

## **Chronic Disease Self-Management Education Program Group Leader Script**

### **Read the following statement to participants prior to their completion of the Participant Consent Form and Participant Information Survey**

- This workshop is made possible through a grant from the U.S. Administration on Community Living and the Colorado Department of Human Services, Division of Aging and Adult Services. The U.S. Administration on Community Living has asked us to give you a two-page Survey. This is optional for you and you do not need to complete the Survey to take this workshop.
- Before we can share information about you, you must sign a Consent Form that explains how your information will be used and protected.
- Your information is very valuable to us. We use it to learn who is being reached by this program and to improve our services. It also helps our funding agencies show that they are spending their money wisely.
- At the top of the Survey pages, we ask for your name or some other way to identify you such as a number or nickname. We will use this to match your information to an Attendance Log to track how many times you attend a class. We do not share your name with anyone else.
- The Survey also asks you to provide your birth date, zip code, and gender. If you have Medicare and you agree to be part of a possible Medicare study, this information may be matched with your Medicare claims information so that we can measure changes in health care use and costs.
- We will follow very strict rules to protect all of your information and to keep it private. We will maintain these paper forms securely following standard practices for protecting private data. After a trained person enters your information into a secure computer, we will destroy the paper forms. If you agree to the Medicare study, we will also follow strict rules to keep your information private.
- Completing the Survey is entirely voluntary and you may skip any questions that you do not want to answer. While doing the Survey, you may ask us to explain any questions that you find confusing.
- If you decide not to complete the Survey you can still participate in this program.
- Please take time now to read the entire Consent Form or tell us if you would like someone to read the form to you. Please let us know if you have any questions now or as you read through the Consent Form.