PublicHealth IN THE 406

MONTANA DIABETES PROGRAM

User Manual

Revised April 2020

DISCLAIMER

EERC Disclaimer Legal Notice

State of Montana Government Disclaimer Legal Notice

This project is funded in part by Grant No. 08-07-3-01-059-0 from the Montana Department of Public Health and Human Services. The contents herein do not necessarily reflect the official views and policies of the Montana Department of Public Health and Human Services.

This publication was supported by Cooperative Agreement No. 5U58DP001977-04 from the Centers for Disease Control and Prevention. Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the Centers for Disease Control and Prevention.

The Montana Department of Public Health and Human Services attempts to provide reasonable accommodations for any known disability that may interfere with a person participating in any service, program, or activity of this department. Alternative accessible formats of this document will be provided upon request. For more information call (406) 444-6677 or TDD at 1 (800) 253-4091.

ACKNOWLEDGMENTS

The Diabetes Prevention Program and corresponding user manual were prepared for publication by:

Montana Department of Public Health and Human Services
Montana Diabetes Project

Melissa House, MBA
Ann Lanes, BAHS
Sonja Tysk, MS

University of North Dakota Energy & Environmental Research Center

Andrew Palmiscno
Sara Lahr

TABLE OF CONTENTS

ACRONYM LIST

BG	blood glucose
BMI	body mass index
CDC	Centers for Disease Control and Prevention
CRRP	cardiometabolic risk reduction profile
Ctrl	control
DPP	Diabetes Prevention Program
DPRP	Diabetes Prevention Recognition Program
dx’d	diagnosed
HDL	high-density lipoprotein
HTN	hypertension
ID	identification
IFG	impaired fasting glucose
IGT	impaired glucose tolerance
LDL-C	low-density lipoprotein cholesterol
MDPHHS	Montana Department of Public Health and Human Services
PAWS	Prevention Access Web-based System
PPS	Primary Prevention Software
Pre DM	prediabetes mellitus
QI	quality improvement
S1–26	Session
TC	total cholesterol
TRIG	triglycerides

ABOUT THE WEB-BASED DPP APPLICATION

The Diabetes Prevention Program (DPP) was a large clinical trial conducted in the United States that demonstrated a reduction in diabetes incidence by 58% in participants who took part in a lifestyle change intervention. Recently, data from the trial indicated that reductions in diabetes incidence persisted for these participants for at least 10 years.[1,2]

In 2008, the Montana Diabetes Program successfully implemented an adapted group DPP at four health care facilities.[3] Since that time, additional sites have been and continue to be added. Weight loss and physical activity results from the adapted program are similar to what was found in the DPP clinical trial.[4] To evaluate the program, each site was required to submit monthly data. In response to site feedback, the Montana Diabetes Program developed Primary Prevention Software (PPS) in 2012. PPS allowed each site to periodically, on its own schedule, provide individual feedback, group feedback and comparisons, and comprehensive reports to individual participants' referring providers. PPS was specifically designed for sites that were providing the adapted DPP curriculum but was available to all users in need of a data collection tool for prevention activities. In 2015, the PPS software program was updated to a Web-based application now simply called Prevention Access Web-based System (PAWS). The site is sponsored by the Montana Chronic Disease Prevention & Health Promotion Bureau (CDPHP). It may not be used for commercial purposes.

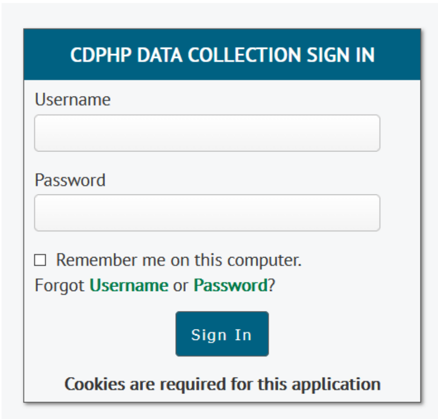
COMPUTER REQUIREMENTS

To use the DPP PAWs application, you will need:

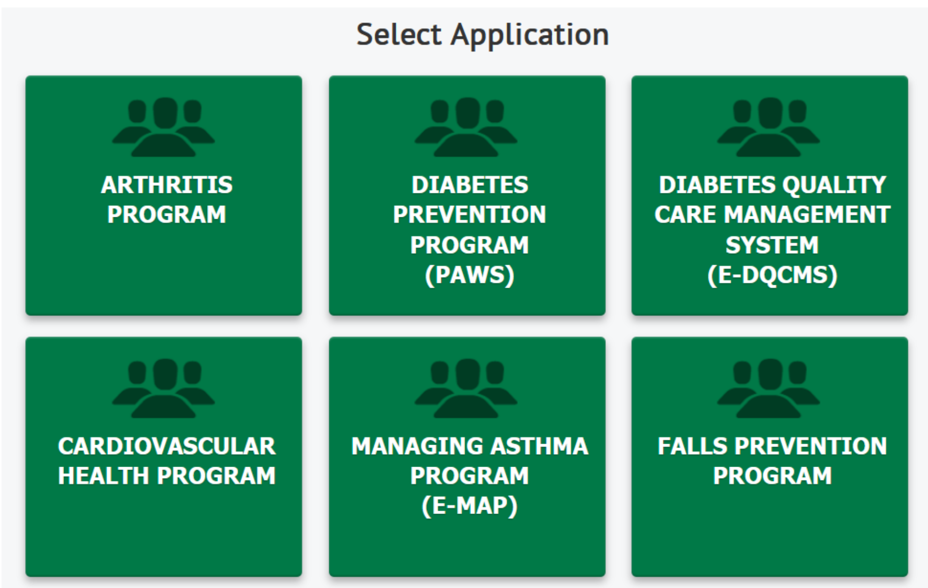
- Access to the Internet through a browser such as Firefox, Chrome, or Edge — the most recent version of any of these is recommended.
- Printer (for reports).

SIGN-IN PROCEDURE

Use your browser to access the Montana CDPHP site. The CDPHP Data Collection Sign In prompt will appear. Enter your username and password into the appropriate fields, and click on Sign In. If you have forgotten your username or password, click on Forgot Username or Password? You will be asked for your e-mail address or your username.



If you use only the DPP PAWs application, you will be taken directly there. Your username and password will also allow you to access any of the other Montana CDPHP programs.



The HELP button gives you contact e-mail addresses and phone numbers for technical support. The Help button is visible on every page of the DPP application.

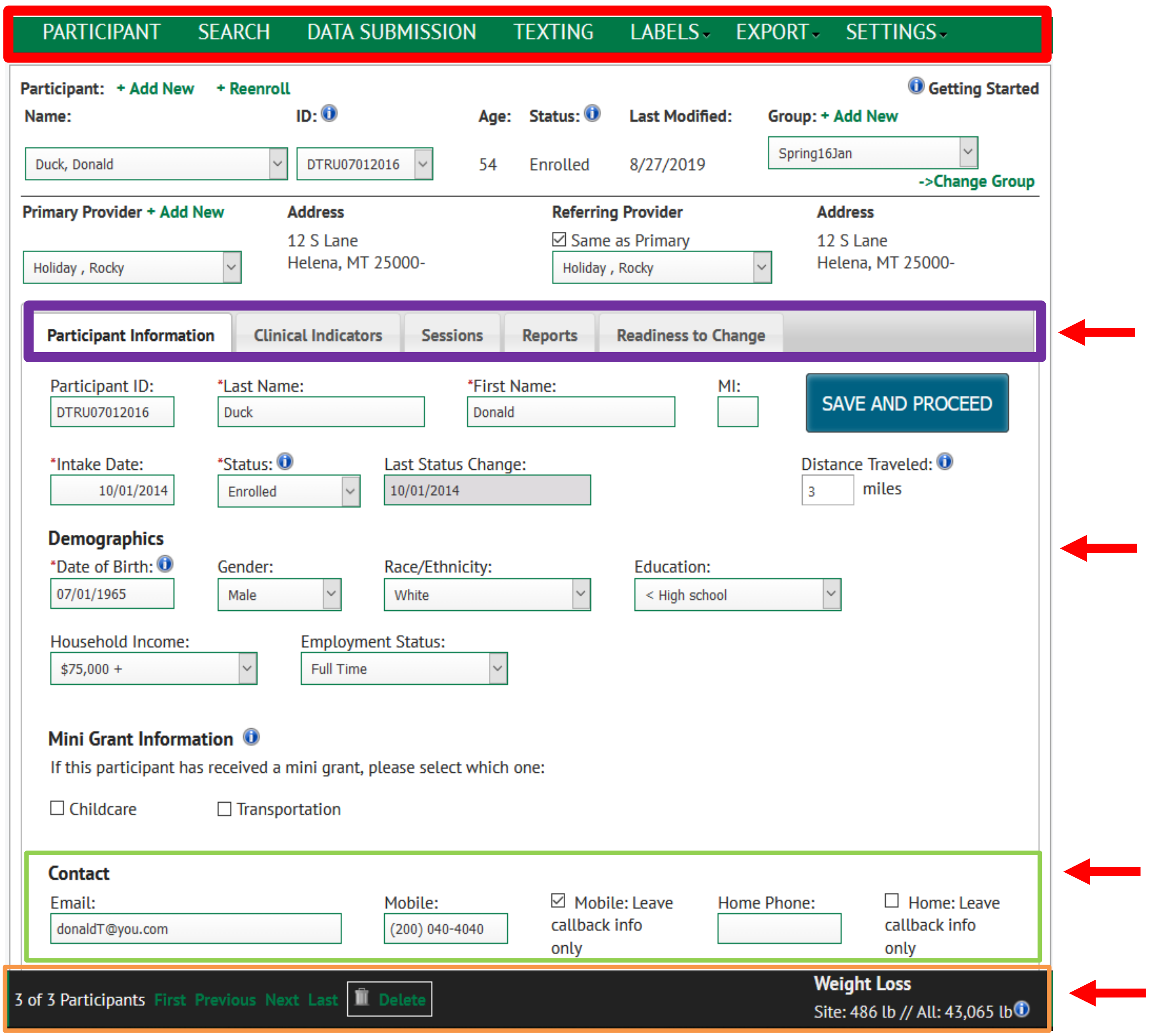
QUICK TIPS TO GET STARTED

Pages

The green menu bar at the top of the screen allows users to go back and forth between the Participant, Search, Data Submission, Labels, Export, and Settings pages.

Tabs

Only the Participant page has tabs, which allow one to move within the participant's page to Participant Information, Clinical Indicators, Sessions, Reports, and Readiness to Change. Each tab contains sections, such as Demographics or Contact information.



- The Participant page includes a black navigation bar on the bottom of the screen allowing you to move between participants within the group.

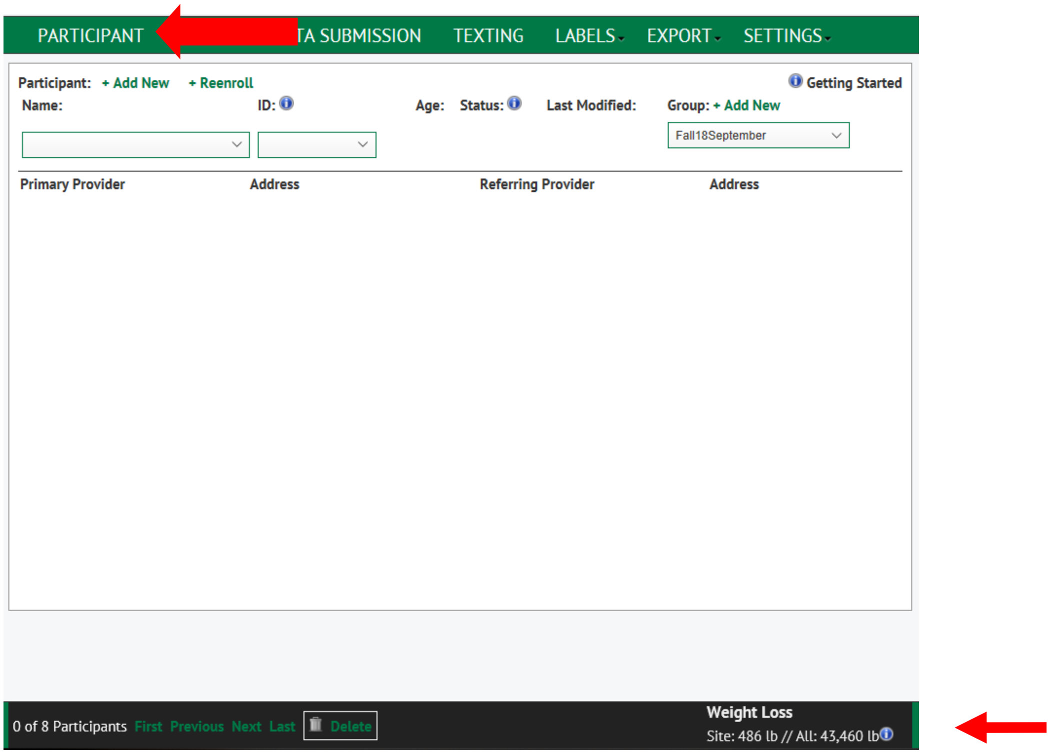
- **The trash can symbol** on the navigation bar allows you to delete the selected participant from the database. If the button is selected, you will be asked if you are sure you want to delete the participant. Click on **Yes** to permanently delete the participant or on **Cancel** to keep the participant and return to the Participant page. Deleting the participant will remove all available demographic and assessment information associated with the participant.

- The symbol is called an *info button*, and it contains helpful tips for data entry. Move your cursor over the symbol to read the information it holds.

MENU DESCRIPTIONS

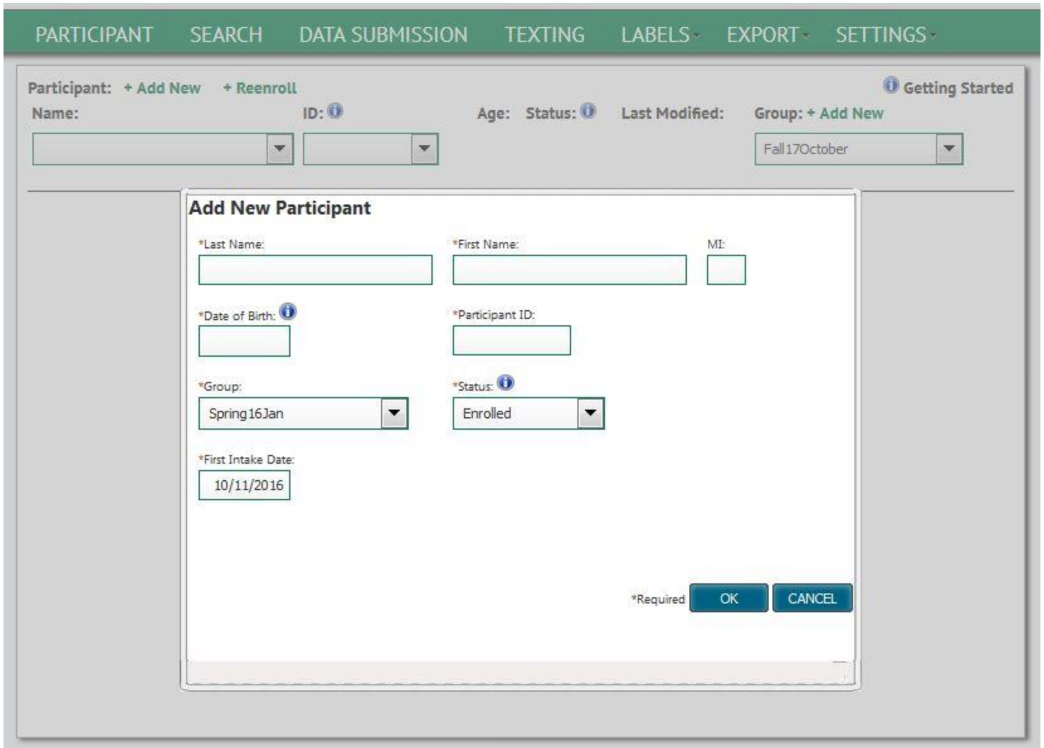
Participant

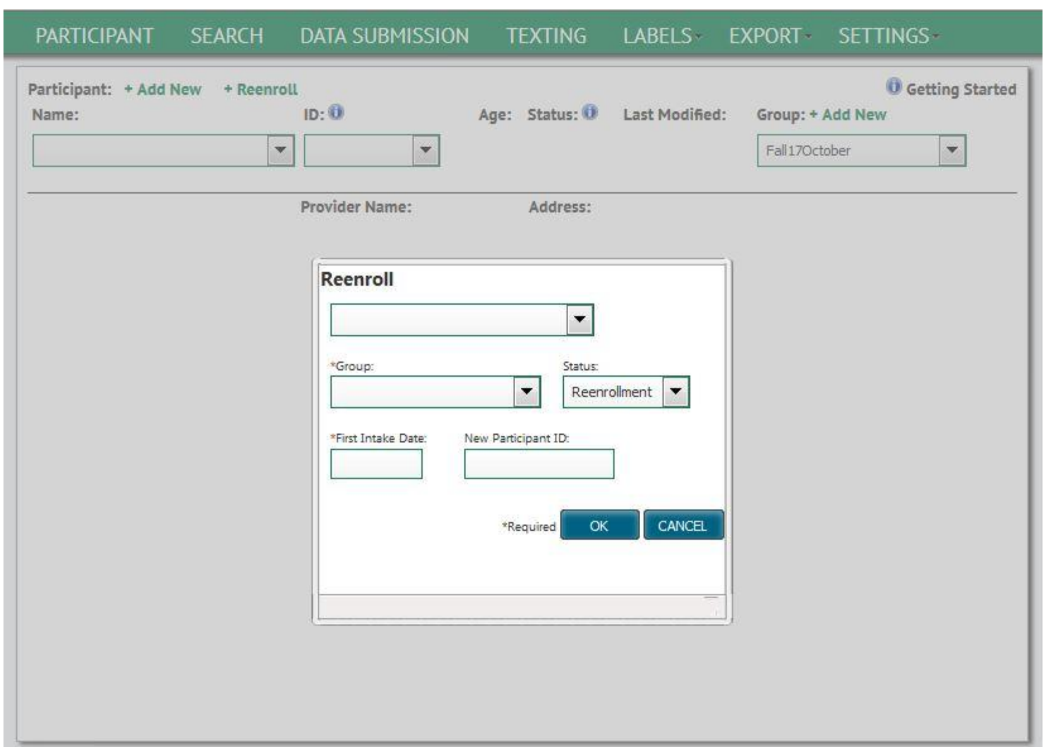
The Participant menu options are available by selecting **Participant** on the green menu bar.



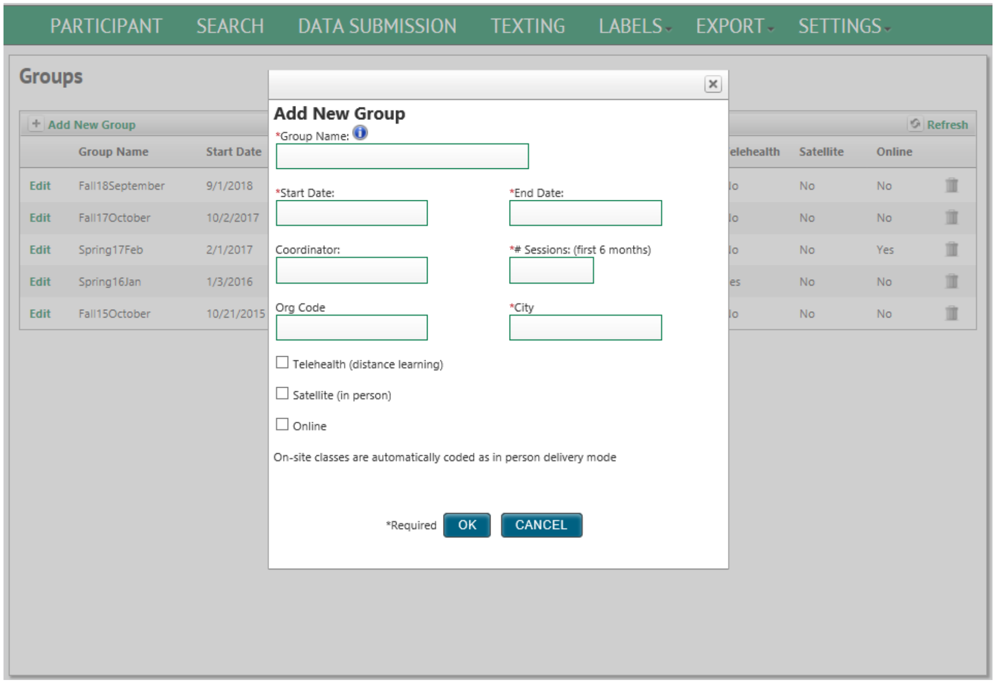
- As you enroll a participant, you are asked to provide contact information for a primary or referring provider. The primary provider information can be updated later if the provider changes.
-
- At the bottom of the Participant page is the Weight Loss counter, which keeps track of weight loss for the site and for the entire program. The weight loss shown is the total number of pounds lost starting from the first attended session minus the last attended session, excluding gained weight.

You can add a new participant by clicking on **+Add New** or reenroll an existing participant into a new group by clicking on **+Reenroll.**

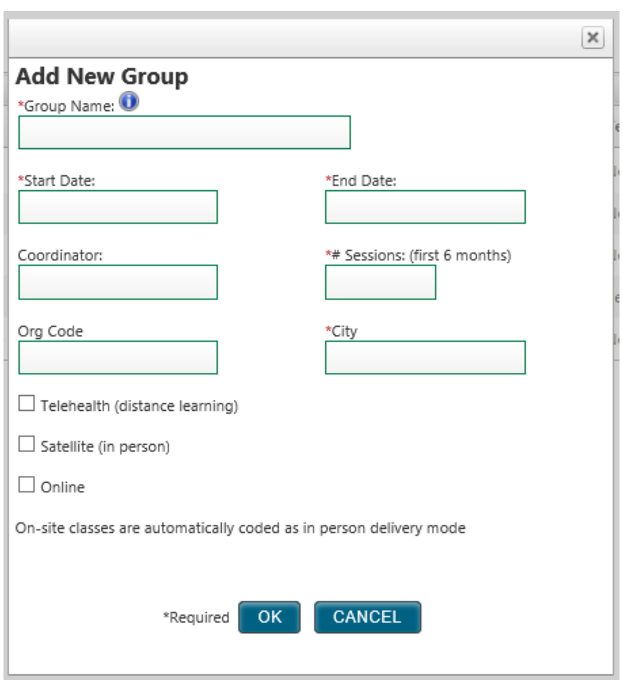




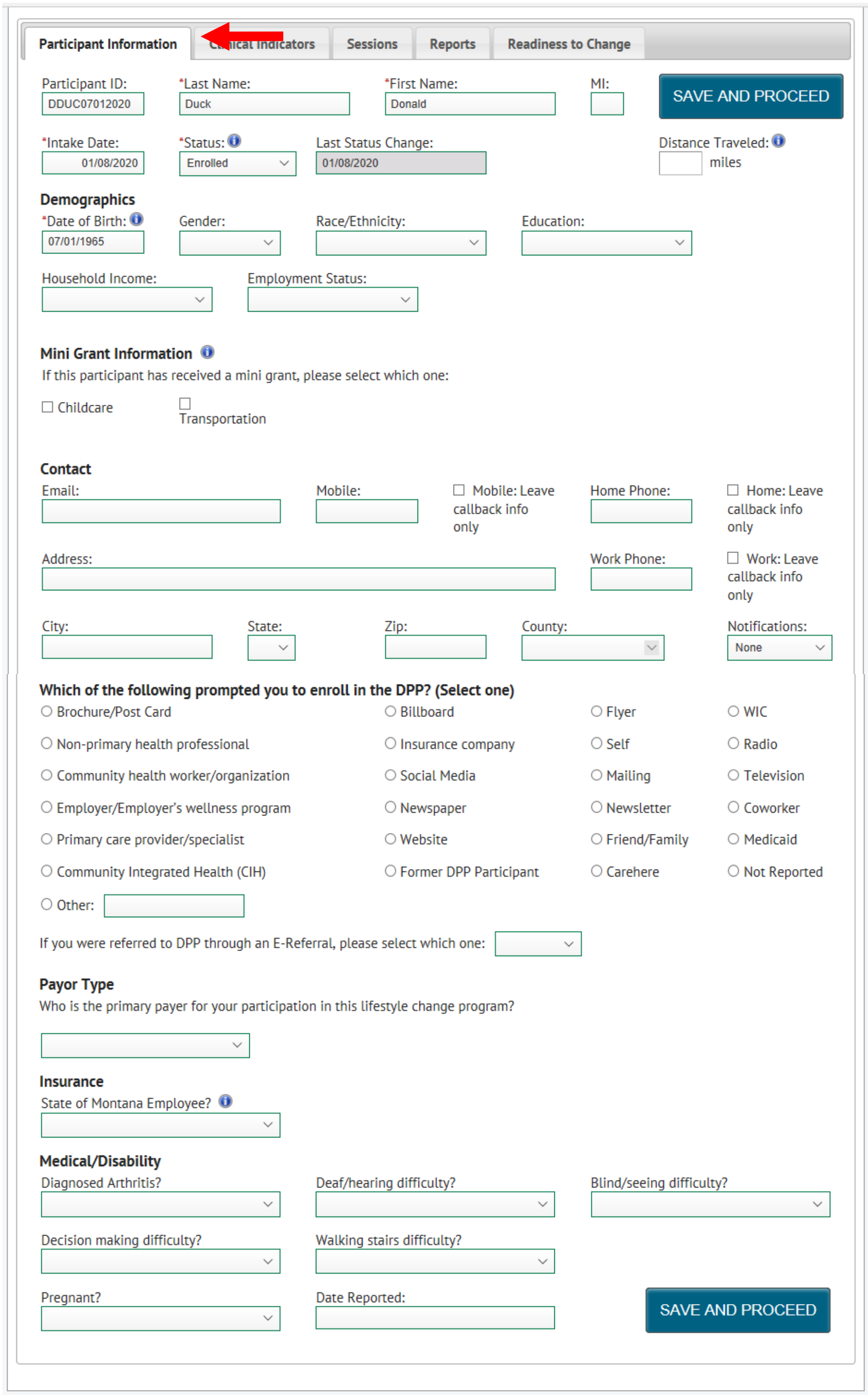
Whether adding or reenrolling, you must first assign the participant to a group. Note that a new group may need to be created for a new site.



The Group name must start with the season (Spring, January–June, or Fall, July–December), the two-digit year, and the month, followed by the text of your choice. The start date and end date must be entered. The Coordination information is optional or will be filled out by the administrator.



After adding a new participant, the **Participant Information tab** will open, allowing you to enter additional demographic information.



Participant Information | Clinical Indicators | Sessions | Reports | Readiness to Change

Participant ID: DDUC07012020
*Last Name: Duck
*First Name: Donald
MI:
SAVE AND PROCEED

*Intake Date: 01/08/2020
*Status: Enrolled
Last Status Change: 01/08/2020
Distance Traveled: miles

Demographics

*Date of Birth: 07/01/1965
Gender:
Race/Ethnicity:
Education:
Household Income:
Employment Status:

Mini Grant Information

If this participant has received a mini grant, please select which one:

☐ Childcare
☐ Transportation

Contact

Email:
Mobile:
☐ Mobile: Leave callback info only
Home Phone:
☐ Home: Leave callback info only
Address:
Work Phone:
☐ Work: Leave callback info only
City:
State:
Zip:
County:
Notifications: None

Which of the following prompted you to enroll in the DPP? (Select one)

○ Brochure/Post Card
○ Billboard
○ Flyer
○ WIC
○ Non-primary health professional
○ Insurance company
○ Self
○ Radio
○ Community health worker/organization
○ Social Media
○ Mailing
○ Television
○ Employer/Employer's wellness program
○ Newspaper
○ Newsletter
○ Coworker
○ Primary care provider/specialist
○ Website
○ Friend/Family
○ Medicaid
○ Community Integrated Health (CIH)
○ Former DPP Participant
○ Carehere
○ Not Reported
○ Other:

If you were referred to DPP through an E-Referral, please select which one:

Payor Type

Who is the primary payer for your participation in this lifestyle change program?

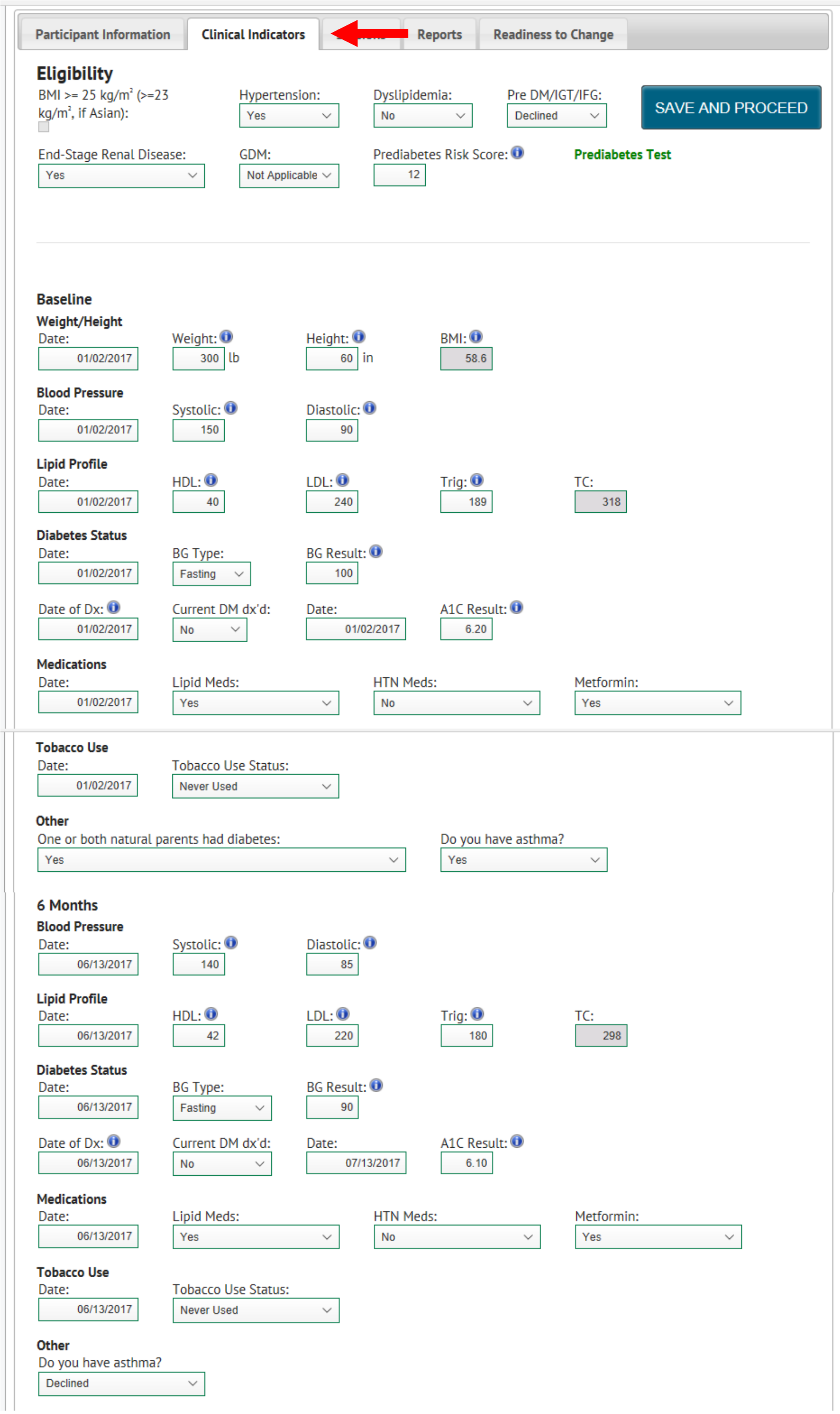
Insurance

State of Montana Employee?

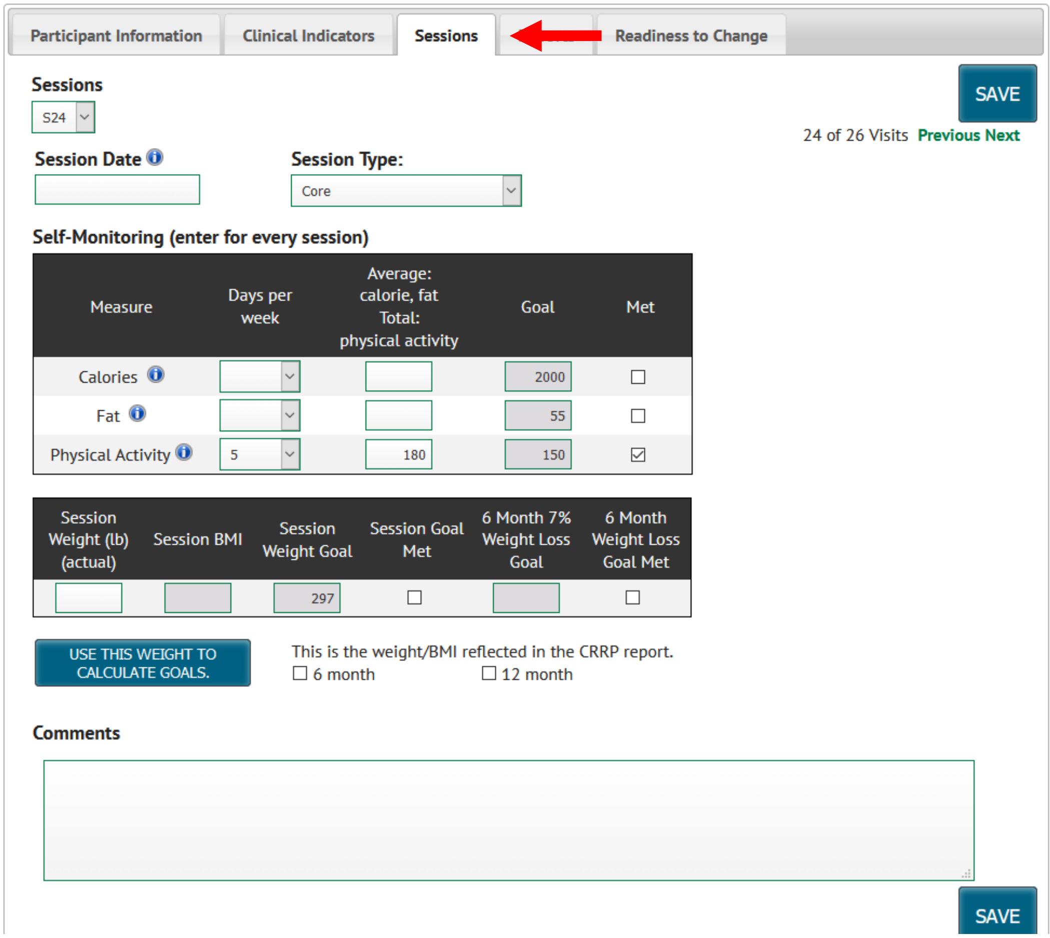
Medical/Disability

Diagnosed Arthritis?
Deaf/hearing difficulty?
Blind/seeing difficulty?
Decision making difficulty?
Walking stairs difficulty?
Pregnant?
Date Reported:
SAVE AND PROCEED

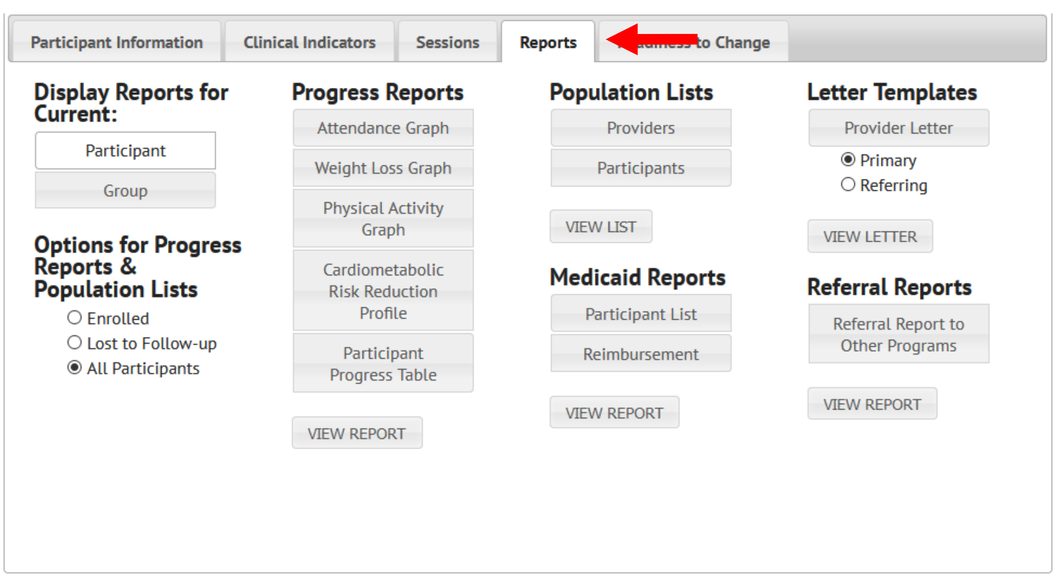
The **Clinical Indicators tab** is where participants' Baseline, 6-month, 12-month, laboratory, and additional information is entered.



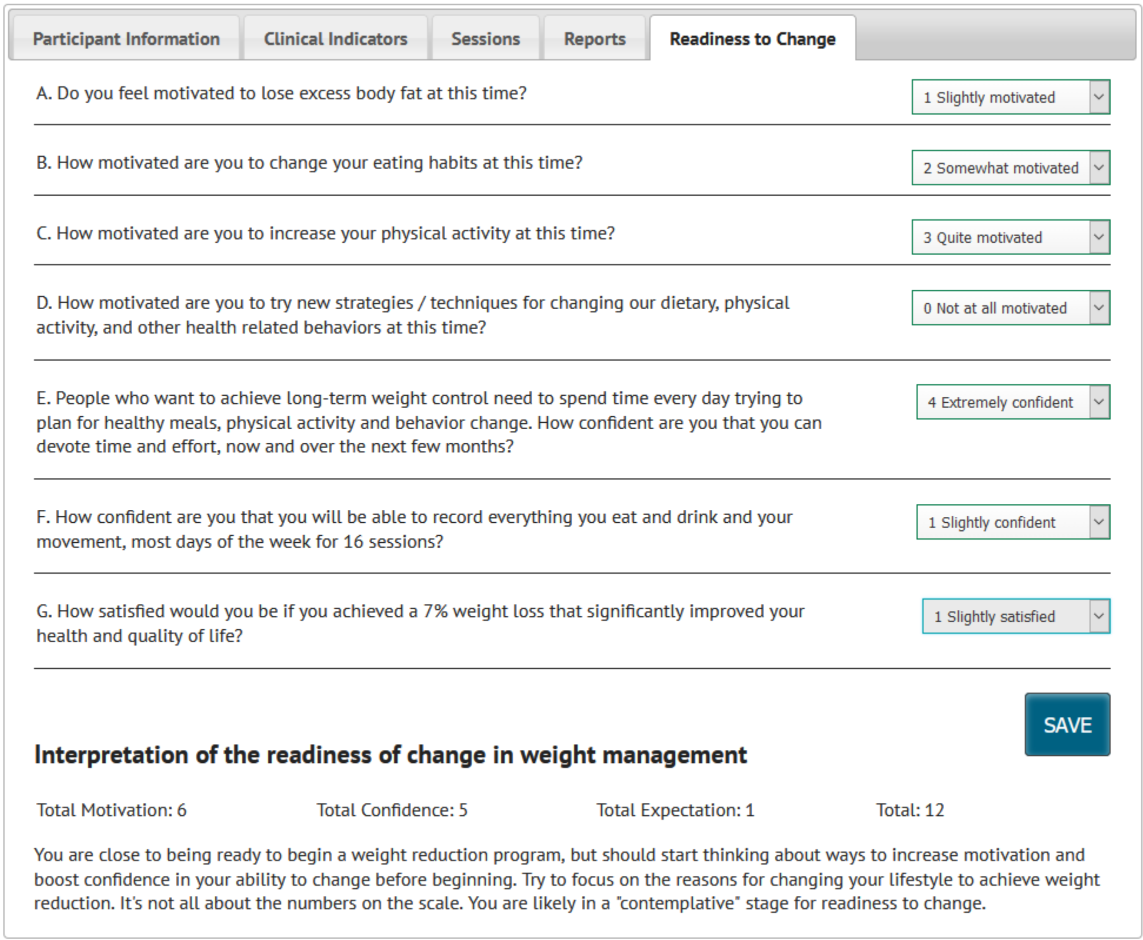
The **Sessions tab** collects information from each coaching session.



The **Reports tab** allows you to create and view all reports for a single participant or group. The Letter Templates field allows you to send a letter to participants' primary or referring provider.



The **Readiness to Change tab** records and scores participants' motivation, confidence, and expectation levels regarding weight management at this point in the program and interprets readiness to begin or continue in this weight management program.



Participant Information | Clinical Indicators | Sessions | Reports | **Readiness to Change**

A. Do you feel motivated to lose excess body fat at this time?	1 Slightly motivated
B. How motivated are you to change your eating habits at this time?	2 Somewhat motivated
C. How motivated are you to increase your physical activity at this time?	3 Quite motivated
D. How motivated are you to try new strategies / techniques for changing our dietary, physical activity, and other health related behaviors at this time?	0 Not at all motivated
E. People who want to achieve long-term weight control need to spend time every day trying to plan for healthy meals, physical activity and behavior change. How confident are you that you can devote time and effort, now and over the next few months?	4 Extremely confident
F. How confident are you that you will be able to record everything you eat and drink and your movement, most days of the week for 16 sessions?	1 Slightly confident
G. How satisfied would you be if you achieved a 7% weight loss that significantly improved your health and quality of life?	1 Slightly satisfied

SAVE

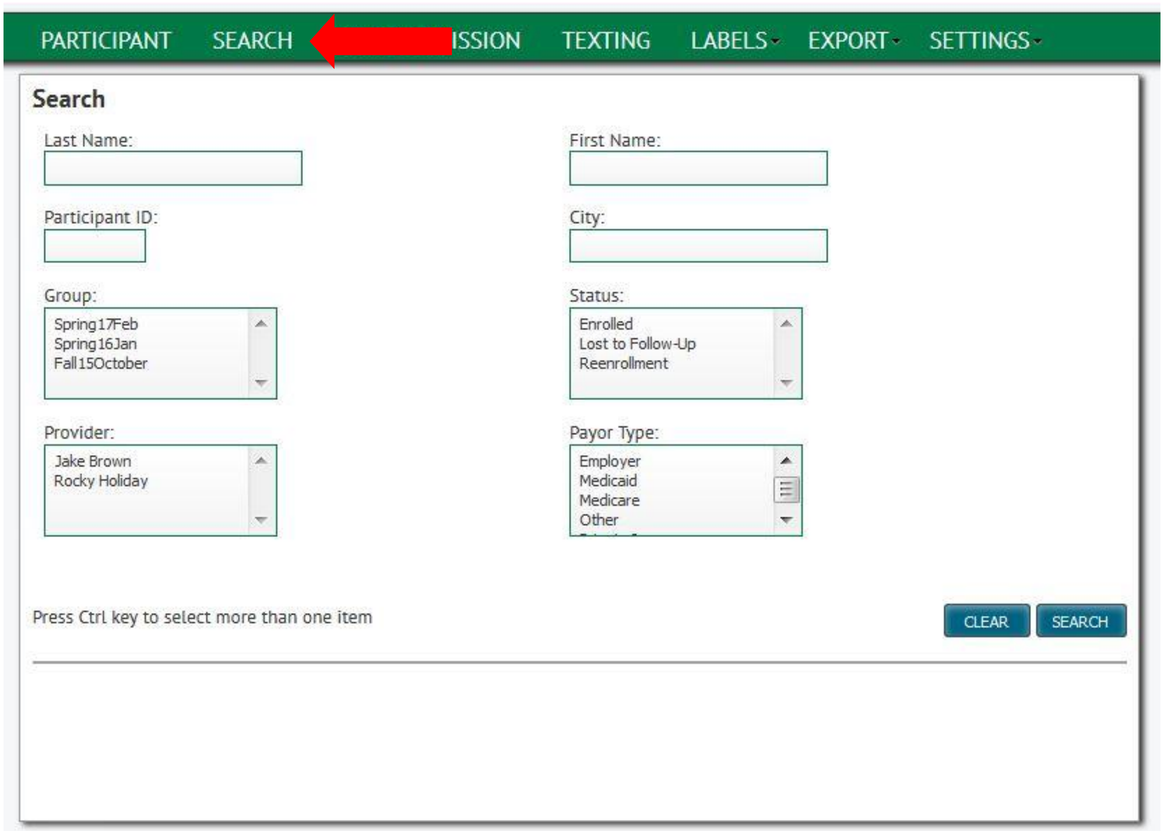
Interpretation of the readiness of change in weight management

Total Motivation: 6 Total Confidence: 5 Total Expectation: 1 Total: 12

You are close to being ready to begin a weight reduction program, but should start thinking about ways to increase motivation and boost confidence in your ability to change before beginning. Try to focus on the reasons for changing your lifestyle to achieve weight reduction. It's not all about the numbers on the scale. You are likely in a "contemplative" stage for readiness to change.

Search

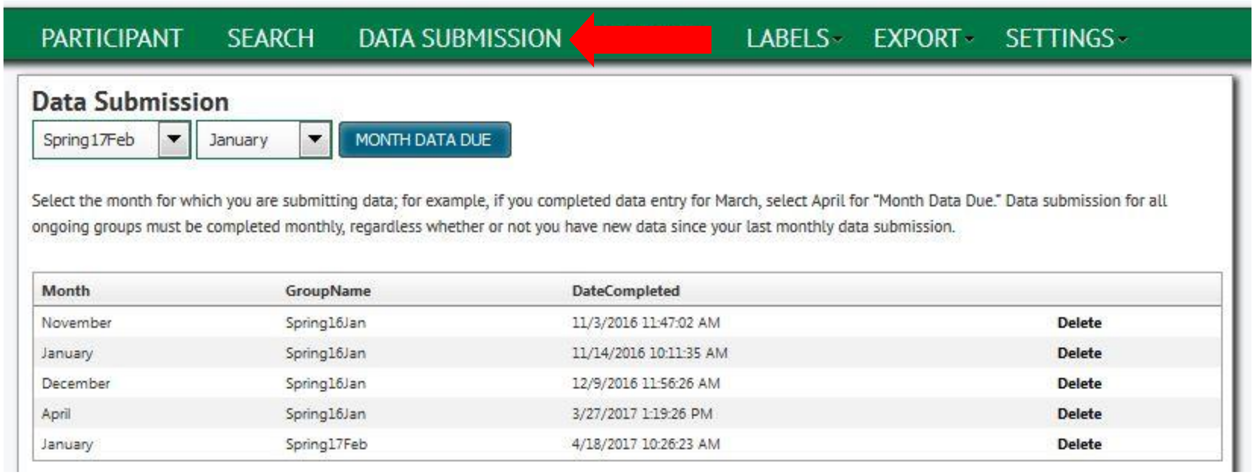
The Search page allows you to search for a participant or a group by Last Name, First Name, Participant ID no., City, Group, Status, Provider, or Payor Type.



Data Submission

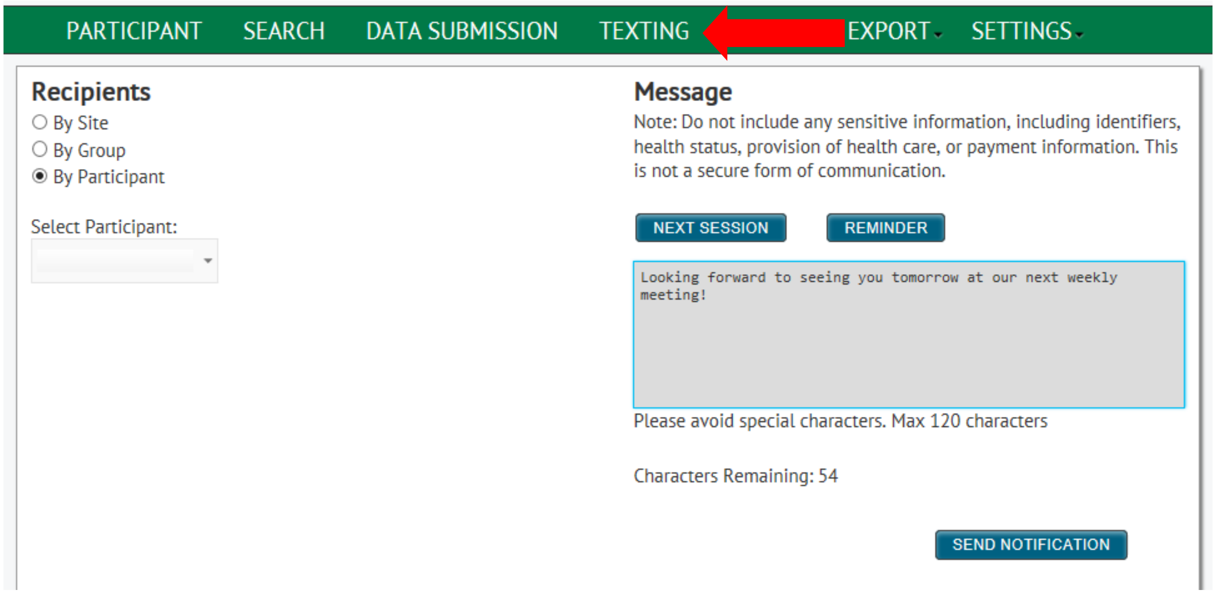
The Data Submission page allows you to submit when you have completed all data entry for a group for the month. The submission for all ongoing groups must be submitted monthly to the Montana Diabetes Program, regardless whether you have or do not have new data since your last monthly data submission (this may occur when you transition to monthly sessions). First, use the drop-down menu to select the group. Then select the month for which you are submitting data; for example, if you are submitting data for March submission due date, select March for “Month Data Due.”

Note: Coaches can delete only their own data submissions if necessary. For example, if you already submitted the data to the State on January 3 (ahead of the January 10 deadline) but have additional information, this action will clear the January 3 submission and allow you to resubmit the data with the added information.



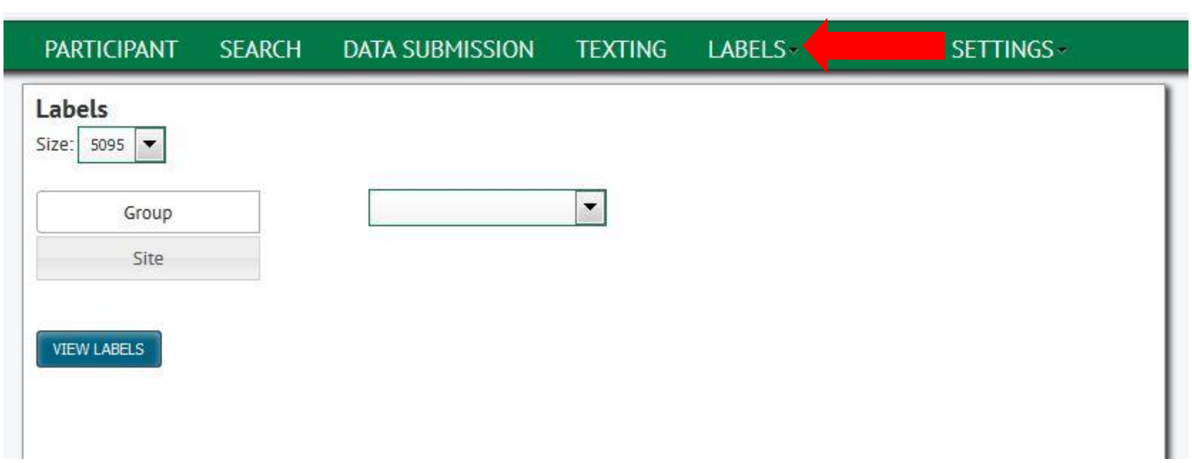
Texting

Participants can choose to receive alerts, reminders, or other messages from their coach by selecting Texts, E-Mails, or Texts & E-Mails (rather than None) in the Notifications field under the Contact section on the Participant Information form on the Participant page. Coaches can send texts, e-mails, or both to participants according to their chosen preference by site, by group, or individually. Click on the Next Session or Reminder buttons for pregenerated reminders about the next meeting, or type your own message (120-character limit). Texts and e-mails should be used for nonconfidential information only.



Labels

Address labels can be created by selecting **Labels** on the menu bar and selecting Provider or Participant for the appropriate address list. You can create and print Avery brand address labels for participants or providers with the Labels tool. Just select the label size: 5095, 5160, 5161, or 5162. Export the participants or providers address file to a Word or PDF file to print labels.



Export

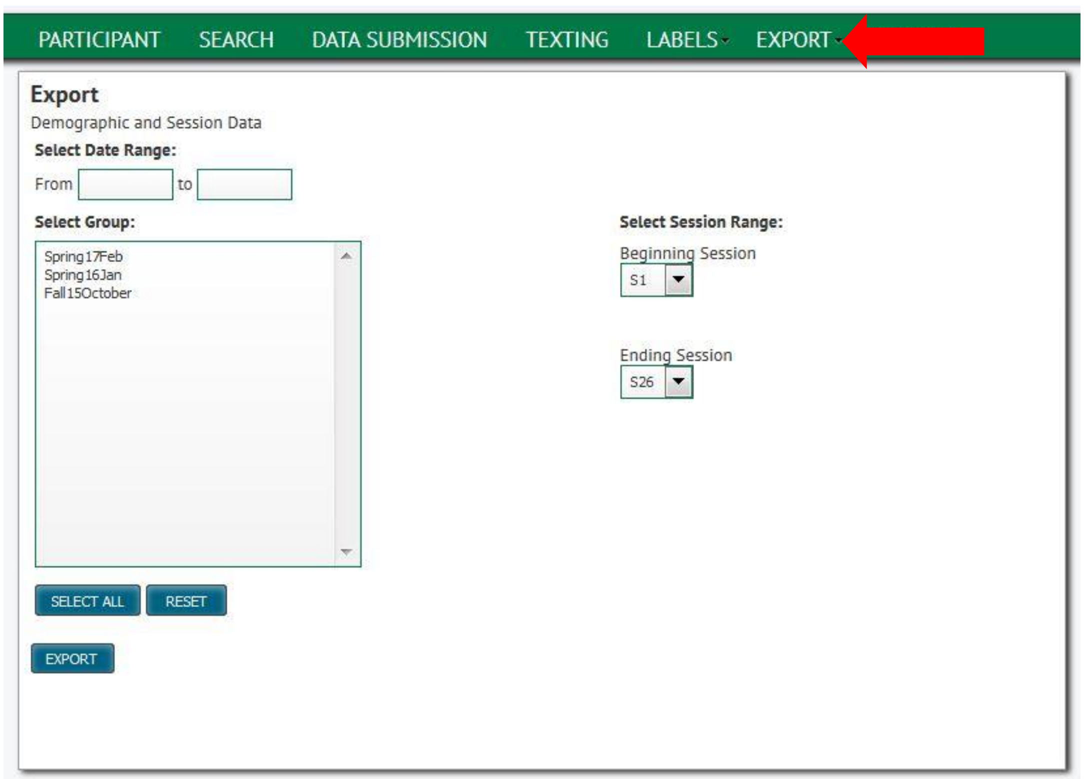
You can export group data to an Excel report file, which will appear in your browser downloads. Click on Export on the menu bar, and select from three options:

1. Demographic and Session Data
2. Demographic and Session Data with Identifiers
3. CDC Recognition Data

Demographic and Session Data and Demographic and Session Data with Identifiers are essentially the same file for a particular group at one particular site; however, the file "with Identifiers" includes participants' identifying information for coaches' benefit. Administrators are only able to access the Demographic and Session Data file, which has all identifying information removed.

CDC Recognition Data are coded in accordance to the 2015 CDC's Standard and Operating Procedures data dictionary, p.18 (https://www.cdc.gov/diabetes/prevention/pdf/dprp-standards.pdf). This export contains all participants enrolled in your class regardless of CDC's eligibility criteria for recognition.

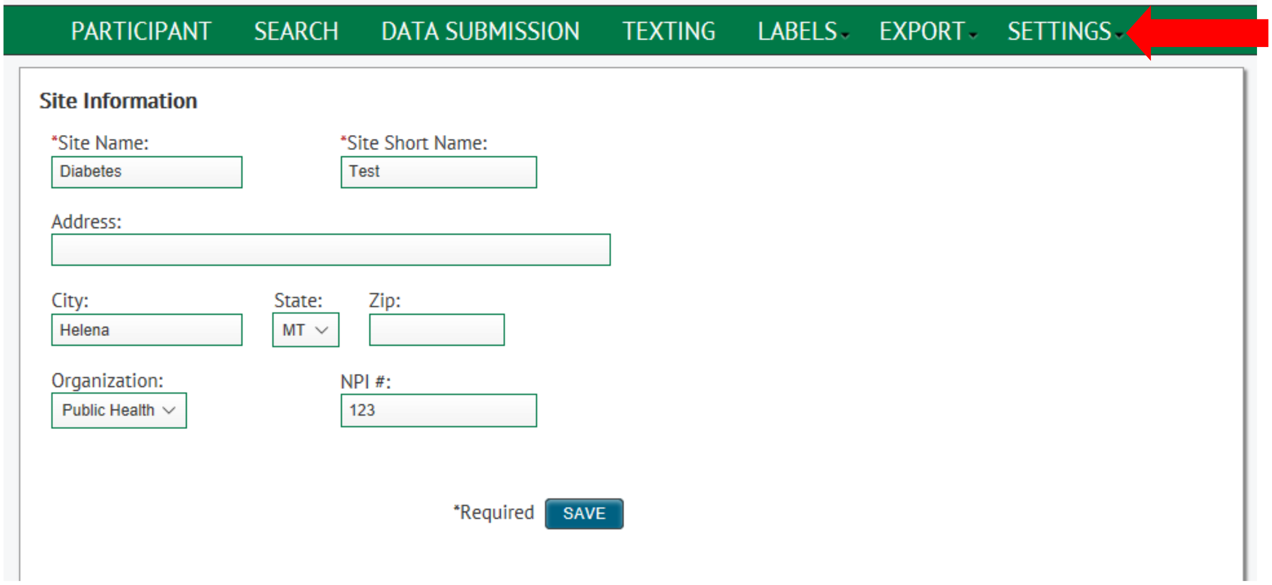
All groups from a site are listed in the Select Groups field. You can select one group in the field. Use the Ctrl key on your keyboard to select more than one group. If you want data for more than one group or you want for a specific time period, Select Date Range allows you to filter which groups you get based on a range of dates. Select Session Range allows you to select a beginning and an ending session from Session (S) 1 to S26. Buttons at the bottom allow you to Select All groups, Reset the search to remove all filters previously chosen, and to Export the data to an Excel file.



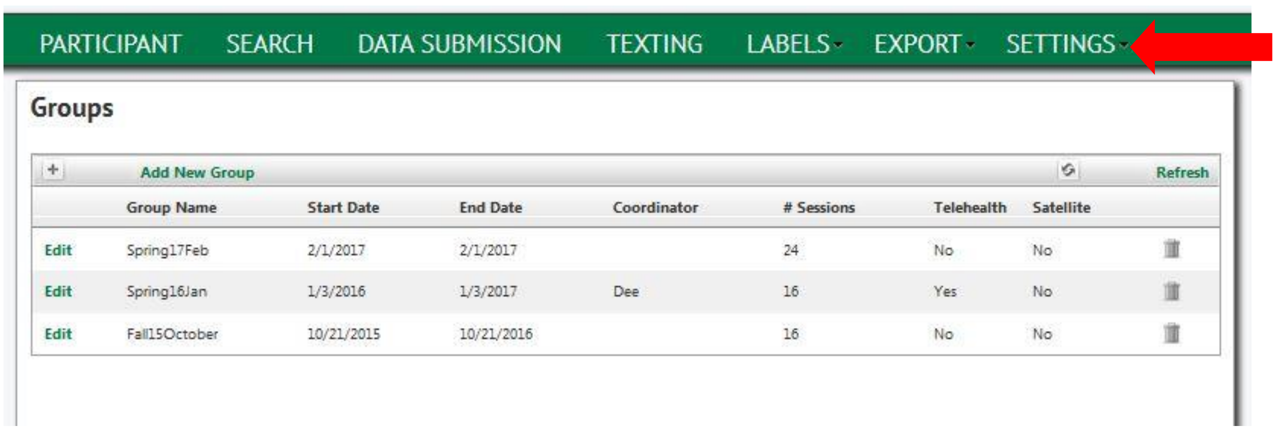
Settings

Clicking on Settings on the menu bar gives you access to setting choices where information can be changed for Site Information, Groups, Provider/Physician, and Letter Templates. Fields marked with an asterisk must be completed.

Site Information allows you to change the address for a site. When you have completed your changes, click on Save.

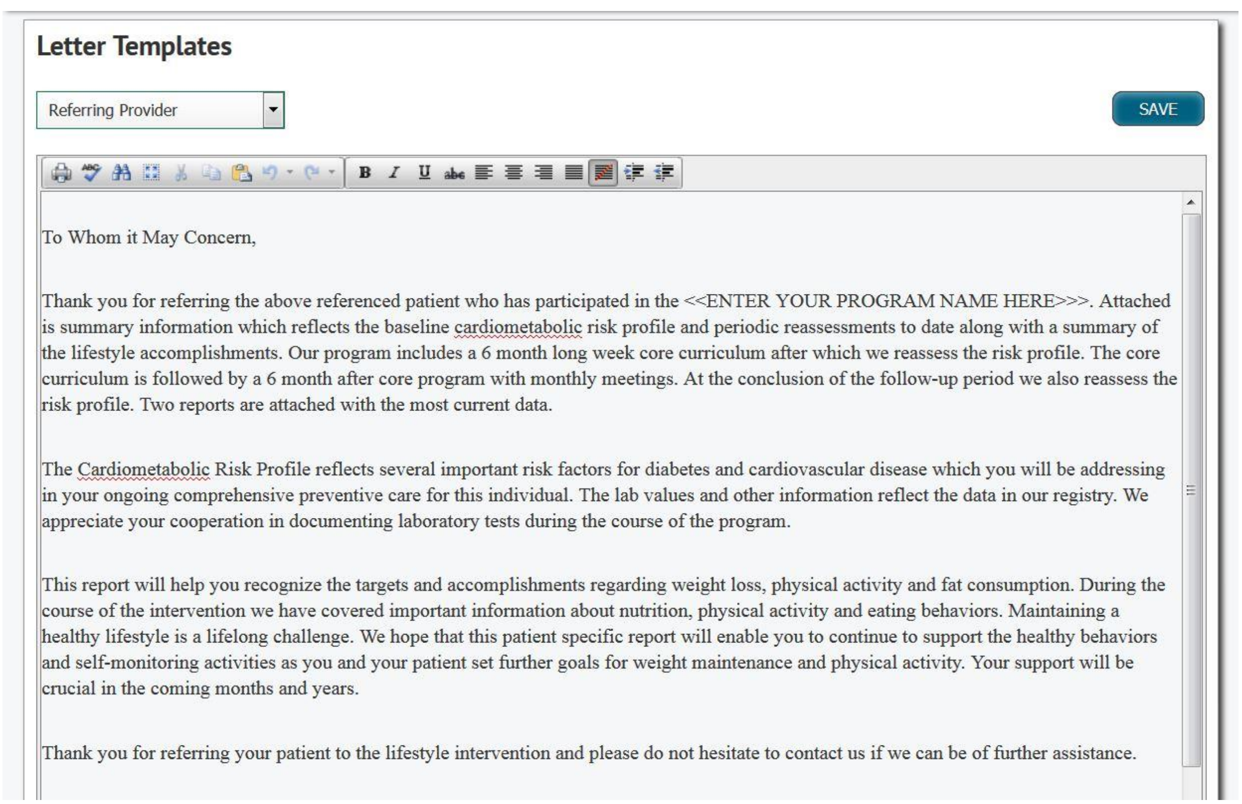


Groups allows you to add a new group or edit information (Group Name, Start Date, End Date, Coordinator, and Telehealth or Satellite delivery). This information is linked to the Participant Information tab and appears there after it is added. Note: Click on the trash can symbol to delete a group. However, if any participant remains in a group, the group cannot be deleted until you first delete the participant(s) associated with the group.



Provider/Physicians allows you to add, delete (using the trash can), or edit doctor or provider name, address, and status information. This information also appears on the Participant Information tab on the Participant page.

Letter Templates allows you to draft and save a letter to referring providers that then appears in the Reports tab on the Participant page.



DATA ENTRY

Participant Information Tab

The demographics for a participant can be entered by clicking on the Participant Information tab on the Participant page. The Participant Information tab allows you to enter information about a specific new or enrolled participant and contains the following fields. Required fields in the DPP application are denoted with an asterisk (*****).

For a new participant: First click on +Add New. You will be taken to the Add New Participant screen, where you should first select the desired group name from the **Group** drop-down menu or create a new group. Fill in the required information fields, and click Okay. Once added, the participant's ID is automatically generated.

NOTE: A Save and Proceed button appears on each tab. Be sure to click on this button after all information has been entered for that tab. Switching between tabs does not save the information. **You must click on the Save and Proceed button**.

NOTE:

- The ID number is assigned automatically, so the ID field fills automatically with the assigned number.
- Status: Select Reenrollment for repeat participants only. If a person quits and rejoins the same class, change the status from Lost to Follow-Up to Enrolled, and continue with data entry for that session.
- Distance Traveled is the mileage one way.
- Date of Birth – Fill in the date of birth in this format: MM/DD/YYYY.
- If Date of Birth is unknown, fill in 09/09/9999.

To reenroll a participant, click on +Reenroll. You will be taken to the Reenroll screen, where you should select the participant's name and new group. See the next section for how to reenroll a participant.

To view an enrolled participant: Filter the screen to view a specific group of participants by selecting the desired group name from the **Group** drop-down menu (upper right-hand corner). Different participants can be viewed in this screen by clicking through the records navigation bar at the bottom of the screen or by selecting a participant's name or ID number in the drop-down menus at the top of the screen.

NOTE: Filter the screen with a different group of participants by selecting another item from the **Group** drop-down menu.

Provider Name – Select the participant's primary provider from the drop-down list. If the provider is not listed, click on +Add New. You will be taken to the Add New Provider entry screen. Once information is added to this form, click on Ok, and the provider/physician will always be available on the drop-down list. The provider's address is displayed on the Demographics screen.

Participant Information Tab

- **ID** – The participant's ID number is filled automatically when the participant is enrolled.
- **Last Name*** – Enter the participant's last name.
- **First Name*** – Enter the participant's first name.
- **MI** – Enter the participant's middle initial.
- **First Intake Date*** – The First Intake Date is the day the baseline data for the participant's height and weight were measured. Click on the calendar icon to select the date from the calendar or enter it manually with digits in each of the day, month, and year fields (DD/MM/YYYY).
- **Status*** – The drop-down menu defaults to **Enrolled** and autofills the date of entry. This date cannot be changed and is used to note when the new participant status (Enrolled, Lost to Follow-Up, Reenrolled) changes. Select **Lost to Follow-Up** if the participant has not attended any sessions and has not responded to any correspondence within 3 weeks.
- **Last Status Change –** Displays the last status update. This field is read-only and will default to the current date.
- **Distance Traveled –** Enter the (one-way) miles the participant traveled to the coaching session.

Demographics

- **Date of Birth*** – Enter the participant's date of birth manually, with digits in each of the day, month, and year fields (DD/MM/YYYY).
- **Gender** – Select F for female or M for male from the drop-down menu.
- **Race/Ethnicity** – Select the participant's race from the drop-down menu.
- **Education** – Select the participant's education level from the drop-down menu.
- **Household Income** – Select the participant's household Income from the ranges in the drop-down menu.
- **Employment Status** – Select the participant's employment status from the drop-down menu.

Mini Grant Information

If the participant has received a mini grant for Childcare or for transportation, check the appropriate box. Skip this section if your site has not received a mini grant.

Contact

- **E-Mail** – Enter the participant's e-mail address.
- **Mobile** – Enter the participant's mobile phone number with area code. Check the box if the participant wants only callback information left in a message at this number.
- **Home Phone** – Enter the participant's home phone number with area code, and check the box if the participant wants only callback information left in a message at this number.
- **Address –** Enter the participant's residential street address.
- **Work Phone** – Enter the participant's work phone number with area code, and check the box if the participant wants only callback information left in a message at this number.
- **City –** Enter the participant's city of residence.
- **State –** Select the participant's two-letter state/province from the drop-down list.
- **Zip –** Enter the participant's zip code.
- **County** – Select the participant's county of residence from the drop-down list.
- **Notifications –** Participants can choose to receive alerts, reminders, or other messages from their coach by selecting Texts, E-Mails, or Texts & E-Mails (rather than None) in the Notifications field. Coaches can send texts, e-mails, or both to individual participants, all participants at a particular site, or all participants in a particular group. Texts and e-mails should be used for nonconfidential information only.

Which of the following prompted you to enroll in the DPP?

This section asks you to check the boxes for all ways the participant reports having heard about and considered enrolling in the DPP.

Payor Type

Select how the program fee is being paid from the drop-down menu.

Insurance

Select from the drop-down menus for State of Montana Employee? If the participant has Medicaid, you must enter the Medicaid ID.

Medical/Disability

Select from the drop-down menus for these specific medical or disability issues:

- Diagnosed Arthritis
- Deaf/hearing difficulty
- Blind/seeing difficulty
- Decision making difficulty
- Walking stairs difficulty

- Pregnant
- Add the Date Reported for the medical/disability issue by filling in the 8-digit date field or selecting from the date calendar.

Clinical Indicators Tab

The Clinical Indicators tab is an intake/periodic assessment page that allows you to record the participant's eligibility criteria and baseline/periodic assessments. There are three assessments: baseline, 6 months, and 12 months.

As on all tabs, different participants can be viewed in this tab by clicking through the records navigation bar at the bottom of the screen or by selecting a participant's name or ID number in the drop-down menus at the top of the screen. Filter the screen to view a specific group of participants by selecting the desired group name from the **Group** drop-down menu.

Eligibility Criteria

- Body mass index (BMI) greater than or equal to 25 kg/m^2 (greater than or equal to 23 kg/m^2 if Asian) is automatically calculated and checked based on the participant's baseline weight and height. It does not calculate if the participant is pregnant.

- Select the appropriate response (Yes, No, Declined, or Missing/Unknown) from the drop-down menu for each criterion description to record whether or not the participant has the following conditions:

  - Hypertension (HTN) – Select Yes when blood pressure is ≥140/90 mmHg.

  - Dyslipidemia – Select Yes when triglycerides (TRIG) are >150 mg/dL, low-density lipoprotein cholesterol (LDL-C) is >130 mg/dL, or high-density lipoprotein (HDL) is <40 mg/dL for men and <50 mg/dL for women.

  - Prediabetes mellitus, impaired glucose tolerance, or impaired fasting glucose (Pre DM/IGT/IFG) – Select Yes when 1) A1C is 5.7% – 6.4% (Pre DM), 2) fasting plasma glucose is 100–125 mg/dL (IFG), or 3) 2-hr post 75-g oral glucose challenge is 140–199 mg/dL (IGT).

  - Prediabetes risk score – Record the participant's CDC Prediabetes Screening Test score. This screening test is a simple questionnaire used to identify people at risk for undiagnosed diabetes and can be found in the CDC Diabetes Prevention Recognition Program Standards and Operating Procedures at www.cdc.gov/diabetes/prevention/recognition or by clicking on the Prediabetes Test link.

  - The data entry had preset ranges to allow for more accurate data entry. If by mistake you enter a value that is not reasonable, a message will appear asking you to enter the correct value. In some instances, there might be a participant with an extremely low or high lab value. Please contact the State representative to assist you with this issue.

- If the participant had gestational diabetes, select Yes from the GDM drop-down menu.

Baseline, 6-month, and 12-month Assessments and Follow-Up Weight

The 6-month and 12-month follow-up assessments ask for data for Blood Pressure, Lipid Profile, Diabetes Status, Medications, and Tobacco Use. Enter the date and the weight in pounds for the Follow-Up Survey Weight.

Assessments – Each participant can have up to three periodic assessments (Baseline, 6 months, and 12 months) and a follow-up weight survey. All assessments will be displayed when the tab is first accessed.

- **Date –** For each assessment criterion, record the test date by clicking on the calendar icon to select the date from the calendar or enter it manually with eight digits in the day, month, and year fields (DD/MM/YYYY).

- **Criteria –** The Clinical Indicators tab contains the following assessment criteria. Several indicators have maximum or minimum values or a value to be entered if the assessment is unknown. These values are given in parentheses:

  - **Weight/Height** – Enter weight and height. BMI will automatically be calculated based on these values, excluding pregnant women.

  - **Blood Pressure –** Enter values for systolic (unknown: 999, max: 250, min: 60) and diastolic (unknown: 999, max: 200, min: 40).

  - **Lipid Profile –** Enter values for HDL (unknown: 999, max: 200, min: 5), LDL (unknown: 999, max: 350, min: 15), and TRIG (unknown: 999, max: 750, min: 15). The total cholesterol (TC) field will automatically be calculated once valid results are entered for the HDL, LDL, and TRIG fields. TC = HDL + LDL + (TRIG/5)

  - **Diabetes Status –** Select the Blood Glucose (BG) Type (2-hour Oral Glucose Tolerance Test, Fasting, Random) from the drop-down menu, and enter the BG result (unknown: 999, max: 500, min: 40). Select from the drop-down menu whether or not the participant has been diagnosed (dx'd) with DM and the approximate date of diagnosis. Enter the A1C Result (unknown: 99.9, max: 20, min: 4) in the correct field, and enter the date of testing.

  - **Medications –** Fill in the Date first used and select from the drop-down menu for Lipid Meds use, HTN Meds use, Metformin use, and record whether or not the participant is on medication for PTSD, pain, anxiety, mental illness, sleeplessness, or depression.

  - **Tobacco Use –** Fill in the date of first use and select Current User if the participant is using tobacco, Former User if the participant quit, or another response.

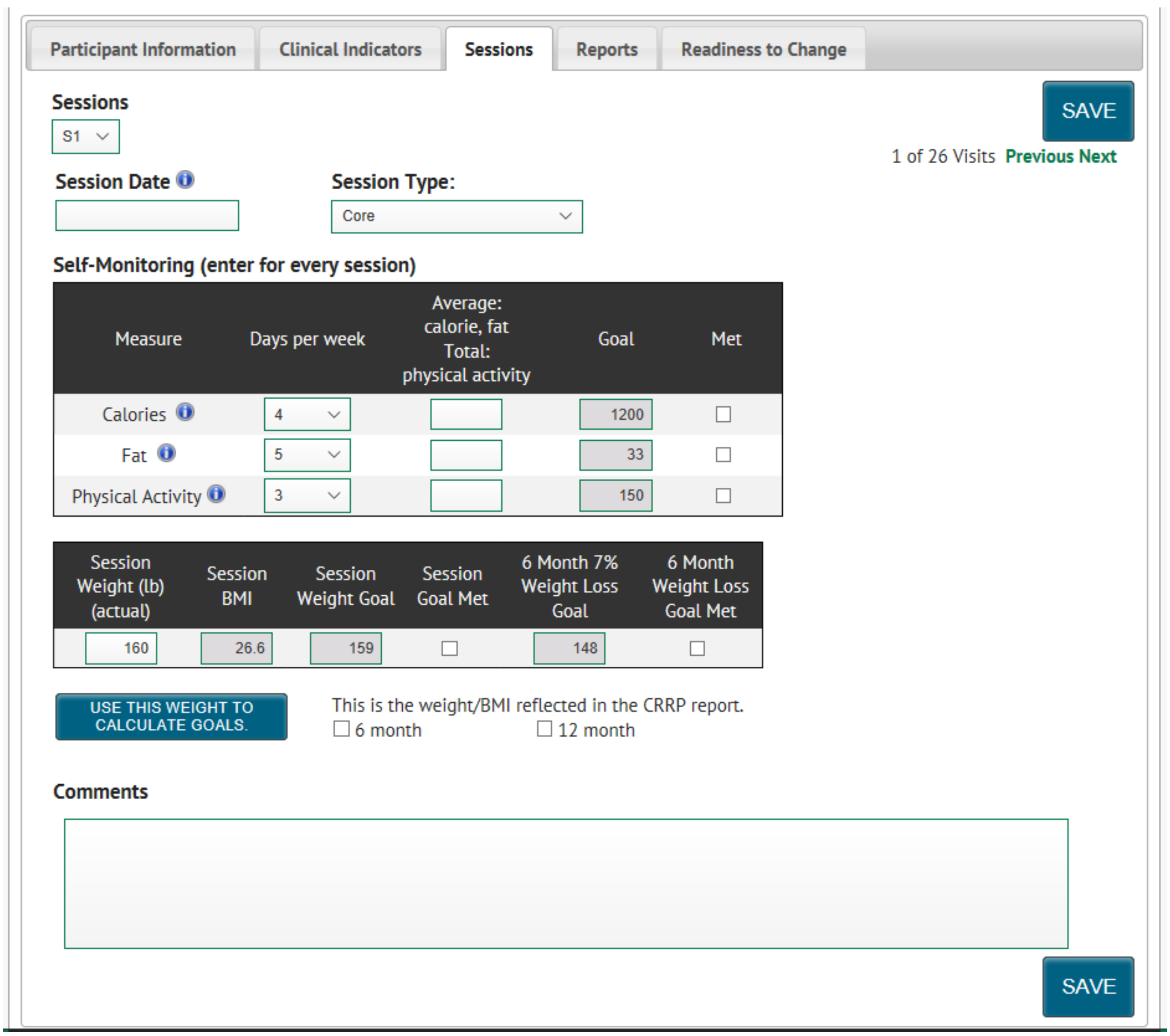
  - **Other** – Fill in the box with the number of minutes of self-reported physical activity.

Sessions Tab

There are up to 26 sessions available for data entry. This tab is used to collect information from each participant from each of these sessions. To view participant progress, you can navigate through the sessions using the arrow on the drop-down menu or the Previous/Next buttons:

Different participants can be viewed in this tab by clicking through the records navigation bar (First/Previous/Next/Last) at the bottom of the screen or by selecting a participant's name or ID number in the drop-down menus at the top of the screen.

When you log in to enter data for the participant's progress under this session's tab, the next session in which you should enter data will appear. In case the participant skipped a session, you will have to select a session number corresponding to the session s/he attended.



- **Sessions** – Select the visit for which you are entering data.

- **Session Date** – Enter the date manually with eight digits in the day, month, and year fields (DD/MM/YYYY). Click on the box if this is a make-up visit.

- Session Type – From the drop-down menu, choose the type of session: core, core makeup, core maintenance, core maintenance makeup, ongoing maintenance, or ongoing maintenance makeup.

- **Comments** – Enter up to 255 characters in this text box.

- **Weight** – Enter the weight in pounds, and the BMI value will automatically calculate.

- **6 month and 12 month** –These boxes are required to calculate the weight/BMI for the 6-month/12-month assessment weight/BMI populated in the CRRP report. For example, select one session, S20, for the 6-month weight/BMI and one, S26, for the 12-month weight/BMI. You can only select one session for the 6-month and one session for the 12-month assessment.

- **Goals** (self-monitoring table) – A participant's weight loss goal is based on the first attended session weight. Average daily data for Calorie, Fat, Physical Activity, and Weight are self-reported and entered for each session. Click on the Use This Weight to Calculate Goals button to calculate the goals. The participant's values will automatically be compared to the goal. The Met box will be automatically checked if the goal was met.

  The calculation for the participant's weight loss goal is as follows:

  For Session 1 – NumberOfSessions (defined by group):
  WeightGoal = sessionweight – ([sessionweight * 0.07]/NumberOfSessions)* sessionnumber)

  For additional sessions after NumberOfSessions:
  IntakeWeight – (((IntakeWeight * 0.07) / NumTotalSessions) * Current Session)

The overall goal is a 7% weight loss. The Physical Activity goal is always 150 minutes a week.

The CalorieGoals and FatGoals are taken from this table:

	Weight	FatGoal	CalorieGoal
1	120	33	1200
2	175	42	1500
3	220	50	1800
4	250	55	2000

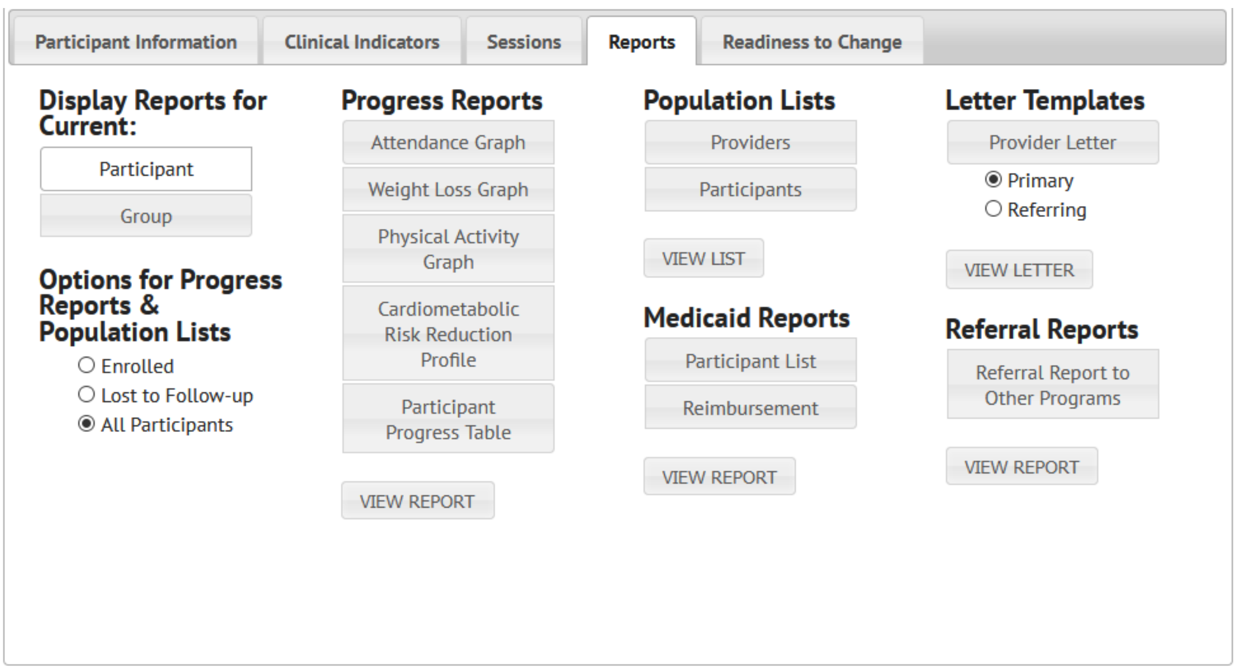
Once a user surpasses a certain weight, he or she moves on to the next level. For example, someone weighing 200 lb would have a calorie goal of 1500, and someone weighing 230 lb would have a calorie goal of 1800.

Reports Tab

The Reports tab allows you to generate, display, and export reports for current participants or groups. Note: You must first choose Participant or Group. Select the report you want and click on View Report.

You also have the option to view reports for enrolled, lost to follow-up, and all participants. These options apply to Progress Reports and Population Lists.

You can view the reports in Word or as a PDF and save them to your computer by clicking on the computer disk icon on the task bar. Participant Reports include an Attendance Graph, a Weight Loss Graph, a Physical Activity Graph, a Cardiometabolic Risk Reduction Profile, and a Participant Progress Table.

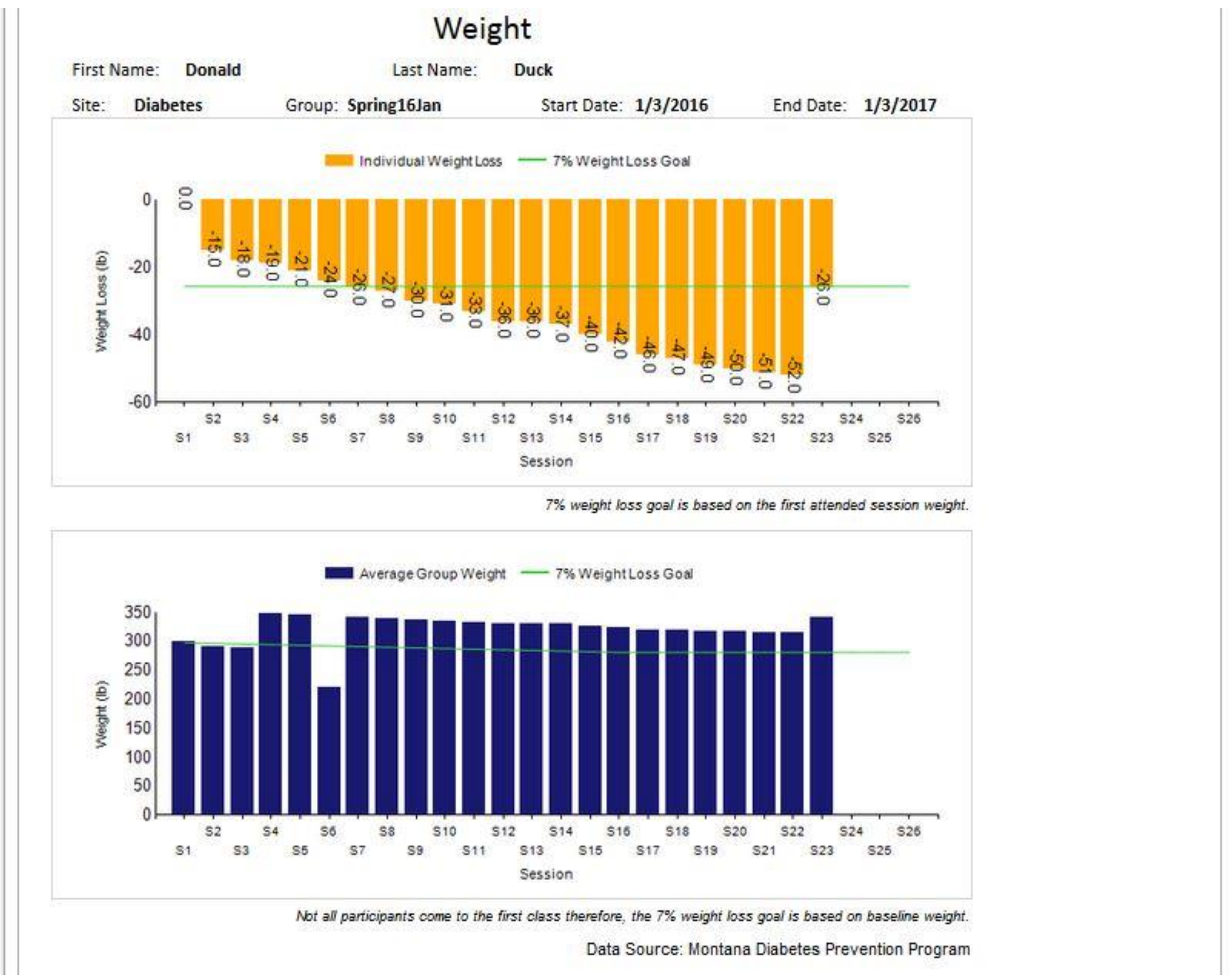


Attendance Graph – The first graph shows the number of participants who came to each session. The blue line (below) shows the group attendance per session, first by number of participants and then by percentage of participants attending. In this case, there are four members of the group. Two members came to Sessions 1–3, but only one came to Sessions 4–22.

The purple (bottom) line in the first graph shows the attendance for the selected participant (Donald Duck). He attended Sessions 1–22.

Weight Loss Graph – The blue graph shows the individual weight loss over the course of the weeks. This weight loss is based on the weight of the first attended session, Session 1 in this case. However, if Donald had not shown up for the first time until Session 3, weight loss would be based on the Session 3 weight. The line is the participant's weight loss goal. It is 7% of the first attended session weight. In this case, the weight loss goal was about 25 lb, and Donald made the goal by Session 7, losing about 50 lb by the end.

The orange graph is the same as the blue graph, except it takes the average of the entire group. The average group weight for a session only uses the participants that attended the session. The group weight loss goal is based on the intake weight, not the first session, as there may be some participants who have not attended any sessions but are still part of the group. In this case, Donald was not the norm, as on average, the group members did not meet their weight loss goals.



The table provides additional statistics:

- Total lb Lost and Mean lb Lost are based on the weight from the first attended session.
- % Self-Monitoring Fat is from the current session.
- Mean Physical Activity min/week, Mean Fat Intake, and % lb to Date use data up to the current date.
- For the Fat Monitoring Goal and Physical Activity Goal tables, all data are from the current session. *n* is the number of participants that achieved the goal, and # is the mean lb lost in the particular circumstance.

Weight, Fat Monitoring, and Physical Activity

Group Progress	%	#
Total lb Lost		36.0
Mean lb Lost		9.0
Mean PA min/week		45.0
% Self-Monitoring Fat	0.25	
Mean Fat Intake (gms)		29.2
% lb to Date	0.25	

Data Source:
Montana Diabetes Prevention Program

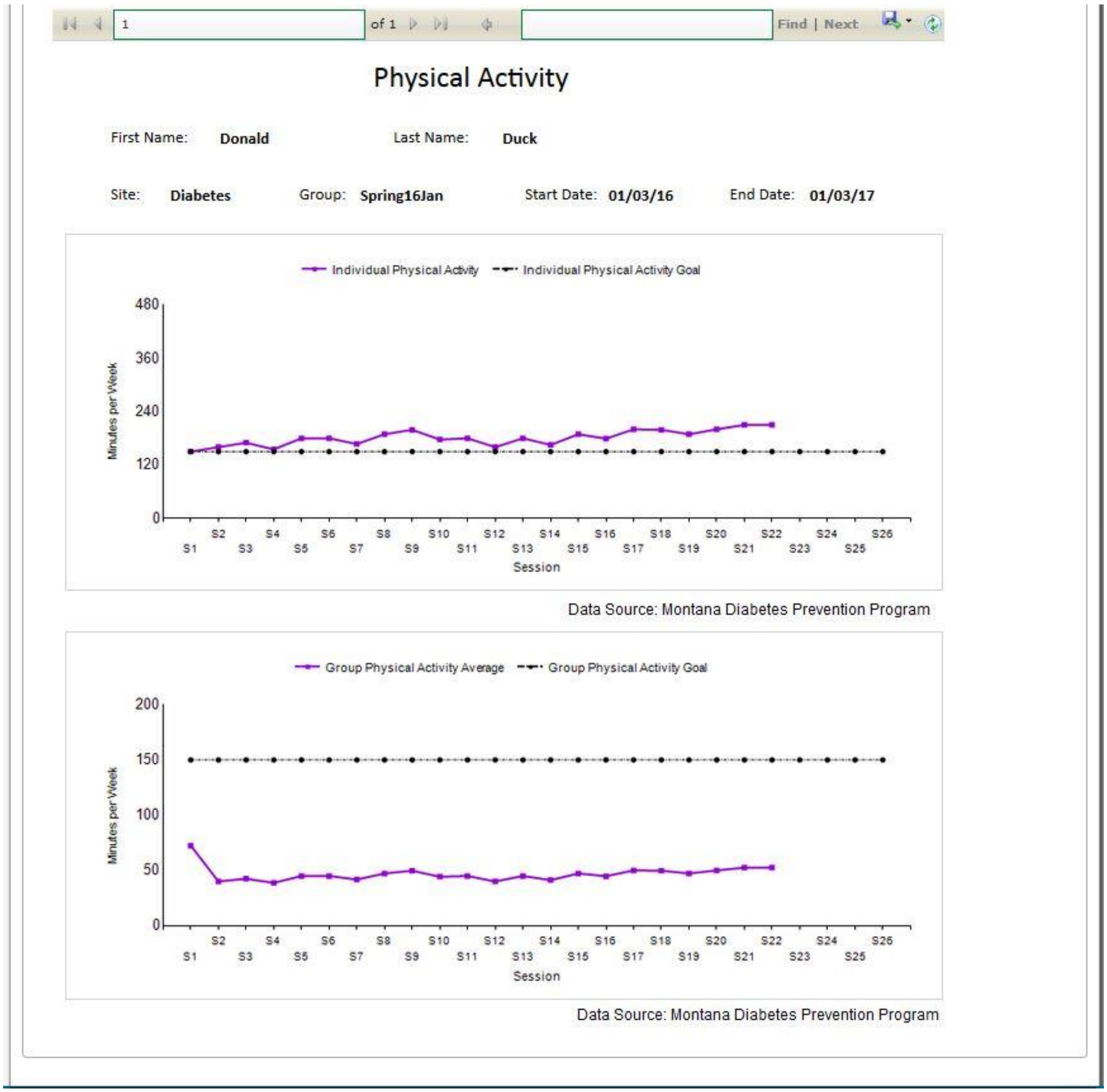
Fat Monitoring Goal	n	#
Mean lb lost to date of participants self-monitoring fat in this session	1	6.5
Mean lb lost to date of participants not self-monitoring fat in this session	3	2.5

Physical Activity Goal	n	#
Mean lb lost to date of participants who met the physical activity goal in this session	1	6.5
Mean lb lost to date of participants who did not meet the physical activity goal in this session	3	2.5

Physical Activity Graph – Like the weight loss graph, the top graph shows the individual in comparison to the group, while the bottom graph shows the group data.

The individual physical activity goal for everyone is 150 minutes a week. Donald was always slightly above that.

The group on average was always below, hovering around 50 minutes a week. The group average only calculates those who attended the session.



Cardiometabolic Risk Reduction Profile – The CRRP neatly displays clinical assessment data available for that participant.

1 of 1 Find | Next

Cardiometabolic Risk Reduction Profile

Name: **Donald Duck** Physician Name:

Address: **Peach Street**
Missoula, MT 59602- Address:

Site: **Diabetes** Group: **Spring16Jan** Payor: **Medicaid**

DOB: **7/1/1965** Gender: **M** Date: 03/09/17

	Week 1		**6 Months**		**12 Months**	
	Date	Value	Date	Value	Date	Value
Weight (BMI) lb	10/1/2014	355 (54)	11/5/2014	342 (52)		

	Baseline		**6 Months**		**12 Months**	
	Date	Value	Date	Value	Date	Value
Blood Pressure						
Blood Pressure (mmHg)	8/15/2014	230/95	4/1/2015	225/87	10/1/2015	200/80
Lipid Profile						
LDL	8/15/2014	28	4/1/2015	265	10/1/2015	129
HDL		28		57		59
Triglycerides		350		323		150
Total Cholesterol		126		387		218
Glucose Profile						
Fasting BG	10/1/2014	99	4/1/2015	95	10/1/2015	88
Random						
2-hr OGTT						
A1C	8/15/2014	7.00	4/1/2015	6.80	10/1/2015	6.50
Medication Profile						
Metformin (Y/N)	10/1/2014	N	4/1/2015	N	10/1/2015	N
Hypertension (Y/N)		Y		Y		N
Lipid Lowering (Y/N)		N		N		N
Tobacco Use						
Current User (Y/N)	10/1/2014	Former User	4/1/2015	Former User	10/1/2015	Former User

Participant Progress Table – The participant progress table displays all of the data for all of the sessions.

Participant Progress Table

(Self-Monitoring)

Participant: **Donald Duck**
Participant ID: **1313**
Group Name: **Spring16Jan**

Site: **Diabetes**
Baseline Weight: (lb) **355**
Weight Goal: (lb) **340.4** (based on first attended session weight)

Medicaid Member ID: **123456789**

Date	Session*	Session Weight** (lb)	Calories (days/wk)	Calories (average/ wk)	Fat (days/wk)	Fat Grams (average/ wk)	Physical Activity (days/wk)	Physical Activity (total min/wk)	Weight (days/wk)	Weight (average/ wk)
10/01/14	S1	366.0	6	1900	6	50			2	349
10/08/14	S2	351.0	5	1888	6	47			6	324
10/13/14	S3	348.0	7	1760	6	45			4	345
10/20/14	S4	347.0	4	1889	6	53			6	333
10/28/14	S5	345.0	6	1760	7	45	7	180	6	343
11/05/14	S6	342.0	6	1500	6	39	6	180	5	341
11/10/14	S7	340.0	6	1808	6	53	7	167	5	339
11/17/14	S8	339.0	7	1680	5	45	6	189	3	338
11/24/14	S9	336.0	7	1760	6	38	5	199	3	334
12/01/14	S10	335.0	4	1698	6	39	6	177	6	334
12/08/14	S11	333.0	5	1809	6	47	7	180	6	334
12/15/14	S12	330.0	7	1600	7	38	7	199	6	329
12/22/14	S13	330.0	4	1809	5	54	4	180	4	331
12/29/14	S14	329.0	4	1800	4	52	4	165	3	332
01/05/15	S15	326.0	7	1509	7	38	6	189	5	328
01/12/15	S16	324.0	6	324	5	52	5	179	2	325
02/02/15	S17	320.0	7	1650	7	35	6	200	5	324
03/02/15	S18	319.0	6	1789	6	44	6	199	5	320
04/08/14	S19	317.0	6	1760	7	40	7	189	7	310
06/05/15	S20	316.0	6	1760	7	40	6	200	5	320
09/01/15	S21	315.0	7	1689	7	39	7	210	7	320
10/05/15	S22	314.0	6	1880	6	44	7	210	7	315
	S23	340.0	0	999	7	999	3	180	0	340
	S24						5	180		
	S25									
	S26									

* Tracked ≥ week during reporting session ** Weight measurement by lifestyle coach

Wednesday, April 11, 2018

Page 1 of 1

Population Lists may be generated for Participants or Providers. Select the list you want and click on View List.

1 of 2 Find | Next

Date Generated: 02/08/17

Participant List

Diabetes
Enrolled: 23

Group Name: Fall15October

Medical Rec #	Participant	Address	Contact Information
SLAH01172016	Sara Lahr		**Mobile Phone:**
	DOB: 1/17/1950		**Home Phone:**
			Email:
CPAU10062015	Campbell Paul	1400 E Broadway Street	**Mobile Phone:** (406) 222-2222
	DOB: 10/6/1984	Helena , MT 59601-	**Home Phone:**
			Email: pcampbell@mt.gov
ATES04012016	A New Test Patient		**Mobile Phone:**
	DOB: 4/1/1960		**Home Phone:**
			Email:
DCAR11102016	Dorota Carp	1400 E. broadway	**Mobile Phone:** (406) 444-4444
	DOB: 7/11/1978	Helena, MT 59601-	**Home Phone:**
			Email: djfldjdlj@yahoo.com

Page 1 of 2

Under **Medicaid Reports**, you can choose to view a Medicaid Participant List or a Medicaid Reimbursement List, which displays the attended session dates for reimbursement purposes.

1 of 2 Find | Next

Medicaid Reimbursement

Fall15October

Last Name	First Name	Medicaid ID
Paul	***Campbell***	**123456789**

Session Number	Date
S1	10/01/14
S2	10/08/14
S3	10/13/14
S4	10/20/14
S5	10/28/14
S6	
S7	11/10/14
S8	11/17/14
S9	11/24/14
S10	12/01/14
S11	
S12	12/15/14
S13	12/22/14
S14	12/29/14
S15	01/05/15
S16	01/12/15
S17	02/02/15
S18	
S19	04/08/15
S20	06/05/15
S21	09/01/15
S22	10/05/15
S23	
S24	
S25	
S26	

Wednesday, February 8, 2017 Page 1 of 2

Letter Templates contains the Primary and Referring Provider Letter Templates from the Letter Template you generated on the Settings page. Note that the task bar allows you to advance through all participants one by one or from beginning of the file to the end. Or, you may search for a participant by typing the name into the empty field and clicking on Find. Currently, the system can only hold one letter template, the content of which is editable.

Rocky Holiday MD 2/8/2017

12 S Lane
Helena, MT 25000-

RE: Campbell Paul

Dear Rocky Holiday MD:

To Whom it May Concern,

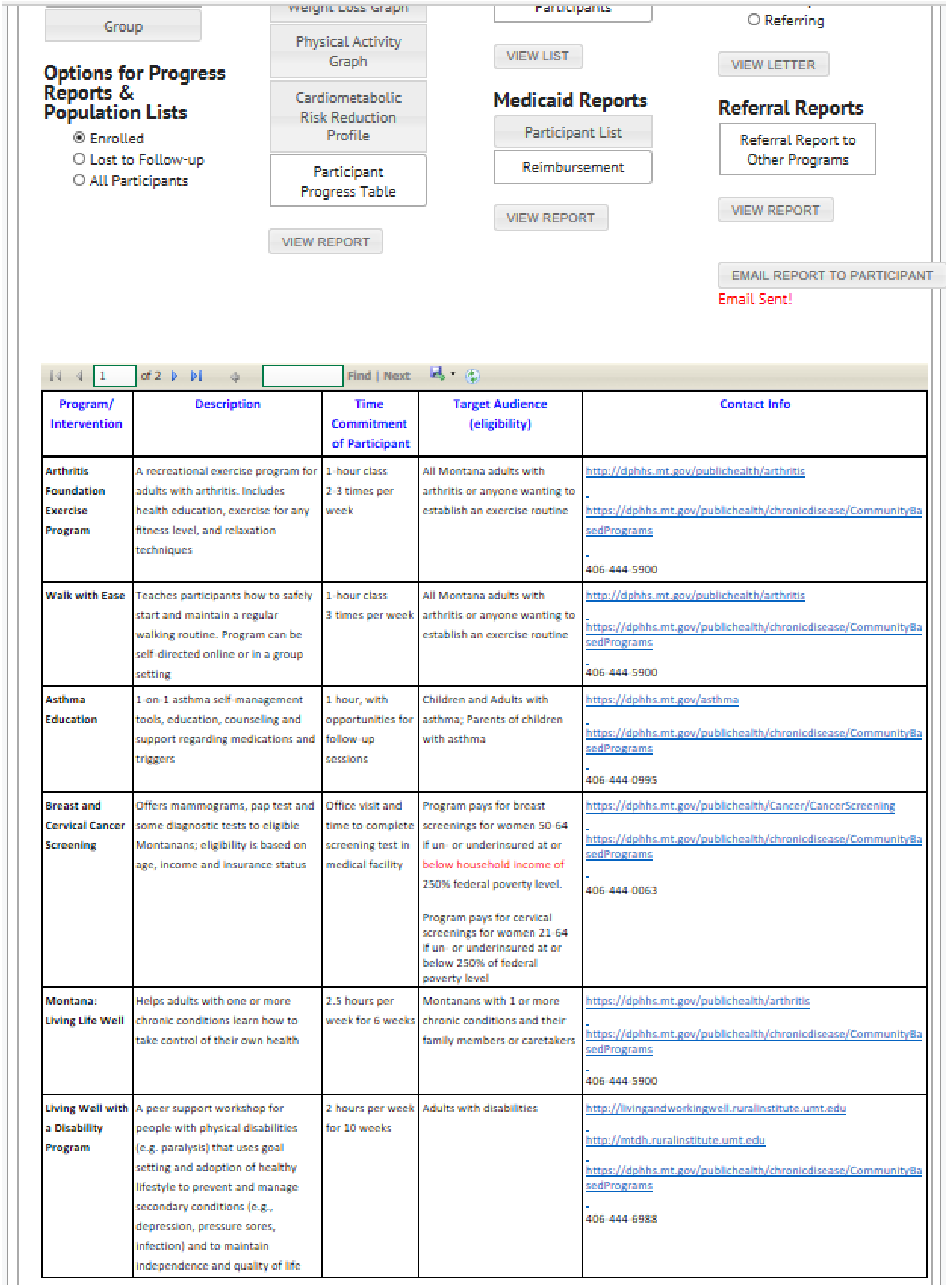
Thank you for referring the above referenced patient who has participated in the <<ENTER YOUR PROGRAM NAME HERE>>>. Attached is summary information which reflects the baseline cardiometabolic risk profile and periodic reassessments to date along with a summary of the lifestyle accomplishments. Our program includes a 6 month long week core curriculum after which we reassess the risk profile. The core curriculum is followed by a 6 month after core program with monthly meetings. At the conclusion of the follow-up period we also reassess the risk profile. Two reports are attached with the most current data.

The Cardiometabolic Risk Profile reflects several important risk factors for diabetes and cardiovascular disease which you will be addressing in your ongoing comprehensive preventive care for this individual. The lab values and other information reflect the data in our registry. We appreciate your cooperation in documenting laboratory tests during the course of the program.

This report will help you recognize the targets and accomplishments regarding weight loss, physical activity and fat consumption. During the course of the intervention we have covered important information about nutrition, physical activity and eating behaviors. Maintaining a healthy lifestyle is a lifelong challenge. We hope that this patient specific report will enable you to continue to support the healthy behaviors and self-monitoring activities as you and your patient set further goals for weight maintenance and physical activity. Your support will be crucial in the coming months and years.

Thank you for referring your patient to the lifestyle intervention and please do not hesitate to contact us if we can be of further assistance.

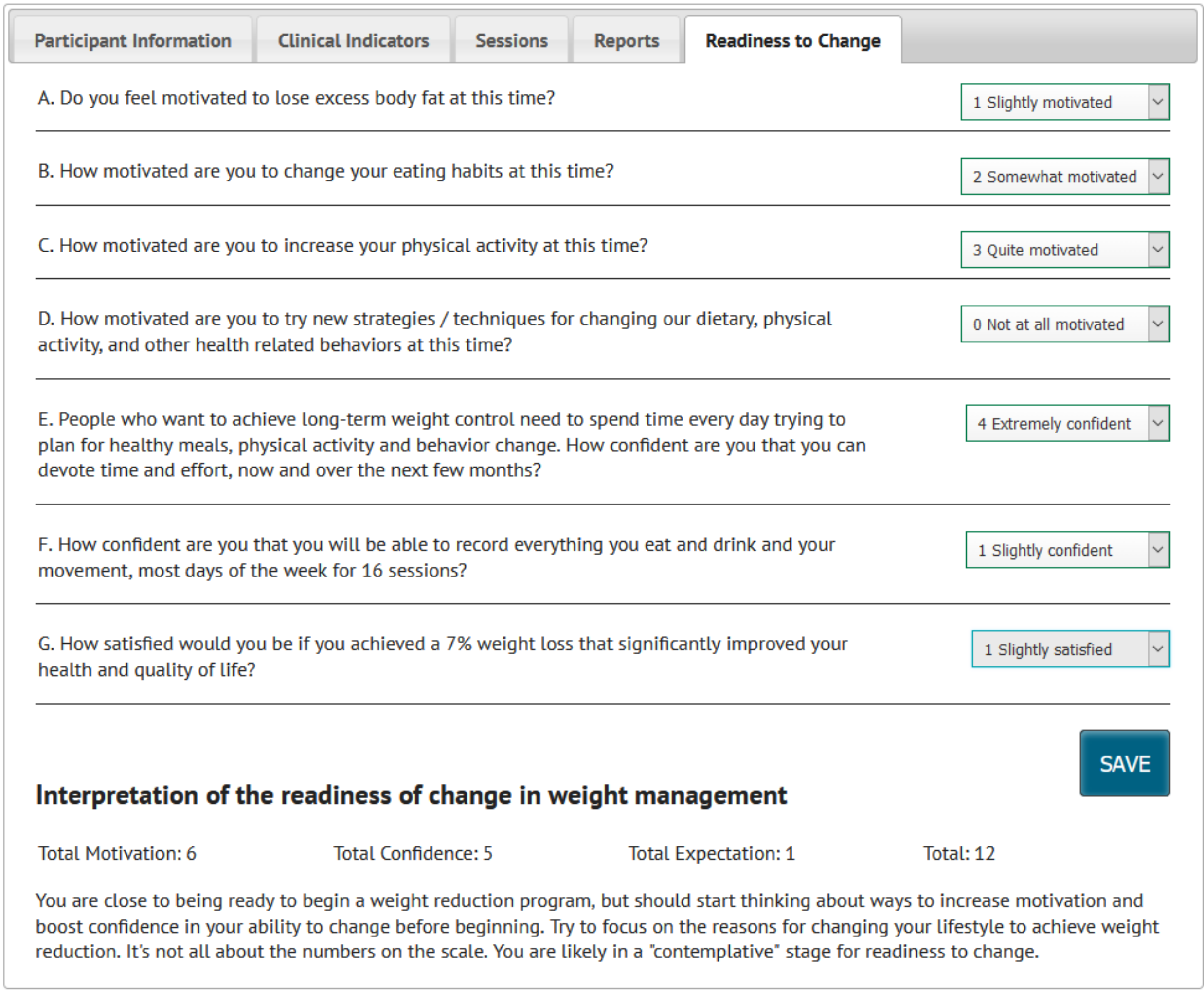
The **Referral Reports** button allows you to refer participants to other Montana CDPHP programs. The report contains a description of each program as well as an estimated time commitment and web links for more information and to register. The report can also be e-mailed to the participant.



Program/ Intervention	Description	Time Commitment of Participant	Target Audience (eligibility)	Contact Info
Arthritis Foundation Exercise Program	A recreational exercise program for adults with arthritis. Includes health education, exercise for any fitness level, and relaxation techniques	1-hour class 2-3 times per week	All Montana adults with arthritis or anyone wanting to establish an exercise routine	http://dphhs.mt.gov/publichealth/arthritis - https://dphhs.mt.gov/publichealth/chronicdisease/CommunityBasedPrograms - 406-444-5900
Walk with Ease	Teaches participants how to safely start and maintain a regular walking routine. Program can be self-directed online or in a group setting	1-hour class 3 times per week	All Montana adults with arthritis or anyone wanting to establish an exercise routine	http://dphhs.mt.gov/publichealth/arthritis - https://dphhs.mt.gov/publichealth/chronicdisease/CommunityBasedPrograms - 406-444-5900
Asthma Education	1-on-1 asthma self-management tools, education, counseling and support regarding medications and triggers	1 hour, with opportunities for follow-up sessions	Children and Adults with asthma; Parents of children with asthma	https://dphhs.mt.gov/asthma - https://dphhs.mt.gov/publichealth/chronicdisease/CommunityBasedPrograms - 406-444-0995
Breast and Cervical Cancer Screening	Offers mammograms, pap test and some diagnostic tests to eligible Montanans; eligibility is based on age, income and insurance status	Office visit and time to complete screening test in medical facility	Program pays for breast screenings for women 50-64 if un- or underinsured at or below household income of 250% federal poverty level. Program pays for cervical screenings for women 21-64 if un- or underinsured at or below 250% of federal poverty level	https://dphhs.mt.gov/publichealth/Cancer/CancerScreening - https://dphhs.mt.gov/publichealth/chronicdisease/CommunityBasedPrograms - 406-444-0063
Montana: Living Life Well	Helps adults with one or more chronic conditions learn how to take control of their own health	2.5 hours per week for 6 weeks	Montanans with 1 or more chronic conditions and their family members or caretakers	https://dphhs.mt.gov/publichealth/arthritis - https://dphhs.mt.gov/publichealth/chronicdisease/CommunityBasedPrograms - 406-444-5900
Living Well with a Disability Program	A peer support workshop for people with physical disabilities (e.g. paralysis) that uses goal setting and adoption of healthy lifestyle to prevent and manage secondary conditions (e.g., depression, pressure sores, infection) and to maintain independence and quality of life	2 hours per week for 10 weeks	Adults with disabilities	http://livingandworkingwell.ruralinstitute.umt.edu - http://mtdh.ruralinstitute.umt.edu - https://dphhs.mt.gov/publichealth/chronicdisease/CommunityBasedPrograms - 406-444-6988

Readiness to Change Tab

The **Readiness to Change tab** records and scores participants' responses from the pull-down menu to questions about their motivation, confidence, and expectation levels regarding the weight management program. Levels range from 0 through 4: 0 Not at all motivated, 1 Slightly motivated, 2 Somewhat motivated, 3 Quite motivated, and 4 Extremely motivated.


Participant Information | Clinical Indicators | Sessions | Reports | **Readiness to Change**

A. Do you feel motivated to lose excess body fat at this time? — 1 Slightly motivated

B. How motivated are you to change your eating habits at this time? — 2 Somewhat motivated

C. How motivated are you to increase your physical activity at this time? — 3 Quite motivated

D. How motivated are you to try new strategies / techniques for changing our dietary, physical activity, and other health related behaviors at this time? — 0 Not at all motivated

E. People who want to achieve long-term weight control need to spend time every day trying to plan for healthy meals, physical activity and behavior change. How confident are you that you can devote time and effort, now and over the next few months? — 4 Extremely confident

F. How confident are you that you will be able to record everything you eat and drink and your movement, most days of the week for 16 sessions? — 1 Slightly confident

G. How satisfied would you be if you achieved a 7% weight loss that significantly improved your health and quality of life? — 1 Slightly satisfied

SAVE

Interpretation of the readiness of change in weight management

Total Motivation: 6 Total Confidence: 5 Total Expectation: 1 Total: 12

You are close to being ready to begin a weight reduction program, but should start thinking about ways to increase motivation and boost confidence in your ability to change before beginning. Try to focus on the reasons for changing your lifestyle to achieve weight reduction. It's not all about the numbers on the scale. You are likely in a "contemplative" stage for readiness to change.

The preset interpretations range according to the total score and guide participants to think realistically at this stage in their weight management. Examples include the following:

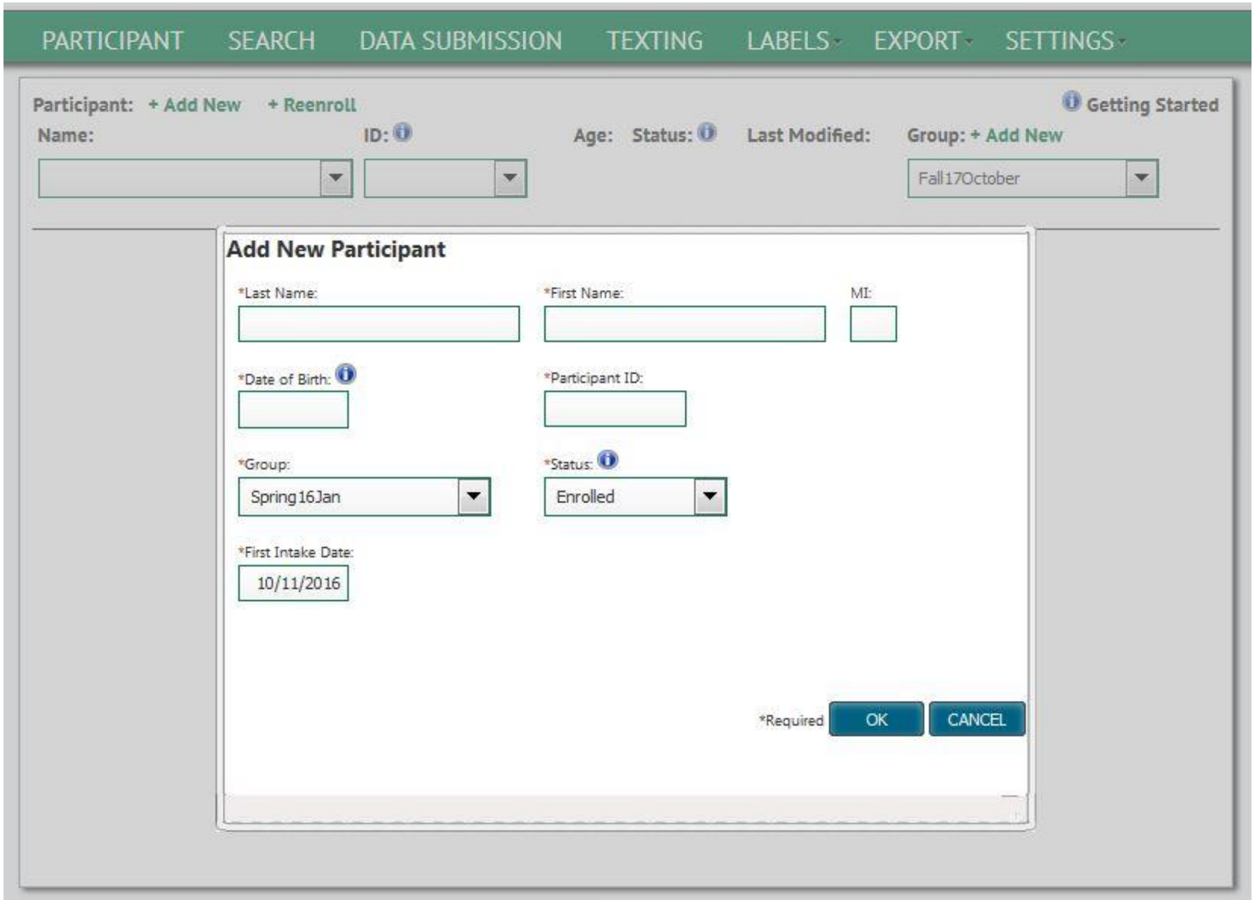
- This may not be the best time for you to start a weight loss program. Inadequate motivation could block our progress. You may want to wait until feeling more confident in your ability to change behavior. By considering realistic weight loss goals and understanding the health benefits of just 7% body weight loss, may help you progress forward. You are likely in a "Pre-contemplative" stage for readiness to change.

- You have the necessary motivation and confidence to start a weight management program. Your expectations are right on target. You are in "preparation" phase for change and ready to move toward the "action" phase.

COMMON TASKS

How Do I Enter a New Participant?

Step 1. Go to **Participant** on the main menu bar and select **+Add New**.



Step 2. Fill in all fields. Note that you must choose a group or create a new group. Click on **OK. The new participant must be at least 18 years old per the CDC requirement. The system will not allow you to enter anyone younger.**

Step 3. The Participant Information tab will now appear, with the Enrolled Status date automatically filled to the current date. Manually enter data into the Demographics, Contact, Which of the following prompted you to enroll in the DPP?, Payor Type, Insurance, Medicaid, and Medical/Disability sections. Required fields are marked with an asterisk. When all data are entered, click on the **Save and Proceed** button.

Step 4. This automatically brings up the Clinical Indicators tab for assessment data entry.

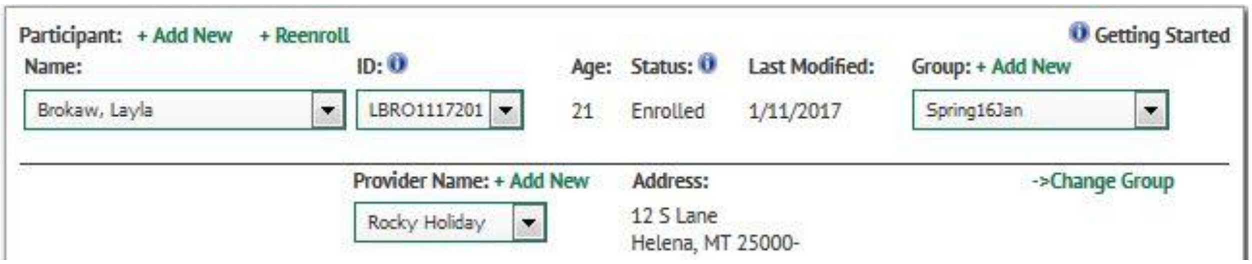
How Do I Move a Participant to a Different Group?

Step 1. On the Participant page, select the group in which the participant is currently registered.

Step 2. Then choose the participant.

Step 3. Click on **Change Group**.

Step 4. Select the new group from the drop-down menu that appears, and click on OK.



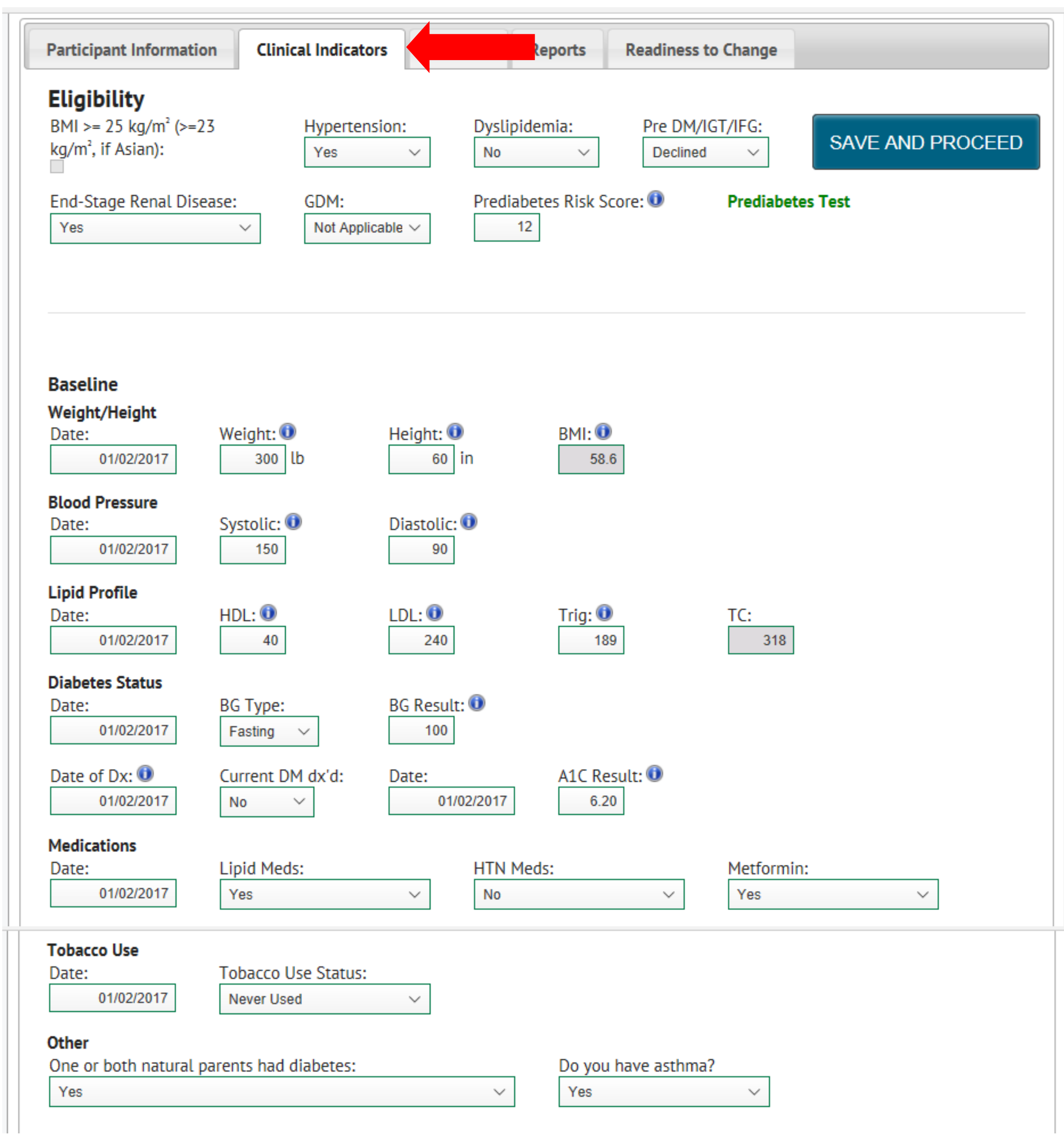
How Do I Record a Participant’s Assessments?

Step 1. If the participant is not already in the database, follow the instructions above to add a new participant. After completing the Participant Information data entry and clicking on Save and Proceed, the Clinical Indicators screen will be brought up.

If the participant is already in the database, select the participant’s name from the **Participant Name** drop-down menu by clicking on the down arrow and selecting the name from the list.

Step 2. Select the **Clinical Indicators** tab, and fill in the participant’s assessment information at baseline, at 6 months. and at 12 months. The post-program survey weight may be added.

Step 3. Click on Save and Proceed.



Continued

6 Months

Blood Pressure

Date:	Systolic:	Diastolic:
06/13/2017	140	85

Lipid Profile

Date:	HDL:	LDL:	Trig:	TC:
06/13/2017	42	220	180	298

Diabetes Status

Date:	BG Type:	BG Result:	
06/13/2017	Fasting	90	
Date of Dx:	**Current DM dx'd:**	**Date:**	**A1C Result:**
06/13/2017	No	07/13/2017	6.10

Medications

Date:	Lipid Meds:	HTN Meds:	Metformin:
06/13/2017	Yes	No	Yes

Tobacco Use

Date:	Tobacco Use Status:
06/13/2017	Never Used

Other

Do you have asthma?

Declined

12 Months

Blood Pressure

Date:	Systolic:	Diastolic:
12/30/2017	135	80

Lipid Profile

Date:	HDL:	LDL:	Trig:	TC:
12/30/2017	45	200	160	277

Diabetes Status

Date:	BG Type:	BG Result:	
12/30/2017	Fasting	85	
Date of Dx:	**Current DM dx'd:**	**Date:**	**A1C Result:**
12/30/2017	Declined	12/30/2017	6.00

Medications

Date:	Lipid Meds:	HTN Meds:	Metformin:
12/30/2017	No	No	Yes

Tobacco Use

Date:	Tobacco Use Status:
12/30/2017	Never Used

Other

Do you have asthma?

No

Follow-Up Survey Weight

Date:	Survey Weight:
	lb

SAVE AND PROCEED

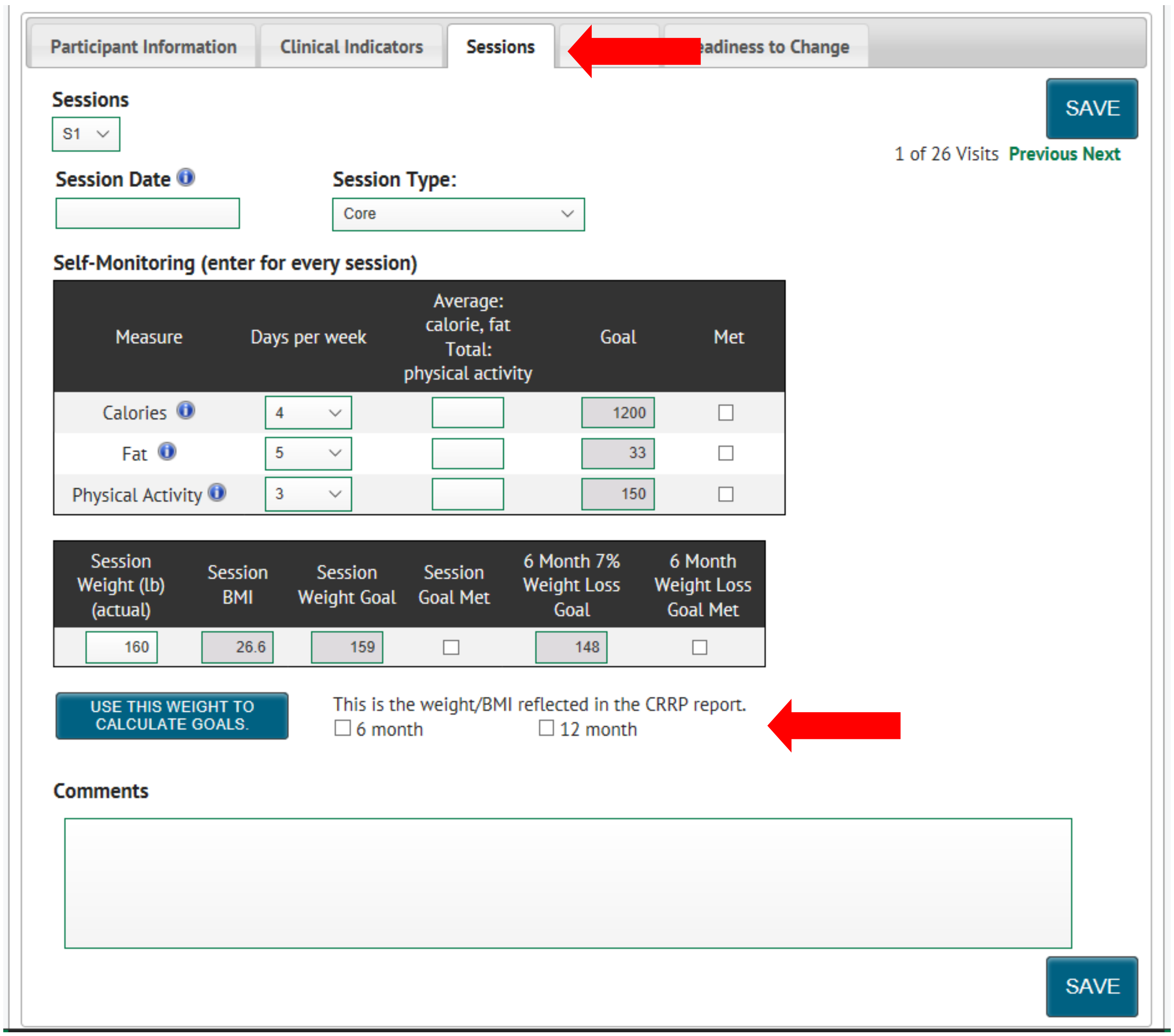
How Do I Set and Track Participant Goals?

Step 1. Select the participant's name from the **Participant Name** drop-down menu. If the goals are not visible, click on the Use This Weight to Calculate Goals button.

Step 2. To move to another session, choose the Session no. from the drop-down menu or click on Next.

Step 3. For each session, manually enter the participant's information for the session, including Session Date, the participant's Weight, and the self-reported Days per Week and Averages/Totals for Calorie, Fat, and Physical Activity. The program determines whether your goal was met and checks the box if it was.

Step 4. Click on Save to record the data for the session.



How Do I Export Data to an Excel Spreadsheet?

You can export data by first going to the Export page on the menu bar.

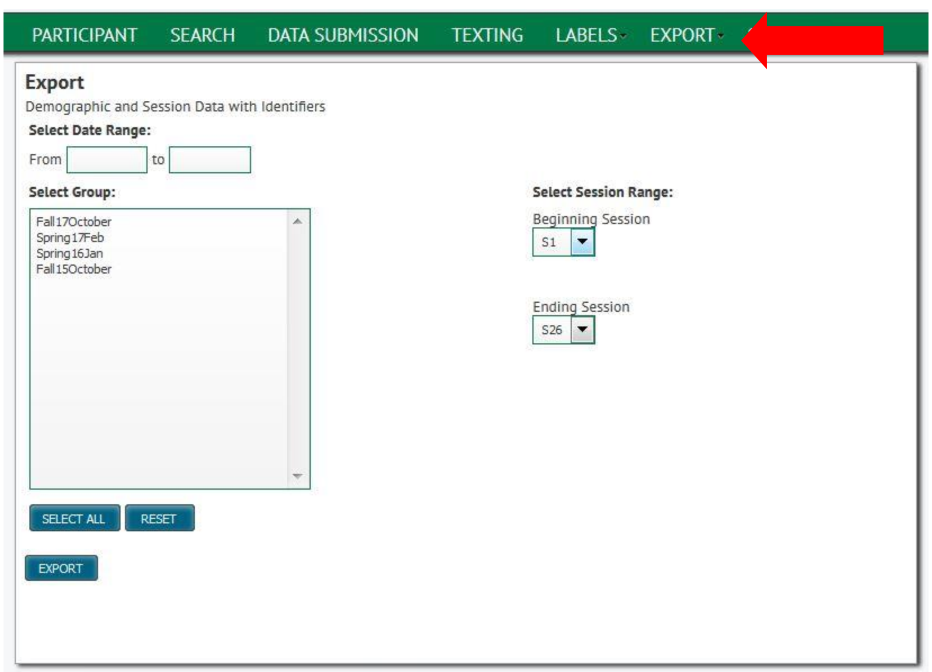
You can export group data to an Excel report file, which will appear in your browser downloads. Click on Export on the menu bar, and select from three options:

1. Demographic and Session Data
2. Demographic and Session Data with Identifiers
3. CDC Recognition Data

Demographic and Session Data and Demographic and Session Data with Identifiers are essentially the same file for a particular group at one particular site; however, the file "with Identifiers" includes participants' identifying information for coaches' benefit. Administrators are only able to access the Demographic and Session Data file, which has all identifying information removed.

CDC Recognition Data are coded in accordance to the 2015 CDC's Standard and Operating Procedures data dictionary, p. 18 (https://www.cdc.gov/diabetes/prevention/pdf/dprp-standards.pdf). This export contains all participants enrolled in your class regardless of CDC's eligibility criterial for recognition.

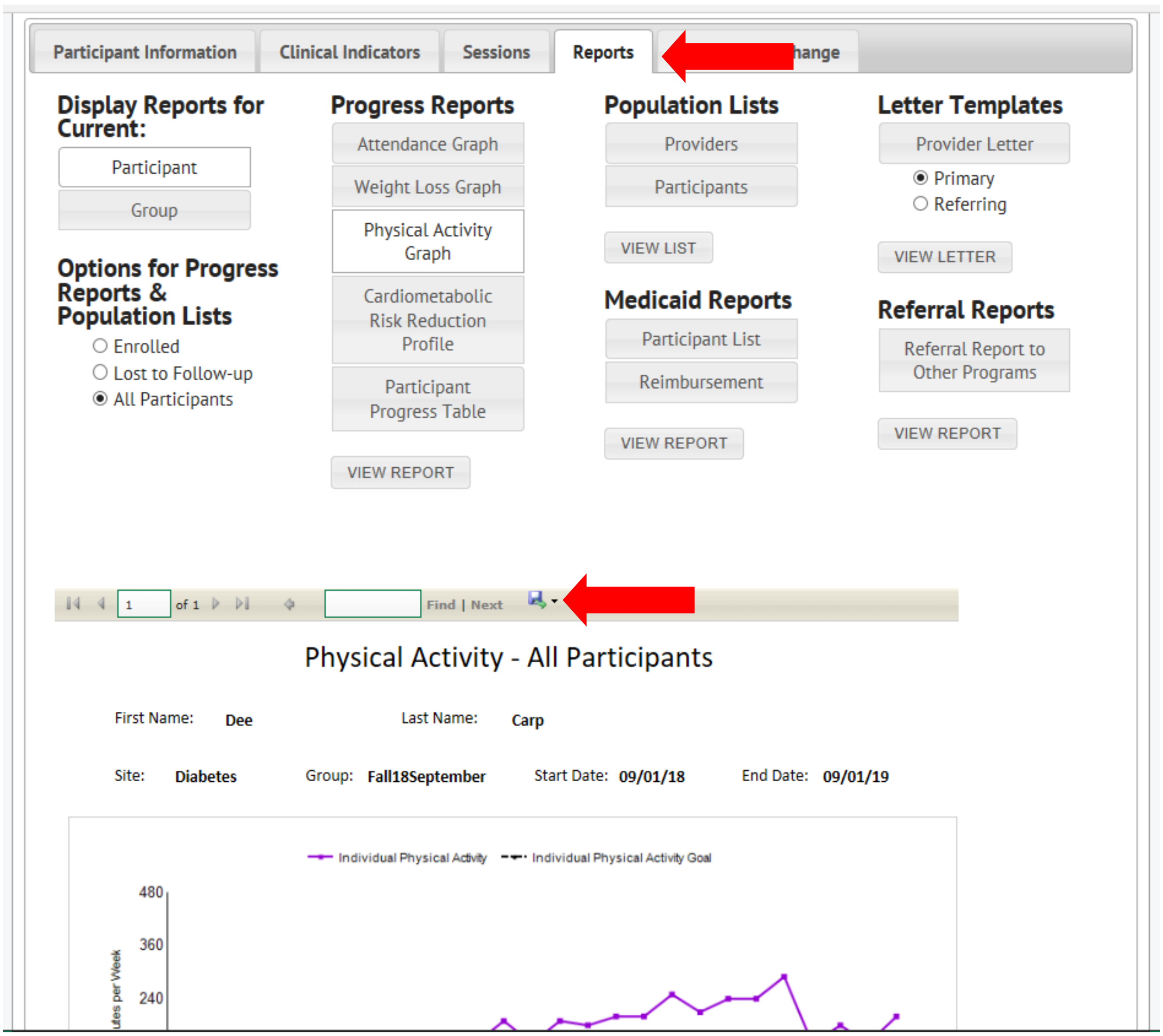
All groups from a site are listed in the Select Groups field. You can select one group in the field by clicking on it, or you can select all available groups by clicking on the button below that says Select All. Or, use the Ctrl key on your keyboard to select more than one group. If you want data for more than one group or you want for a specific time period, Select Date Range allows you to filter which groups you get based on a range of dates. Note: Participants/group intake date must be within date range or it will not pull any data. Select Session Range allows you to select a beginning and an ending session from Session 1–26. The Reset button at the bottom resets the search by removing all filters previously chosen. The Export button will send the data to an Excel file accessible in your browser downloads folder.



How Do I Generate and Export a Report?

First, go to the Reports tab on the Participant page on the menu bar. Choose Participant or Group, then select the type of report. Click on View.
From here you can choose to export the report as an Excel, PDF, or Word file by clicking on the computer disk icon on the task bar.

Note: The content of the report will affect whether the report renders well in the chosen format.



How Do I Create or Reset a Username or Password?

Only DPP administrators for your site have the ability to create or reset a username or password. If you are not the administrator, you must contact the DPP administrator at your site or State representative listed at the beginning of this document for assistance with your username or password.

If you are the administrator, you can create or reset a username or password by hovering over your username and clicking on Users. You can send a link to the user to create or reset the user’s username or password.

TECHNICAL SUPPORT

For data management and entry support and log-in assistance, please contact your DPP administrator.

For technical support, please contact the following:

Sara Lahr
Software Developer
Phone: (701) 777-5341
E-Mail: slahr@undeerc.org

Andrew Palmiscno
Principal Software Engineer
Phone: (701) 777-5206
E-Mail: apalmiscno@undeerc.org

Saurabh Chimote
Senior Software Development Engineer
Phone: (701) 777-5152
E-Mail: schimote@undeerc.org

PROGRAMMATIC SUPPORT

For more information, please refer to http://dphhs.mt.gov/publichealth/Diabetes. For support related to the Montana Diabetes Prevention Program, please contact the following:

Melissa House
Program Manager
Phone: (406) 444-9154
E-Mail: Melissa.House@mt.gov

Ann Lanes
Informatics Specialist
Phone: (406) 444-6894
E-Mail: Lorraine.Lanes@mt.gov

Sonja Tysk
Health Educator
Phone: (406) 444-0593
E-Mail: stysk@mt.gov