Chapter 3

Preparing for Provider Outreach

3. PREPARING FOR PROVIDER OUTREACH

In This Section

This section focuses on training your marketing staff and preparing the outreach materials they will need for scheduling and conducting in-person visits with PCPs. It includes:

- Strategies for successfully training your marketers
- Step-by-step technical instructions for customizing outreach materials
- Snapshots of completed materials as samples

TRAIN YOUR MARKETING STAFF

Effective training is one of the keys to successful marketing. To ensure that your team is fully prepared to begin engaging providers, have a plan in place for training. Here are some suggested approaches for training your intervention marketers.

- Use the information provided in this marketing guide to prepare a training curriculum that combines instructive, interactive, and self-study sessions.
- Set a timeline for completion of the training curriculum. Know when you want to start engaging providers and set your training schedule accordingly. Depending on available staff, prior experience, and program resources, it may take some time until all of your marketers feel ready to call on primary care practices.
- Ensure that the training timeline provides ample opportunity for staff to rehearse initial phone calls and outreach visits. Role play with your colleagues to practice a variety of visit scenarios so marketers are prepared to respond to different situations in the field. Base your role-playing exercises on the call and visit scripts provided in **Appendix C** and on the scenarios modeled in the training video.
- Recognize that some staff may not be immediately comfortable in this kind of marketing and promotion role. They may need more time to practice simulated visits.
- Consider training in phases as marketers move through the steps in the outreach process. Overlap actual tasks and training. For example, while work is under way to select providers to target, begin training for first contact. As first contacts are being made, move to training for the outreach visit, and so forth.
- Ask staff experienced in community outreach and comfortable interacting with providers to mentor or train other marketers.
- Schedule continuing training/education sessions throughout the year for all staff. Be prepared to provide remedial training as necessary.
- Invite providers from within your organization or from other local organizations or agencies to observe and give feedback during practice sessions.

TIP ▶ The National Resource Center for Academic Detailing (www.narcad.org) offers training sessions and other services and resources for public health professionals responsible for provider outreach. You might also look for academic or pharmaceutical detailers in your community who would be willing to give your team pointers or let your marketers observe them on a visit.

Secrets of Marketing Success: Training

- Review the training materials thoroughly and practice role playing multiple scenarios. This will help prepare you and your team members for any situation once you're face-to-face with the provider.
- Give your team members copies of the marketing guide sections that cover the tasks they'll be taking on.
- For each task, walk through the process step-by-step using a combination of instructive, interactive, and self-study sessions.
- Have staff experienced in marketing or outreach train other staff.
- Through role-play sessions with other team members, practice all contacts with providers, from initial contact through the outreach visit and followup.
- Recruit a local physician or experienced colleague to observe the role-play training sessions and provide feedback.

When training staff for provider outreach, keep in mind that the process gets easier over time. With practice and experience, marketers will acquire the knowledge and comfort level needed to think on their feet and deliver a confident, customized presentation. Prepare your team for the reality that the first phone calls and outreach visits they make may not go as smoothly as practiced. Refer to the training video to see how a novice marketer might handle an outreach visit. Use her example to identify mistakes to avoid and to refine your approach. Encourage your marketers to use challenging interactions with providers as learning experiences.

See sidebar for additional training tips.

PREPARE MARKETING MATERIALS

To reinforce the information you share with providers, you'll need materials you can use during the outreach visit, leave behind after the visit, or send later to follow up. This toolkit provides fact sheets, brochures, and other items for both patients and providers on self-management education and physical activity for chronic disease. Some of the materials are customizable with local contact information and class schedules. If you already have marketing materials on the interventions you're promoting, you can use those in your provider outreach.

The marketing materials in this toolkit were developed in response to audience research conducted with patients and providers, and to findings from a pilot test of the 1•2•3 Approach. They highlight the information about chronic disease self-management education and physical activity interventions found to be most important to patients and providers. You will notice that the provider materials emphasize the information PCPs need to make a recommendation, while the patient materials are designed to persuade people with chronic disease to enroll in a local class or workshop. The patient materials follow National Institutes of Health (NIH) plain language principles. The content of all materials has been approved by CDC and carries the CDC logo, which provides added credibility according to research with PCPs.

Electronic copies of all marketing materials are available on the CDC Web site at www.cdc.gov/arthritis/interventions/marketing-support/1-2-3-approach Sample customized fact sheets are included in **Appendix D** for reference.

Customizing and Printing the Materials

All customizable marketing materials are saved in Microsoft Word or PowerPoint (compatible with Microsoft Office 1997 and later) or available as fillable PDFs (compatible with the Adobe Acrobat family). Complete the customizable sections of the documents with information such as your contact information and class schedules for the interventions you are promoting. Materials that aren't customizable are available as standard PDFs.

Here are general instructions for customizing files. Instructions for specific materials are provided in the sections below.

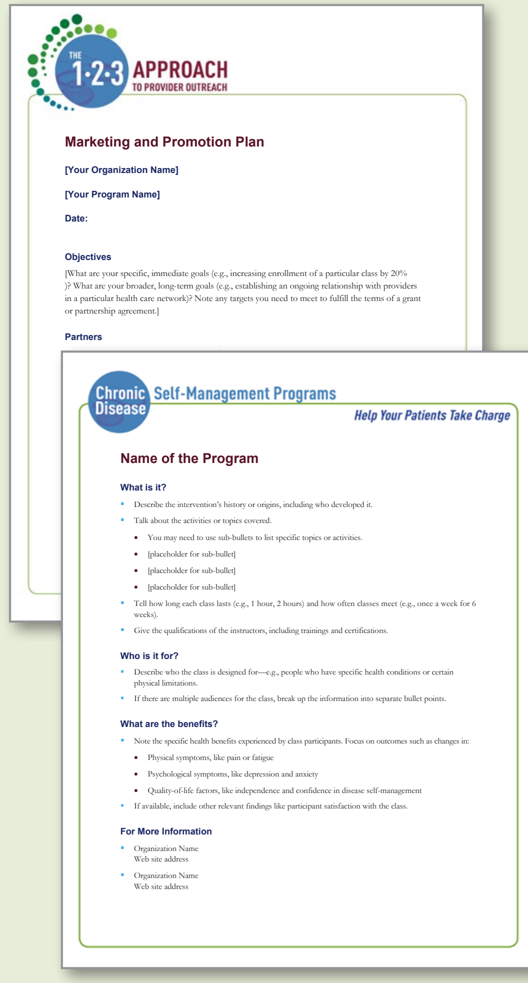
To begin working in a document, download it from the Web site and save it to your personal computer.

- Add your information to the appropriate fields as follows:
  - **For Word and PPT files,** find the bracketed text. These prompts guide you in how to complete the fields. Type your information over the prompts and delete them when you're done. Ensure that the changes you made did not affect the formatting (e.g., fonts, line spacing), or reformat as needed using the specifications provided.
  - **For fillable PDFs,** click on the "Highlight Existing Fields" tab in the toolbar. Fillable fields will then appear shaded. Roll your cursor over the fields to reveal the prompts. Click into each field and type the information you want to add. Note that you can't add or delete lines. To maintain a clean look, complete the lines you need consecutively, even if your information doesn't match the prompts. Leave any blank fields at the end.

  See sidebar for examples.

- Save the completed document to your computer and rename it as preferred. Consider converting Word documents to PDFs to prevent file corruption, accidental edits, or overwrites. Printing from a PDF also preserves print quality.
- Materials can be reproduced from your desktop using a high-quality color laser printer. If printing from your desktop, use the "print to fit" option. This helps preserve the left and right margins. To ensure a professional finish, take the electronic files to a local commercial printer.
- For best results, print fact sheets on high-quality 24-pound color laser paper, unless otherwise noted.

Sample Customizable Word Documents



THE 1·2·3 APPROACH TO PROVIDER OUTREACH

Marketing and Promotion Plan

[Your Organization Name]

[Your Program Name]

Date:

Objectives

[What are your specific, immediate goals (e.g., increasing enrollment of a particular class by 20%)? What are your broader, long-term goals (e.g., establishing an ongoing relationship with providers in a particular health care network)? Note any targets you need to meet to fulfill the terms of a grant or partnership agreement.]

Partners

Chronic Disease Self-Management Programs

Help Your Patients Take Charge

Name of the Program

What is it?

- Describe the intervention's history or origins, including who developed it.
- Talk about the activities or topics covered.
  - You may need to use sub-bullets to list specific topics or activities.
  - [placeholder for sub-bullet]
  - [placeholder for sub-bullet]
  - [placeholder for sub-bullet]
- Tell how long each class lasts (e.g., 1 hour, 2 hours) and how often classes meet (e.g., once a week for 6 weeks).
- Give the qualifications of the instructors, including trainings and certifications.

Who is it for?

- Describe who the class is designed for—e.g., people who have specific health conditions or certain physical limitations.
- If there are multiple audiences for the class, break up the information into separate bullet points.

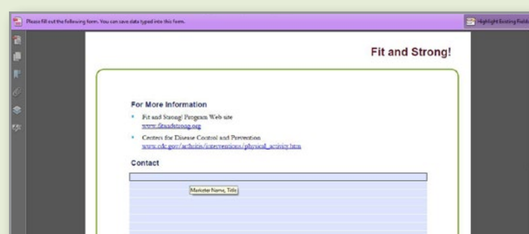
What are the benefits?

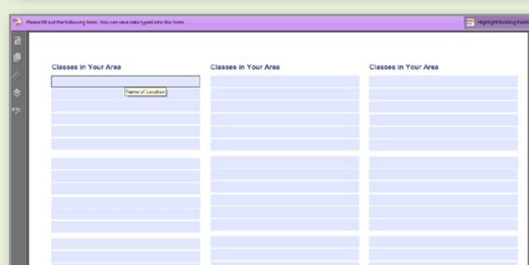
- Note the specific health benefits experienced by class participants. Focus on outcomes such as changes in:
  - Physical symptoms, like pain or fatigue
  - Psychological symptoms, like depression and anxiety
  - Quality-of-life factors, like independence and confidence in disease self-management
- If available, include other relevant findings like participant satisfaction with the class.

For More Information

- Organization Name
  Web site address
- Organization Name
  Web site address

Sample Fillable PDFs



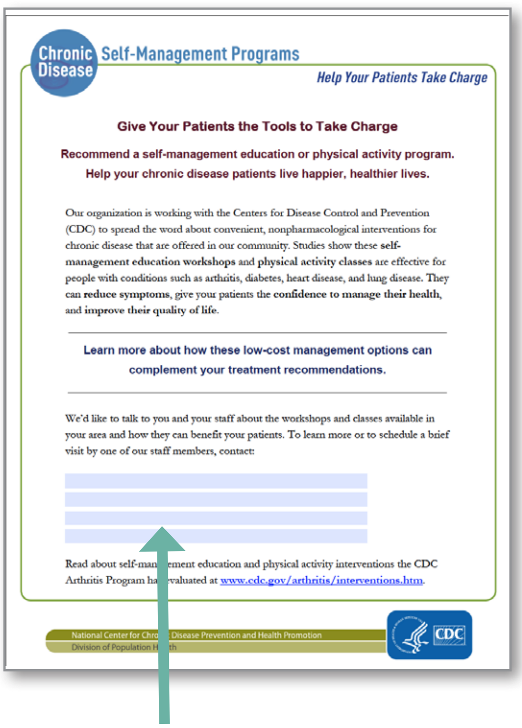


The following sections describe the marketing materials you'll find in the toolkit, and provide instructions for customizing and/or printing. **See Table 3.1 on page 37 for a summary of the materials and production specifications.**

Provider Materials

Introductory Flyer

Busy practices may ask your marketers to follow up cold calls with information in writing before they agree to schedule an outreach visit. This single-page flyer is designed to pique PCPs' interest in self-management education and physical activity interventions for chronic disease, and to encourage them to contact you to learn more. Send the flyer by mail, fax, or e-mail as requested by the practice. Although the flyer invites the practice to contact you, follow up proactively; don't wait for them to contact you.


Chronic Disease Self-Management Programs

Help Your Patients Take Charge

Give Your Patients the Tools to Take Charge

Recommend a self-management education or physical activity program.
Help your chronic disease patients live happier, healthier lives.

Our organization is working with the Centers for Disease Control and Prevention (CDC) to spread the word about convenient, nonpharmacological interventions for chronic disease that are offered in our community. Studies show these **self-management education workshops** and **physical activity classes** are effective for people with conditions such as arthritis, diabetes, heart disease, and lung disease. They can **reduce symptoms**, give your patients the **confidence to manage their health**, and **improve their quality of life**.

Learn more about how these low-cost management options can complement your treatment recommendations.

We'd like to talk to you and your staff about the workshops and classes available in your area and how they can benefit your patients. To learn more or to schedule a brief visit by one of our staff members, contact:

Read about self-management education and physical activity interventions the CDC Arthritis Program has evaluated at www.cdc.gov/arthritis/interventions.htm.

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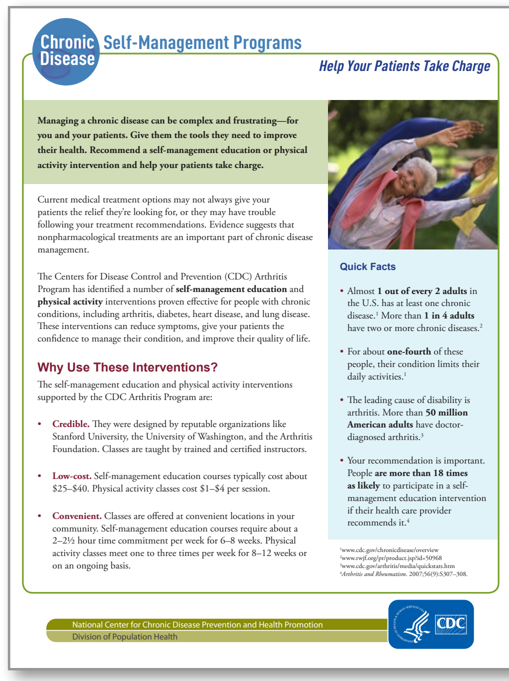
CDC

Customize the flyer by entering your contact information into the fields as prompted in the fillable PDF. We suggest completing the fields as follows:

Fields	Example
Name of Agency or Organization	Florida Department of Health
Marketer Name	Jennifer Moore
(###) ###-####	(123) 555-2222
e-mail address	jmoore@email.gov

Provider Overview Fact Sheet

The provider overview fact sheet discusses the rationale for recommending chronic disease self-management education and physical activity interventions to patients. It highlights the general characteristics and benefits of the interventions, and lists resources for more information. Have a copy of this fact sheet on hand to refer to during the provider outreach visit. Leave copies behind after the visit for the PCP and office staff.


Chronic Disease Self-Management Programs

Help Your Patients Take Charge

Managing a chronic disease can be complex and frustrating—for you and your patients. Give them the tools they need to improve their health. Recommend a self-management education or physical activity intervention and help your patients take charge.

Current medical treatment options may not always give your patients the relief they're looking for, or they may have trouble following your treatment recommendations. Evidence suggests that nonpharmacological treatments are an important part of chronic disease management.

The Centers for Disease Control and Prevention (CDC) Arthritis Program has identified a number of **self-management education** and **physical activity** interventions proven effective for people with chronic conditions, including arthritis, diabetes, heart disease, and lung disease. These interventions can reduce symptoms, give your patients the confidence to manage their condition, and improve their quality of life.

Why Use These Interventions?

The self-management education and physical activity interventions supported by the CDC Arthritis Program are:

- **Credible.** They were designed by reputable organizations like Stanford University, the University of Washington, and the Arthritis Foundation. Classes are taught by trained and certified instructors.
- **Low-cost.** Self-management education courses typically cost about $25–$40. Physical activity classes cost $1–$4 per session.
- **Convenient.** Classes are offered at convenient locations in your community. Self-management education courses require about a 2–2½ hour time commitment per week for 6–8 weeks. Physical activity classes meet one to three times per week for 8–12 weeks or on an ongoing basis.

Quick Facts

- Almost **1 out of every 2 adults** in the U.S. has at least one chronic disease.[1] More than **1 in 4 adults** have two or more chronic diseases.[2]
- For about **one-fourth** of these people, their condition limits their daily activities.[1]
- The leading cause of disability is arthritis. More than **50 million American adults** have doctor-diagnosed arthritis.[3]
- Your recommendation is important. People **are more than 18 times as likely** to participate in a self-management education intervention if their health care provider recommends it.[4]

[1]www.cdc.gov/chronicdisease/overview
[2]www.rwjf.org/pr/product.jsp?id=50968
[3]www.cdc.gov/arthritis/media/quickstats.htm
[4]*Arthritis and Rheumatism*. 2007;56(9):S307–308.

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Division of Population Health

CDC

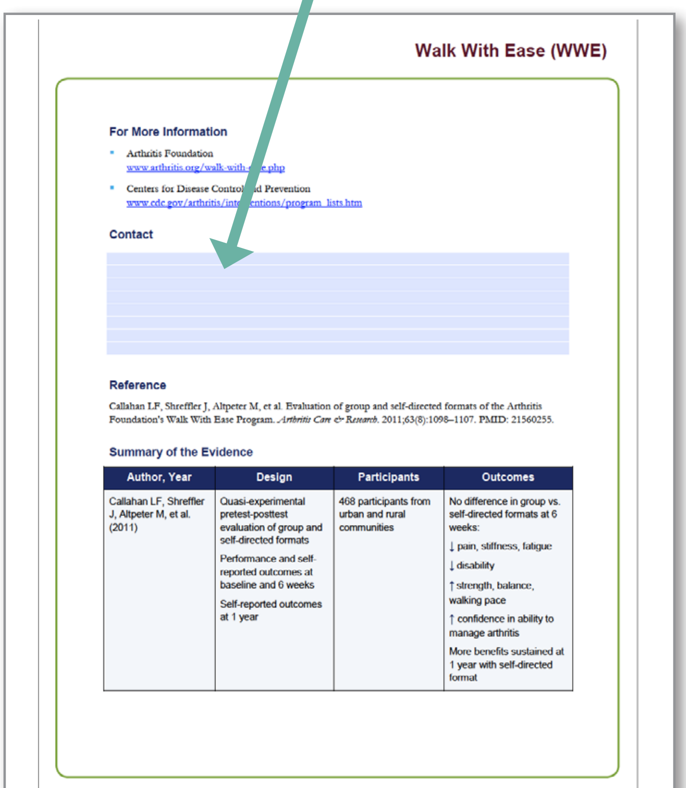
TIP ▶ If you give presentations or participate in community events attended by health care providers, take the introductory flyer along as a handout.

Provider Intervention Fact Sheets

These fact sheets each cover one of the interventions supported by the CDC Arthritis Program. See sidebar on page 32 for a list of the interventions. Each fact sheet includes a description of the intervention and evidence on its effectiveness. A reference list of selected published research articles is included at the end. For some interventions, a table summarizing the research evidence is also included; for others, the evidence summary is provided as a separate document. Select the fact sheets that describe the interventions you're promoting. Have copies on hand to refer to during the provider outreach visit. Leave copies behind after the visit for the PCP and office staff.

Customize the **"Contact" section on page 2** by entering your contact information into the fields as prompted in the fillable PDF. Depending on how your program is organized, you may wish to use general contact information or specify by marketer. We suggest completing the fields as follows:

Fields	Example
Marketer Name, Title	Jennifer Moore, Manager
Name of Agency or Organization	Florida Department of Health
Name of Office or Division	Bureau of Chronic Disease
Street Address	4052 Bald Cypress Way
City, ST 00000	Tallahasee, FL 32399
Phone: (###) ###-####	Phone: (123) 555-2222
Fax: (###) ###-####	Fax: (123) 555-2223
E-mail or Web Address	jmoore@email.gov


Walk With Ease (WWE)

For More Information

- Arthritis Foundation
  www.arthritis.org/walk-with-[illegible]e.php
- Centers for Disease Control [illegible]d Prevention
  www.cdc.gov/arthritis/inte[illegible]entions/program_lists.htm

Contact

Reference

Callahan LF, Shreffler J, Altpeter M, et al. Evaluation of group and self-directed formats of the Arthritis Foundation's Walk With Ease Program. *Arthritis Care & Research*. 2011;63(8):1098–1107. PMID: 21560255.

Summary of the Evidence

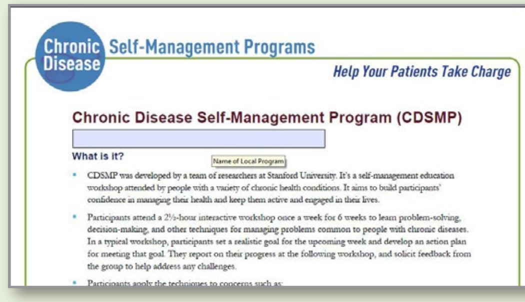
Author, Year	Design	Participants	Outcomes
Callahan LF, Shreffler J, Altpeter M, et al. (2011)	Quasi-experimental pretest-posttest evaluation of group and self-directed formats Performance and self-reported outcomes at baseline and 6 weeks Self-reported outcomes at 1 year	468 participants from urban and rural communities	No difference in group vs. self-directed formats at 6 weeks: ↓ pain, stiffness, fatigue ↓ disability ↑ strength, balance, walking pace ↑ confidence in ability to manage arthritis More benefits sustained at 1 year with self-directed format

Additional Customization Instructions: Provider Intervention Fact Sheets

Additional customization fields are provided for fact sheets on the following interventions.

Chronic Disease Self-Management Program

In some communities, the Chronic Disease Self-Management Program is known by alternate names. As needed, you can add the local name of the program in a field underneath the fact sheet title on page 1.


Chronic Disease Self-Management Programs

Help Your Patients Take Charge

Chronic Disease Self-Management Program (CDSMP)

Name of Local Program

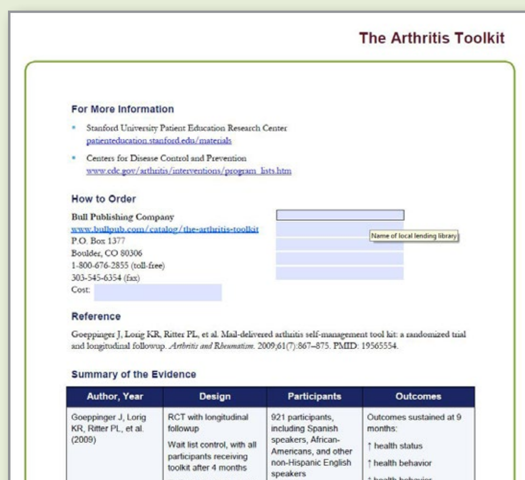
What is it?

- CDSMP was developed by a team of researchers at Stanford University. It's a self-management education workshop attended by people with a variety of chronic health conditions. It aims to build participants' confidence in managing their health and keep them active and engaged in their lives.
- Participants attend a 2½-hour interactive workshop once a week for 6 weeks to learn problem-solving, decision-making, and other techniques for managing problems common to people with chronic diseases. In a typical workshop, participants set a realistic goal for the upcoming week and develop an action plan for meeting that goal. They report on their progress at the following workshop, and solicit feedback from the group to help address any challenges.
- Participants apply the techniques to concerns such as:

The Arthritis Toolkit

In some communities, The Arthritis Toolkit may be available for loan from local lending libraries. As needed, you can add the name and contact information of the library on page 2 in the second column of the "How to Order" section.

You should also complete the "Cost" field at the bottom of the first column. Check the Bell Publishing Company's Web site for up-to-date pricing.


The Arthritis Toolkit

For More Information

- Stanford University Patient Education Research Center
  patienteducation.stanford.edu/materials
- Centers for Disease Control and Prevention
  www.cdc.gov/arthritis/interventions/program_lists.htm

How to Order

Bull Publishing Company
www.bullpub.com/catalog/the-arthritis-toolkit
P.O. Box 1377
Boulder, CO 80306
1-800-676-2855 (toll-free)
303-545-6354 (fax)
Cost:

Name of local lending library

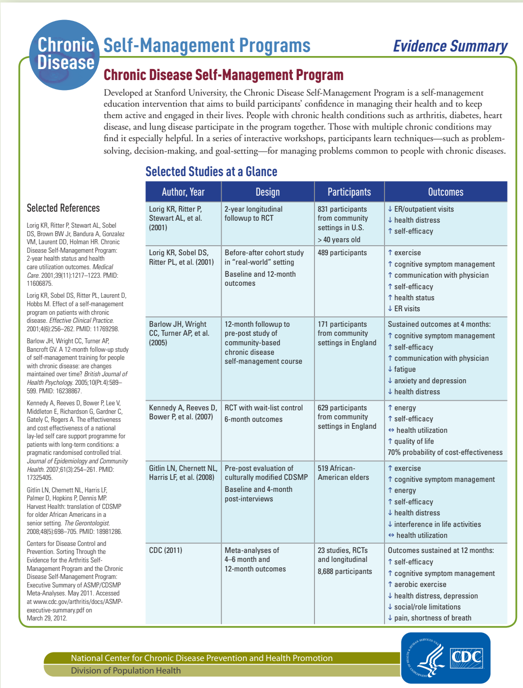
Reference

Goeppinger J, Lorig KR, Ritter PL, et al. Mail-delivered arthritis self-management tool kit: a randomized trial and longitudinal followup. *Arthritis and Rheumatism*. 2009;61(7):867–875. PMID: 19565554.

Summary of the Evidence

Author, Year	Design	Participants	Outcomes
Goeppinger J, Lorig KR, Ritter PL, et al. (2009)	RCT with longitudinal followup Wait list control, with all participants receiving toolkit after 4 months Self-reported outcomes	921 participants, including Spanish speakers, African-Americans, and other non-Hispanic English speakers	Outcomes sustained at 9 months: ↑ health status ↑ health behavior ↑ health behavior

Provider Evidence Summary



Chronic Disease Self-Management Programs

Evidence Summary

Chronic Disease Self-Management Program

Developed at Stanford University, the Chronic Disease Self-Management Program is a self-management education intervention that aims to build participants' confidence in managing their health and to keep them active and engaged in their lives. People with chronic health conditions such as arthritis, diabetes, heart disease, and lung disease participate in the program together. Those with multiple chronic conditions may find it especially helpful. In a series of interactive workshops, participants learn techniques—such as problem-solving, decision-making, and goal-setting—for managing problems common to people with chronic diseases.

Selected Studies at a Glance

Author, Year	Design	Participants	Outcomes
Lorig KR, Ritter P, Stewart AL, et al. (2001)	2-year longitudinal followup to RCT	831 participants from community settings in U.S. > 40 years old	↓ ER/outpatient visits ↓ health distress ↑ self-efficacy
Lorig KR, Sobel DS, Ritter PL, et al. (2001)	Before-after cohort study in "real-world" setting Baseline and 12-month outcomes	489 participants	↑ exercise ↑ cognitive symptom management ↑ communication with physician ↑ self-efficacy ↑ health status ↓ ER visits
Barlow JH, Wright CC, Turner AP, et al. (2005)	12-month followup to pre-post study of community-based chronic disease self-management course	171 participants from community settings in England	Sustained outcomes at 4 months: ↑ cognitive symptom management ↑ self-efficacy ↑ communication with physician ↓ fatigue ↓ anxiety and depression ↓ health distress
Kennedy A, Reeves D, Bower P, et al. (2007)	RCT with wait-list control 6-month outcomes	629 participants from community settings in England	↑ energy ↑ self-efficacy ↔ health utilization ↑ quality of life 70% probability of cost-effectiveness
Gitlin LN, Chernett NL, Harris LF, et al. (2008)	Pre-post evaluation of culturally modified CDSMP Baseline and 4-month post-interviews	519 African-American elders	↑ exercise ↑ cognitive symptom management ↑ energy ↑ self-efficacy ↓ health distress ↓ interference in life activities ↔ health utilization
CDC (2011)	Meta-analyses of 4–6 month and 12-month outcomes	23 studies, RCTs and longitudinal 8,688 participants	Outcomes sustained at 12 months: ↑ self-efficacy ↑ cognitive symptom management ↑ aerobic exercise ↓ health distress, depression ↓ social/role limitations ↓ pain, shortness of breath

Selected References

Lorig KR, Ritter P, Stewart AL, Sobel DS, Brown BW Jr, Bandura A, Gonzalez VM, Laurent DD, Holman HR. Chronic Disease Self-Management Program: 2-year health status and health care utilization outcomes. *Medical Care*. 2001;39(11):1217–1223. PMID: 11606875.

Lorig KR, Sobel DS, Ritter PL, Laurent D, Hobbs M. Effect of a self-management program on patients with chronic disease. *Effective Clinical Practice*. 2001;4(6):256–262. PMID: 11769298.

Barlow JH, Wright CC, Turner AP, Bancroft GV. A 12-month follow-up study of self-management training for people with chronic disease: are changes maintained over time? *British Journal of Health Psychology*. 2005;10(Pt.4):589–599. PMID: 16238867.

Kennedy A, Reeves D, Bower P, Lee V, Middleton E, Richardson G, Gardner C, Gately C, Rogers A. The effectiveness and cost effectiveness of a national lay-led self care support programme for patients with long-term conditions: a pragmatic randomised controlled trial. *Journal of Epidemiology and Community Health*. 2007;61(3):254–261. PMID: 17325405.

Gitlin LN, Chernett NL, Harris LF, Palmer D, Hopkins P, Dennis MP. Harvest Health: translation of CDSMP for older African Americans in a senior setting. *The Gerontologist*. 2008;48(5):698–705. PMID: 18981286.

Centers for Disease Control and Prevention. Sorting Through the Evidence for the Arthritis Self-Management Program and the Chronic Disease Self-Management Program: Executive Summary of ASMP/CDSMP Meta-Analyses. May 2011. Accessed at www.cdc.gov/arthritis/docs/ASMP-executive-summary.pdf on March 29, 2012.

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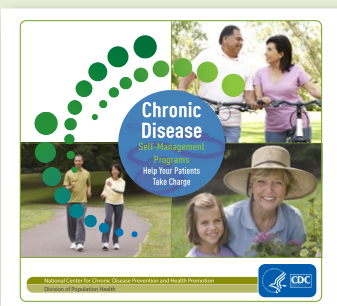
Outreach Folder Label



Follow-up Postcard

Provider Evidence Summary

Evidence summaries are provided for interventions with longer reference lists. Organized as tables, they highlight findings from key studies on an intervention's effectiveness. These studies are published in peer-reviewed scientific journals and indexed on PubMed (www.ncbi.nlm.nih.gov/pubmed). When talking to providers who want more information on the evidence base for a particular intervention, you can refer them to the evidence summary. Leave copies behind after your outreach visit.

Outreach Folder Label

Arrange the provider and patient materials into packets prior to your outreach visit. In a pilot test of the 1•2•3 Approach, packaging materials in a standard 2-pocket folder worked well to keep the materials organized during the outreach visit. To maintain the look and feel of the materials, attach a label to the front of the folder. Print them on full-size sheet Avery labels, size 8½" x 11" (Avery product number 8255).

Follow-up Postcard

An electronic copy of a postcard you can send to providers to follow up an outreach visit is included with this marketing guide. The PDF file prints two cards per sheet. When sending follow-up cards to providers, use the back of the card to hand write messages and information such as new class announcements and patient enrollment updates. They can be reproduced on your desktop printer using at least 28 lb color laser paper. For a more professional finish, take the electronic file to a local printer and ask for the postcards to be printed on 80 lb matte cover.

Slide Presentation

Some PCP offices or health networks may give you time to make a brief presentation to staff about the interventions you're promoting. You might also have opportunities to present at events in your community. Use the PowerPoint slide presentation in this toolkit to guide group presentations like these. The slides cover the following topics:

- Rationale for recommending self-management interventions for chronic disease
- Introduction to the types of interventions (i.e., self-management education and physical activity)
- Overview of the general benefits
- Descriptions and benefits of the interventions you are promoting locally
- Resources and contact information

You can customize the slide set by doing the following:

- On **Slides 2 and 3**, there is room for you to add state data on common chronic diseases. Using "Normal" view, click into the slide and modify the text as needed. If you do not want to include state data, you can delete this text and combine the overall statistics into one slide.
- On **Slide 13**, add the names of the interventions you're promoting.
- On the **final slide** (titled "Questions?"), add your local contact information.

Delete the slides on the interventions you're not promoting. An easy way to delete slides is to use the "Normal" or "Slide Sorter" view, right click on the slide you want to remove, and select "Delete Slide" from the pop-up menu.

You can also add notes to guide your presentation. Use the "Notes Page" view and "click to add text."

TIP ▶ In a pilot test of the 1•2•3 Approach, marketers found that presenting at practice staff meetings or other local events was a good way to reach multiple providers at once and generate initial interest. However, ongoing direct contact was required to produce provider recommendations.

Patient Materials

Patient Brochure

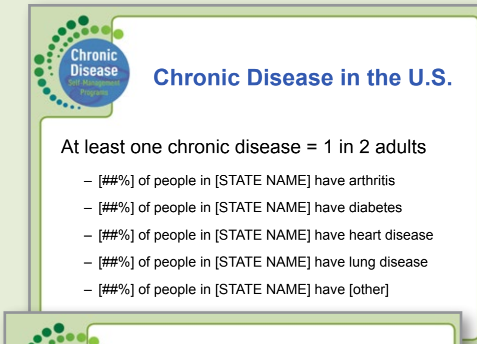
The trifold brochure *Take Charge! Managing Your Health* (in Spanish, *¡Hágase cargo! Tomando Control de su Salud*) is a plain language overview of self-management education and physical activity interventions for chronic disease. Leave a supply of these brochures with providers after the outreach visit and encourage them to pass on copies to patients who could benefit.

You can print these brochures from a desktop printer and fold them by hand. **See page 30 for instructions on brochure.** For best results, however, take the electronic file to a local printer. Use the file marked "Print;" it includes crop marks to indicate where the paper should be scored and folded. Ask for the brochure to be printed to these specifications:

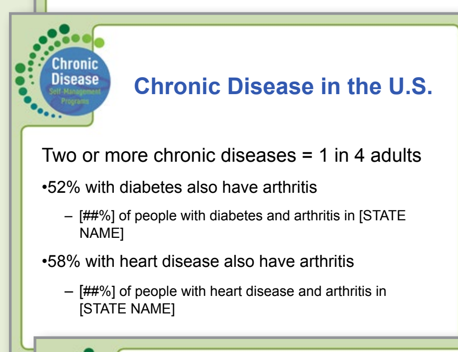
- Flat Size: 8.5" x 11"
- Finished Size: 3.66" x 8.5"
- Inks: 4/4 plus + satin aqueous (CMYK)
- Stock: 100 lb text
- Folding: Score and fold accordion-style

PowerPoint Slides

Slide 2

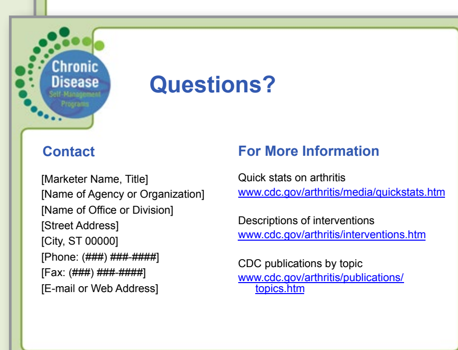


Slide 3



Slide 13

Final Slide

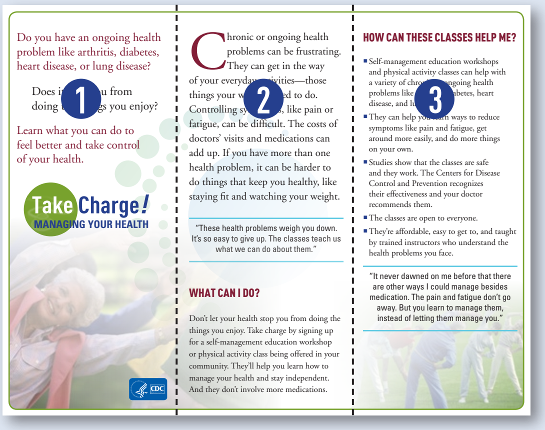


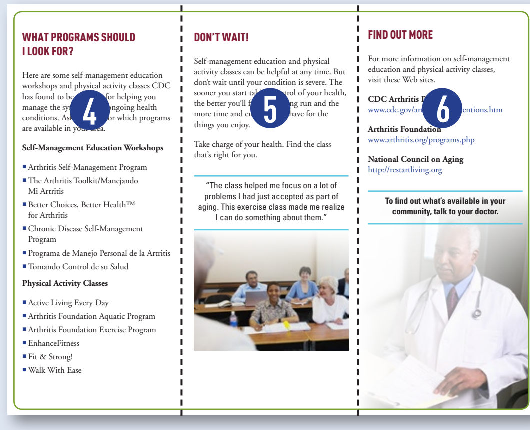
Folding the Patient Brochure

The patient brochure was designed to use an accordion fold to maintain graphic quality for desktop printing. An accordion fold— also called a z-fold or zigzag fold—creates a total of six panels of equal size. You'll make two folds in opposite directions so that the brochure resembles the letter "z." Here's how to do it:

1. Print the brochure to a high-quality color printer as specified. Make sure your printer is set for duplex or double-sided printing. Adjust your printer settings to print the document "head-to-head," "top-to-top," or "flip up."

2. Lay the printed sheet flat with panels 1, 2, and 3 facing up.





Fold Fold Fold Fold

3. Fold panel 3 from right to left so that it faces panel 2.

4. Turn the sheet over so that panels 5 and 6 are face-up. Fold panel 6 from right to left so that it faces panel 5.

5. The sheet will be folded like an accordion. Panel 1 will form the front cover of the brochure.

Accordion Fold

Folded Brochure (front view)

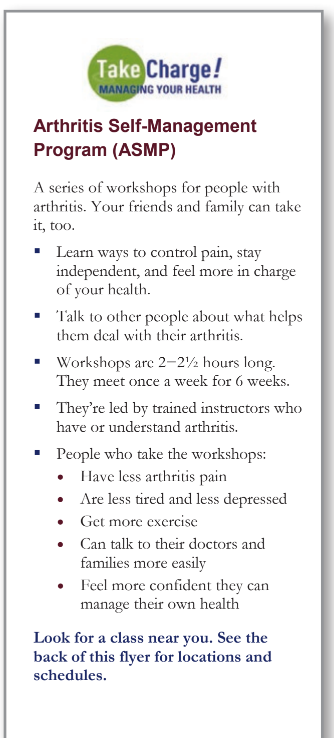
6. When folded, each panel should measure 3.66" x 8.5".

Class Schedule

Designed to accompany or be inserted in the trifold brochure, these customizable pieces offer a brief plain language description of the intervention on side 1, with space to add local class information on side 2. You can reproduce these from a desktop printer on a heavier weight paper (up to 80 lb text), or take the electronic file to a local printer and have them reproduced on 65 lb cover. The file prints three class schedules per sheet; trim them manually so that each schedule is the same size. For best results, take the electronic file to a local printer to be reproduced and trimmed.

A class schedule is available for each of the 12 interventions covered in the provider fact sheets, in both English and Spanish as appropriate. For each intervention you're promoting, customize the **"Classes In Your Area" section on side 2** by entering local class information into the fields as prompted in the fillable PDF. We suggest completing the fields as follows:

Fields	Example
Name of Location	**Tri-County YMCA**
Address	1234 Main St., Kansas City
(###) ###-####	(123) 555-2222
[Day, dates of classes]	June 7–July 28
00:00–00:00 a.m./p.m.	10:00–11:00 a.m.
$$ per session/$$ for # sessions	$2 per session



Take Charge! MANAGING YOUR HEALTH

Arthritis Self-Management Program (ASMP)

A series of workshops for people with arthritis. Your friends and family can take it, too.

- Learn ways to control pain, stay independent, and feel more in charge of your health.
- Talk to other people about what helps them deal with their arthritis.
- Workshops are 2–2½ hours long. They meet once a week for 6 weeks.
- They're led by trained instructors who have or understand arthritis.
- People who take the workshops:
  - Have less arthritis pain
  - Are less tired and less depressed
  - Get more exercise
  - Can talk to their doctors and families more easily
  - Feel more confident they can manage their own health

Look for a class near you. See the back of this flyer for locations and schedules.

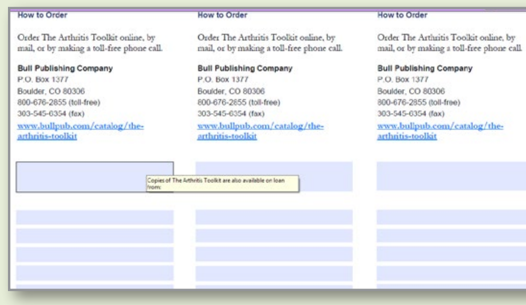
Classes in Your Area

Additional Customization Instructions: Patient Class Schedules

Additional customization fields are provided for class schedules on the following interventions.

The Arthritis Toolkit/Manejando Mi Artritis

In some communities, The Arthritis Toolkit may be available for loan from local lending libraries. As needed, you can add the name and contact information of the library on side 2 of both the English and Spanish versions of the class schedule, underneath the Bell Publishing Company information. There is space for you to add an introductory sentence—for example, "Copies of The Arthritis Toolkit are available on loan from"—followed by the name and contact information of the library.



How to Order

Order The Arthritis Toolkit online, by mail, or by making a toll-free phone call.

Bull Publishing Company
P.O. Box 1377
Boulder, CO 80306
800-676-2855 (toll-free)
303-545-6354 (fax)
www.bullpub.com/catalog/the-arthritis-toolkit

How to Order

Order The Arthritis Toolkit online, by mail, or by making a toll-free phone call.

Bull Publishing Company
P.O. Box 1377
Boulder, CO 80306
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How to Order

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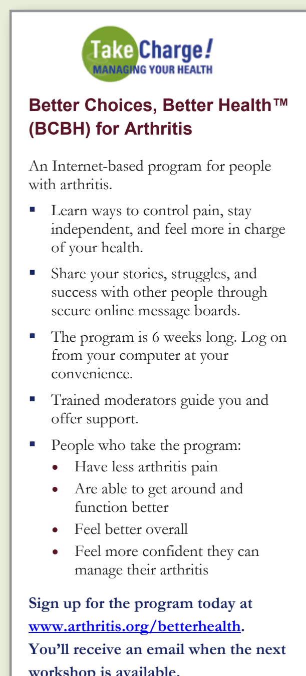
Bull Publishing Company
P.O. Box 1377
Boulder, CO 80306
800-676-2855 (toll-free)
303-545-6354 (fax)
www.bullpub.com/catalog/the-arthritis-toolkit

Copies of The Arthritis Toolkit are also available on loan from:

Better Choices, Better Health™ for Arthritis

This program is available by Internet only; therefore, there are no customization fields in this document and no side 2.



Take Charge! MANAGING YOUR HEALTH

Better Choices, Better Health™ (BCBH) for Arthritis

An Internet-based program for people with arthritis.

- Learn ways to control pain, stay independent, and feel more in charge of your health.
- Share your stories, struggles, and success with other people through secure online message boards.
- The program is 6 weeks long. Log on from your computer at your convenience.
- Trained moderators guide you and offer support.
- People who take the program:
  - Have less arthritis pain
  - Are able to get around and function better
  - Feel better overall
  - Feel more confident they can manage their arthritis

Sign up for the program today at www.arthritis.org/betterhealth. You'll receive an email when the next workshop is available.

Interventions Covered in the Toolkit

The toolkit provides fact sheets on the following self-management education and physical activity interventions. The CDC Arthritis Program has identified these interventions as arthritis appropriate, evidence-based, and suitable for use as a public health intervention.

Self-Management Education Workshops

- Arthritis Self-Management Program
- The Arthritis Toolkit/Manajando Mi Artritis
- Chronic Disease Self-Management Program
- Better Choices, Better Health™ for Arthritis
- Programa de Manejo Personal de la Artritis
- Tomando Control de su Salud

Physical Activity Classes

- Active Living Every Day
- Arthritis Foundation Aquatic Program
- Arthritis Foundation Exercise Program
- EnhanceFitness
- Fit & Strong!
- Walk With Ease

Templates for New Materials

Provider Intervention Fact Sheet Template

If you're promoting evidence-based interventions that aren't covered by the fact sheets in this toolkit, you can use the blank template in Word to create your own. To keep a unified look to the materials, follow the style used in the other provider intervention fact sheets; use the same fonts and colors and organize the text the same way. **You may add your organization's logo, but please do not use the CDC logo on materials you develop yourself.**

Refer to published journal articles and other reputable online sources with information about the intervention, such as national organizations, academic institutions, or the developer. The fact sheet does not have to be comprehensive; keep your text concise. Cover the key points so that providers have enough information to decide whether a particular intervention is right for a particular patient, and to answer patients' questions or concerns. Aim to keep the first four sections—through What Are the Benefits?—to one page. In general, follow practices for clear communication such as chunking text into bullets and starting a new bullet for each topic. See www.plainlanguage.gov/howto/quickreference/quicktips.cfm for quick tips on writing clearly.

Here are some tips for completing each section of the fact sheet. **See page 35 for formatting specifications.**

1. **Title**. Use the name of the program as the title of the fact sheet. Follow the usual rules for capitalization (i.e., capitalize all important words).

TIP ▶ On page 2 of the fact sheet template, remember to add the name of the program to the header. Place your cursor at the top of the page, above the green line, and double click. Then single click on the text that reads "Name of the Program," and type over it using the same title as you did on page 1.

2. **What is it?** This section should give a clear snapshot of what a participant who takes the class can expect. In separate bullet points, briefly describe:
   - The intervention's history or origins, including who developed it
   - The length of the class and how often it meets
   - Activities or topics covered
   - Qualifications of the leaders, including trainings and certifications

3. **Who Is It For?** Describe who the class is designed for—e.g., people who have specific health conditions or physical limitation or who are in a certain age range.
4. **What Are the Benefits?** Note the specific health benefits experienced by class participants. Focus on outcomes such as improvements in physical symptoms (like pain or fatigue), psychological symptoms (like depression and anxiety), and quality of life (including increased independence and confidence in managing a chronic health condition). Other relevant information may include participant satisfaction with the class and adherence to the schedule. To ensure the credibility of your materials, cite findings from published scientific research and program evaluations.
5. **For More Information.** Give the names and Web sites of two or three organizations PCPs can consult for more information about the intervention. Use the Web sites you referenced to write the fact sheet. They may include the organization that developed the program (like a university), a national advocacy organization that administers the program around the country (like the Arthritis Foundation or the YMCA), or a federal or local government agency (like CDC or your state health department).
6. **Contact.** Add the name and title of the marketer doing the outreach; the name of your program or organization; and your program's mailing address, phone number, and e-mail or Web site.
7. **References.** List the journal articles you referred to when writing the fact sheet. If there are numerous articles, list only the most relevant selection (no more than 6–8). Use Medline citation style.
8. **Summary of the Evidence.** Findings from a pilot test of the 1•2•3 Approach suggest that PCPs prefer at-a-glance summaries of study results to support clinical decision-making about whether to use an intervention. Summarize the results of the studies in your reference list by completing the table columns with the following information:
   - ***Author, Year.*** Provide the names of the first three authors using Medline citation style. Use "et al." after the third author if there are more than three authors. Include the year of publication in parentheses.
   - ***Design.*** Give pertinent details about the study design, such as the type of study, duration, and types of outcomes reported.

Chronic Disease Self-Management Programs

Help Your Patients Take Charge

1 **Name of the Program**

2 **What is it?**

- Describe the intervention's history or origins, including who developed it.
- Talk about the activities or topics covered.
  - You may need to use sub-bullets to list specific topics or activities.
  - [placeholder for sub-bullet]
  - [placeholder for sub-bullet]
  - [placeholder for sub-bullet]
- Tell how long each class lasts (e.g., 1 hour, 2 hours) and how often classes meet (e.g., once a week for 6 weeks).
- Give the qualifications of the instructors, including trainings and certifications.

3 **Who is it for?**

- Describe who the class is designed for—e.g., people who have specific health conditions or certain physical limitations.
- If there are multiple audiences for the class, break up the information into separate bullet points.

4 **What are the benefits?**

- Note the specific health benefits experienced by class participants. Focus on outcomes such as changes in:
  - Physical symptoms, like pain or fatigue
  - Psychological symptoms, like depression and anxiety
  - Quality-of-life factors, like independence and confidence in disease self-management
- If available, include other relevant findings like participant satisfaction with the class.

5 **For More Information**

- Organization Name
  Web site address
- Organization Name
  Web site address

Name of the Program

6 **Contact**

Marketer Name, Title
Name of Agency or Organization
Name of Office or Division
Street Address
City, ST 00000
Phone: (###) ###-####
Fax: (###) ###-####
E-mail or Web Address

7 **References**

Last Name AB, Last Name CD, Last Name EF, et al. Title of journal article in sentence case. *Title of Journal.* Year;Vol(Issue):Page–Page. PMID: ########.

Last Name AB, Last Name CD, Last Name EF. Title of journal article in sentence case. *Title of Journal.* Year;Vol(Issue):Page–Page. PMID: ########.

Last Name AB, Last Name CD, Last Name EF. Title of journal article in sentence case. *Title of Journal.* Year;Vol(Issue):Page–Page. PMID: ########.

8 **Summary of the Evidence**

Author, Year	Design	Participants	Outcomes
Author AB, Author CD, Author E, et al. (YYYY)	Type of study Duration Outcomes reported	Number and type of participants	↓ symptom x ↑ symptom y Other outcomes as reported

- ***Participants.*** Give the number of participants and any relevant demographic or inclusion criteria, such as the recruitment setting or whether participants belong to a specific population.
- ***Outcomes.*** List the key findings of the study as reported by the study authors. Focus on disease symptoms, psychological or behavioral changes, and quality of life measures. To conserve space, use the Insert > Symbol function in Word to add directional or other symbols to represent changes—for example, a down arrow to represent a decrease.

Try to keep the length of the fact sheet to no more than two pages. If you can't fit your summary table to page two of the fact sheet, start it on a new page. You can hand it out to providers as a separate document to supplement the fact sheet.

Here's an example of a summary table entry:

Author, Year	Design	Participants	Outcomes
Callahan LF, Shreffler J, Altpeter M, et al. (2011)	Quasi-experimental pretest-posttest evaluation of group and self-directed formats Performance and self-reported outcomes at baseline and 6 weeks Self-reported outcomes at 1 year	468 participants from urban and rural communities	No difference in group vs. self-directed formats at 6 weeks: ↓ pain, stiffness, fatigue ↓ disability ↑ strength, balance, walking pace ↑ confidence in ability to manage arthritis More benefits sustained at 1 year with self-directed format

Formatting Specifications for Provider Intervention Fact Sheet

Title Header

- *Font:* Arial
- *Font Style:* Bold
- *Font Size:* 18 point
- *Font Color:* Custom; red 90, green 22, blue 39
- *Paragraph spacing:* 12 point above and below (adjust as needed)
- *Line spacing:* Multiple at 1.15

Section Headers

- *Font:* Arial
- *Font Style:* Bold
- *Font Size:* 12 point
- *Font Color:* Custom; red 27, green 39, blue 100
- *Paragraph spacing:* 18 point above and 6 point below (adjust as needed)
- *Line spacing:* Multiple at 1.15

Body Text

- *Font:* Garamond
- *Font Style:* Regular
- *Font Size:* 11 point
- *Font Color:* Automatic (Black)
- *Paragraph spacing:* 6 point below (adjust as needed)
- *Line Spacing:* Multiple at 1.15

Summary Table

- *Table Size:* 6.5 inches
- *Alignment:* Center

Table Headers

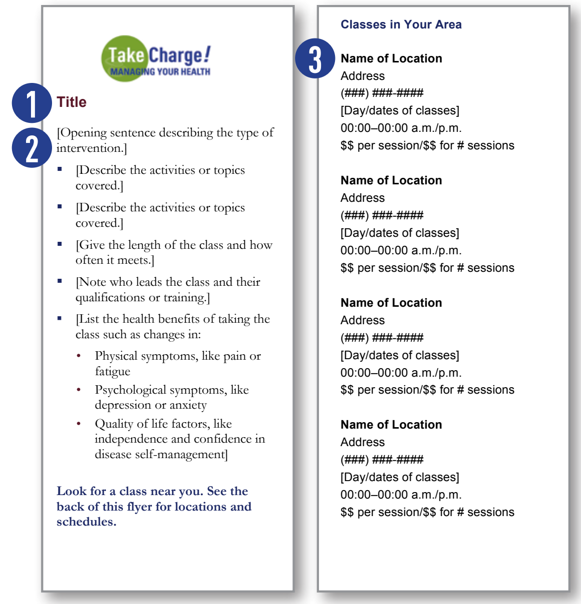
- *Font:* Arial
- *Font Style:* Bold
- *Font Size:* 11 point
- *Font Color:* White
- *Fill:* Custom; red 27, green 39, blue 100
- *Paragraph spacing:* 6 point above and below (adjust as needed)
- *Line spacing:* Multiple at 1.15

Table Text

- *Font:* Arial
- *Font Style:* Regular
- *Font Size:* 10 point
- *Font Color:* Automatic (Black)
- *Fill:* Custom; red 243, green 246, blue 251
- *Paragraph spacing:* 6 point above and below (adjust as needed)
- *Line spacing:* Multiple at 1.15

Class Schedule Template

If you're promoting evidence-based interventions that aren't covered by the materials in this toolkit, you can use the blank class schedule template to create your own. To keep a unified look to the materials, follow the style used in the other class schedules using the same fonts and colors and organizing the text the same way. **You may add your organization's logo, but please do not use the CDC logo on materials you develop yourself.**


Take Charge! MANAGING YOUR HEALTH

1 Title

2 [Opening sentence describing the type of intervention.]

- [Describe the activities or topics covered.]
- [Describe the activities or topics covered.]
- [Give the length of the class and how often it meets.]
- [Note who leads the class and their qualifications or training.]
- [List the health benefits of taking the class such as changes in:
  - Physical symptoms, like pain or fatigue
  - Psychological symptoms, like depression or anxiety
  - Quality of life factors, like independence and confidence in disease self-management]

Look for a class near you. See the back of this flyer for locations and schedules.

Classes in Your Area

3 **Name of Location**
Address
(###) ###-####
[Day/dates of classes]
00:00–00:00 a.m./p.m.
$$ per session/$$ for # sessions

Name of Location
Address
(###) ###-####
[Day/dates of classes]
00:00–00:00 a.m./p.m.
$$ per session/$$ for # sessions

Name of Location
Address
(###) ###-####
[Day/dates of classes]
00:00–00:00 a.m./p.m.
$$ per session/$$ for # sessions

Name of Location
Address
(###) ###-####
[Day/dates of classes]
00:00–00:00 a.m./p.m.
$$ per session/$$ for # sessions

Here are some tips for completing side 1; the template.

1. **Title.** Use the name of the program as the title of the fact sheet. Follow the usual rules for capitalization (i.e., capitalize all important words).
2. **Description.** This section should give a clear snapshot of what participants can expect when they take the class. Insert an opening sentence that describes what type of intervention it is and who it's for. Then in separate bullet points, briefly describe the:
   - Activities or topics covered
   - Length of the class and how often it meets
   - Qualifications of the leaders, including trainings and certifications
   - Specific health benefits of taking the class
3. **Classes in Your Area.** Refer to earlier guidance for adding local class information.

Work from the information you already prepared for the provider intervention fact sheet. Keep your descriptions short and concise and as close to an eighth grade reading level as possible. See NIH guidance on plain language (www.plainlanguage.gov) for additional tips on developing materials for a general audience.

Formatting Specifications for Class Schedule

Side 1

Title Header

- *Font:* Arial
- *Font Style:* Bold
- *Font Size:* 14 point
- *Font Color:* Custom; red 90, green 22, blue 39
- *Spacing:* 12 point after (adjust as needed)
- *Line spacing:* Multiple at 1.15

Body Text

- *Font:* Garamond
- *Font Style:* Regular
- *Font Size:* 13 point
- *Font Color:* Automatic (Black)
- *Spacing:* 6 point after (adjust as needed)
- *Line Spacing:* Multiple at 1.15

Side 2

Body Text

- *Font:* Arial
- *Font Style:* Regular
- *Font Size:* 12 point
- *Font Color:* Automatic (Black)
- *Line Spacing:* Multiple at 1.25

Poster

Checklist for Preparing Marketing Materials

- Customize fact sheets for providers and patients.
- Print materials from your desktop printer or arrange to have them reproduced by a local commercial printer.
- Prepare folders for the outreach materials. For each practice, you'll need:

  ✓ 1 outreach folder
  ✓ 1 outreach folder label
  ✓ 1 copy of the provider overview fact sheet for each PCP or staff member
  ✓ 1 copy of each provider intervention fact sheet for each PCP or staff member
  ✓ 1 copy of each evidence summary (if available) for each PCP or staff member
  ✓ 50–100 copies of the patient brochure
  ✓ 50–100 copies of each class schedule
  ✓ 1–3 posters

- Prepare slide presentation as needed.
- Have copies of the follow-up postcards ready to go.

Poster

An electronic copy of a poster promoting self-management education and physical activity interventions for chronic disease is included in this toolkit. Leave several posters behind after your outreach visit for providers to display in their office waiting and exam rooms. Posters can be reproduced on your desktop printer using 24 lb or 28 lb color laser paper. For a more professional finish, take the electronic file to a local printer and ask for the posters to be printed on 80 lb matte text.

What You'll Need

Training Video (see www.cdc.gov/arthritis/interventions/marketing-support/1-2-3-approach)

Appendix C: Training and Marketing Tools

- Phone Call and Outreach Visit Scripts
- Slide Presentation

Appendix D: Customizable Marketing Materials

- Introductory Flyer
- Introductory Flyer (sample)
- Provider Overview Fact Sheet
- Provider Intervention Fact Sheets
- Provider Intervention Fact Sheet (samples)
- Evidence Summaries
- Outreach Folder Label
- Follow-up Postcard
- Patient Brochure (in English and Spanish)
- Class Schedules
- Class Schedules (samples)
- Poster

Table 3.1 Summary of Outreach Materials for the 1•2•3 Approach

MATERIAL	PURPOSE	FILE FORMAT	CUSTOMIZE?	PRINT SPECIFICATIONS	
				Paper	Finish Size
PROVIDER MATERIALS **Chronic Disease Self-Management Programs: Help Your Patients Take Charge!**					
Introductory Flyer	Introduces providers to the benefits of self-management for their patients, and encourages them to schedule an outreach visit to learn more	Fillable PDF	Yes	24# or 32#	8½″ x 11″
Provider Overview Fact Sheet	Discusses the rationale for recommending self-management interventions, including benefits for patients	PDF	No	24# or 32#	8½″ x 11″
Provider Intervention Fact Sheets	Describe individual interventions to help providers decide whether a particular intervention is right for a particular patient and answer questions or concerns	Fillable PDF	Yes	24# or 32#	8½″ x 11″
Evidence Summaries	Highlight findings from key studies on an intervention's effectiveness	PDF	No	24# or 32#	8½″ x 11″
Outreach Folder Label	To affix to the front of provider outreach folders	PDF	No	Avery labels, product 8255 8½″ x 11″ sheet	
Follow-up Postcard	Helps you stay in touch with providers after the outreach visit	PDF	No	65# cardstock (desktop) or 100# text (commercial)	5″ x 7″
Slide Presentation	Summarizes information from the print materials in a presentation format	PowerPoint	Yes	n/a	n/a
Provider Intervention Fact Sheet Template	Allows you to create your own fact sheets on interventions not covered in this toolkit while maintaining a unified look to your materials	Word	Yes	24# or 32#	8½″ x 11″
PATIENT MATERIALS **Take Charge! Managing Your Health**					
Patient Brochure	Provides a plain language overview of self-management interventions for chronic disease	PDF	No	32# (desktop) or 100# text (commercial)	Flat 8½″ x 11″ Finished 3.66″ x 8½″
Class Schedules	Offer a brief plain language description and local class dates, times, and locations	Fillable PDF	Yes	24# or 32# (desktop) or 100# text (commercial)	3.66″ x 8.½″
Poster	Designed to be displayed in PCP offices to promote the concept of self-management to patients	PDF	No	65# cardstock (desktop) or 100# text (commercial)	11″ x 17″
Class Schedule Template	Allows you to create your own class schedules for interventions not covered in this toolkit while maintaining a unified look to your materials	Word	Yes	24# or 32# (desktop) or 100# text (commercial)	3.66″ x 8.½″