Spanish)
 - Chronic Pain Self-Management Program (CPSMP)
 - Diabetes Self-Management Program (English)
 - Diabetes Self-Management Program (Spanish)
 - Positive Self-Management Program (HIV/AIDS)
 - Better Choices, Better Health (Online CDSMP)
 - Better Choices, Better Health for Diabetes (Online Diabetes)
 - Better Choices, Better Health for Arthritis (Online Arthritis)
 - Other CDSME, list:
4. Completer Target Goal:
 - a. Numbers of participants (as of X date):
 - b. Number of completers:
 - c. Percentage goal reached:
 - d. Participant completer rate:

System Profile (pre-populate any known information):

1. Do you have any existing organizational charts or other graphics that describe your state's structure for managing and delivering the CDSME program(s)?
 - a. Yes (if yes, obtain a copy)
 - b. No
2. Please list the key bodies that are involved in managing or directing CDSME activities at the state level:
 - a. State Unit on Aging (SUA)
 - b. State Public Health (PH)
 - c. State advisory council or other management team-- if so, name (and ask for list of members):
 - d. State coalition—if so, name (and ask for list of members):

e. Foundation/ other oversight agency—if so, name:

3. How often does your SUA and State PH agency interact and how?

4. Which agencies are responsible for the following key functions (check off all that apply for each agency)?

Table 1: Agencies Responsible for Key Functions

Function	SUA	PH	Local agencies	Other Management Body (List)
Develops plan for expanding CDSME				
Convenes state advisory council/ other management structure				
Holds CDSME license				
Coordinates master trainings				
Develops and/or coordinates marketing/ promotional activities				
Manages website				
Coordinates workshop calendar				
NCOA data entry				
Conducts fidelity and performance monitoring activities				
Coordinates evaluation studies				
Recruits major partners/ host sites				
Seeks funding support				
Provides technical support to trainers, leaders, sites				
# of staff FTEs designated to work on CDSME				
Recruit and train T-trainers/MTs/Lay leaders				
Other:				

Table 3: Partnering Organizations Not Funded through AoA

Agency with own license	Share data	Workshops are open to community	Share T-trainers/MTs/leaders	Funding source	Other key role (list)

9. Marketing, Referral , Enrollment and Registration Processes:

a. How do you target your workshop locations (e.g. are workshops targeted to a specific geographic area where there are specific target groups/ needs)?

b. How do individuals find out about CDSME workshops in your state? [insert relevant information]:

- Statewide brand name:
- Website/public calendars:
 1. Website address:
 2. Workshop calendars
- Toll-free number:
- Marketing, other resources [list]:
 - Brochures
 - Newspaper/newsletter ads
 - Face-to-face promotion
 - Referrals (see below)
 - Mass mailings
 - Agency bulletin boards
 - Other (list)

c. Who are the major entities providing ongoing referrals to CDSME workshops in your state? [check all that apply]:

- ADRC
- Tobacco Quitline
- SHIP
- Medicaid
- Health care systems/ physician practices
- Other (list):

- d. Please describe if/how are referrals tracked/is there reporting back to referring organization when participants enroll?
- e. How do consumers get enrolled into and registered for workshops (check off all that apply and insert relevant information in Comments section):
- Standard protocol or forms
 - Statewide or streamlined workshop registration process (e.g. online registration)
 - Physician referral required
 - Medicaid
 - Health care systems/ physician practices
 - Other (list)

 - Wait time is tracked/ waiting lists are routinely monitored
 - Other Comments:

10. Program Delivery Infrastructure

- a. [Insert relevant information from the NCOA Salesforce database]:

Current % of county/ state reach:

Proposed % of county/ state reach:

Number of active host organizations in database:

Number of active implementation sites in database:

Number of workshops conducted since start of grant:

- b. Do you track the number of T-trainers, master trainers and leaders and their training and workshop activity?

No

Yes

- o If yes—who does this tracking and how?

If in database, please check data elements included:

Contact information

Date trained/certified

Active/inactive status

Date(s) of workshops facilitated

Fidelity monitoring

In-services attended

- What is your current, active CDSME workforce (i.e. individuals who are actively training or conducting workshops and meeting Stanford fidelity requirements):

Number of T-trainers:

Number of master trainers:

Number of leaders:

- c. In addition to CDSME, do you cross-promote or use your CDSME distribution system to deliver any other evidence-based health promotion and disease prevention programs? Check all that apply:

- A Matter of Balance
- Active Living Every Day
- Fit and Strong!
- EnhanceWellness
- EnhanceFitness
- Program to Encourage Active Rewarding Lives (PEARLS)
- Healthy IDEAS
- Arthritis Foundation Walk with Ease Program
- Arthritis Foundation Exercise Program
- Arthritis Foundation Tai Chi Program
- Other: _____

11. Business Acumen and Financial/Other Sustainability Efforts:

- a. Do you have a completed business plan?

- Yes
- No
- In process

- b. Do you have a completed sustainability plan?

- Yes
- No
- In process

- c. Do you require your community partners to:

- Have a completed business plan?
 - Yes
 - No
 - In process

- Have a completed sustainability plan?
 - Yes

- No
- In process

d. Are any of your sites currently charging a fee for participation in a CDSME program?

- No
- Yes

- If yes, what is the range of fees:

e. What other business operations do you have in place for managing the ongoing CDSME program income and expenses [check all that apply and provide additional information where applicable- note if this has been done at the state level or by local partners]:

- Specific line item in budget for CDSME operating budget—if so, insert amount:
- Used NCOA cost calculator or other mechanism to determine program and/or per participant workshop costs-- If so, insert estimated cost or range of costs:
- Workshop fee rates established-- if so, insert rate or range:
- Break-even analysis (calculation of how many workshops and participants you need to break even with income and expenses)
- Cash flow management system established (includes accounts receivable and payable systems to track and manage revenue and payment of expenses)

f. In addition to the AoA grant funding, what other funding sources are currently supporting the health promotion and disease prevention programs offered by your state? Check all that apply and insert relevant information:

- Centers for Disease Control and Prevention, National Association of Chronic Disease Directors (CDC/NACDD) Grant
- Other CDC Grant (name):
- Other Foundation/ corporate grant (name):
- Older Americans Act Title IIID
- Other Older Americans (list title):
- Health plans (name; if receiving reimbursement, insert amount):
- Medicare
- Medicaid Waiver
- Other Medicaid (describe):
- State funds
- Other (list):

g. What are you doing that seems to be most effective in helping you sustain the CDSME activities in your state (e.g. policies you've put in place,

sustainability planning activities, financial sustainability efforts, plans for applying for grants, etc.)

12. Fidelity Monitoring and Quality Assurance (QA):

a. How does **the state** monitor fidelity to the CDSME model? Check all that apply that are promulgated by the state (not by individual host or implementation sites).

- The state has a written plan for quality assurance and fidelity monitoring that clearly designates roles, responsibilities, and timelines (If so, obtain copy)
- The state has a process for communicating fidelity monitoring and quality assurance expectations and procedures with leaders and local agencies
- The state has a process whereby representatives from the state agency(s) holding Stanford license(s) regularly monitor program fidelity
- The state has a process for requiring T-Trainers, Master Trainers or lay leaders trained as monitors to regularly observe workshops.
- The state has a process for using metrics and data to monitor performance
- The state has a process for reporting and investigating fidelity issues that arise and taking corrective action
- The state has a process for providing feedback to sites to promote continuous quality improvement
- Other procedures in place (list):

13. Are you conducting any evaluation work or planning to do so?

- No
- Yes

• If yes, describe: