



Instructions for Reporting Evidence-Based Activities

This document is to inform contractors of requirements for registering participants into all evidence-based activities.

THE REPORTING REQUIREMENTS ARE THREE-FOLD:

- 1. Enter ALL participants of evidence-based programs into Oregon Access. Do not report any EBHP activities into Focal Point.
- 2. Enter data for the following workshops into the Compass Portal. (All Living Well with Chronic Conditions workshops, National Diabetes Prevention Program, Tai Chi for Arthritis, Tai Chi for better balance, and Walk With Ease) After finalizing activity/workshop details, 'create a new workshop' in the Compass Portal. After the first class, enter participant information and attendance, updating attendance by the end of the workshop. For Living Well workshops, submit payment once the workshop is complete and by the following 5th working day of the month. Please submit workshop details (Workshop name, location, start date) with the invoice. Program Coordinator will confirm program completion by checking data in Compass system.
- 3. For all other programs (Arthritis Exercise Program, Powerful Tools, Star Caregiver, and Savvy Caregiver) send the "EBHP Attendance Tracker" to *ads.contracts@multco.us* via secure email, by the 5th working day of each month. Please rename your file each month using this naming convention: MMYY_DC_EBHP, where MMYY are Month and Year and DC is the District Center Code.

(1) OREGON ACCESS

All participants shall be registered in Oregon Access and the following demographic* data shall be requested of participants.

- Name: Data will be aggregated and participant names will not be used.
- Prime#
- Gender
- Date of Birth: Actual birthday is preferred for identification purposes, but if a participant is reluctant to provide the actual birthdate, you may enter the birth year.
- # In Household: 1, 2, 3 or more.
- City
- Zip Code: Geographic area and urban vs. rural data is being collected. Although Oregon Access requires all address-related fields to be completed, you may enter "unknown" for street address and collect only city and zip, though more complete information is beneficial.





- Monthly Household Income
 - HH=1: \$973 or below \$974 or above
 - HH=2: \$1,311 or below \$1,312 or above
 - HH=3: \$1,649 or below \$1,650 or above
 - HH-4: \$1,988 or below \$1,989 or above
- Race (Select all that apply)
 - American Indian/Alaska Native
 - Asian
 - Black/African American
 - Native Hawaiian/Other Pacific
 - White
 - Unknown-some other race
- Ethnicity
 - Hispanic/Latino
 - Not Hispanic/Latino
- Start Date (Enter July 1, 2015 for current, ongoing courses)
- Service Name

(2) PROGRAM-SPECIFIC DOCUMENTATION

The following completion criteria shall be used for determining completion rates of each program:

- Diabetes Prevention Program: 9/16 core sessions.
- Living Well**, Tomando**, DSMP**, Chronic Pain, Powerful Tools for Caregivers, Savvy Caregiver: 4/6 weekly sessions.
- STAR-C: At least 4 home sessions.
- Tai Chi: 33/48 classes.
- Arthritis Foundation Exercise Program: 9/16 sessions.
- Walk with Ease: 13/18 sessions.

*Participants may decline to provide any of the requested information. However, you must include name and prime # to include participant in these counts.

**IMPORTANT: Workshop paperwork for Stanford's Chronic Disease Self Management programs, Living Well, Living Well Diabetes and Tomando, can be printed from Compass Portal website before the workshops begins. Please have participants fill out this information at their first meeting. Data will need to be entered by contractor when creating your attendance list in the Compass system.

Questions? Please contact the EBHP Coordinator with questions.



