

Living Well with Chronic Conditions Leader Training

Stanford's Chronic Disease Self-Management Program

Organizations interested in offering the 6-week Living Well with Chronic Conditions program are invited to apply to send teams to a 4-day Leader Training. **Applications must be received at least three weeks prior to training start dates.**

For more information on Living Well with Chronic Conditions in Oregon, please refer to www.healthoregon.org/livingwell/. For more information about the Stanford Chronic Disease Self-Management Program (CDSMP), please refer to <http://patienteducation.stanford.edu/programs/cdsmp.html>

Who May Apply

Each Living Well program held in the community must be led by two trained Leaders. Stanford strongly recommends that Leaders be individuals living with a chronic condition, and that at least one of the two Leaders be a peer Leader and not a health or social service provider. It is also very helpful if Leaders have attended a workshop as a participant prior to being trained. Participants must attend the full 4 days of training and facilitate a program to become a Leader. Organizations offering this program must do so under a license from Stanford University (see below).

Organizational & Leader Commitment

Organizations sending participants are committing to the initial 4 days of training, plus the time for coordinating and providing at least 2 six-week community programs within the following 12 months, with the first program being held within two months of training. Organizations also commit to sending DHS follow-up information about workshops and participants on a regular basis, using forms provided by DHS. Other potential program costs that organizations should consider include program coordination, participant materials and program licensing (see below).

Leader Training

Participation is limited to 20 people, with priority offered to registrants demonstrating the following capacities:

- Commitment to offer at least two 6-week programs within one year of being trained.
- Organizational ability to support promotion and implementation of the program.
- Organizational teams of two or more, including peer leaders with chronic conditions.
- Ability to reach diverse audiences including low income and high-risk populations.

Training Costs

Currently, the 4-day Leader Training is offered at regional training centers at no cost due to organizational support from the regional training organizations and grant support from various sources. As part of the training, trainees receive training materials, a leader's muscle relaxation CD, as well as 10 participant books that can be used in offering the program. Additional books can be purchased by the supporting organization (cost \$18.95; with discounts available for quantity orders), or a small book fee can be charged to program participants. For more information on how to obtain participant books, contact Bull Publishing at (800) 676-2855.

Program License

Living Well with Chronic Conditions is the Chronic Disease Self-Management Program, a licensed program of Stanford University, and Stanford retains ownership of the copyright to the program. Leaders agree that they will not alter the program.

Agencies or organizations offering CDSMP must be licensed. **A 3-year organizational license from Stanford is \$500** for organizations that will offer up to 10 programs per year. For further information on licensure, please see <http://patienteducation.stanford.edu/licensing/> or call Stanford directly at (650) 723-7935.

There are a number of licensed organizations and agencies within Oregon (see list at <http://patienteducation.stanford.edu/organ/cdsites.html#OR>). If a group is offering the program in collaboration with one of these currently licensed organizations, they may be covered by an existing license. It also may be possible for small non-profit organizations to request a reduced license fee from Stanford. Organizations or agencies wishing to offer the program on their own must purchase their own license.

Application Checklist

To apply for an upcoming Leader Training, please submit the following documents to the regional Training Center hosting the training you are applying for (Training Center and contact information on page 1).

- 1. Program Licensure from Stanford University
- 2. Organizational Questions (pages 4-5)
- 3. Applicant Information (pages 4-6)

Living Well with Chronic Conditions Leader Training Application Form

1. Program Licensure

In order to participate in this training, you must be affiliated with an organization that is licensed by Stanford to deliver the Chronic Disease Self-Management Program (CDSMP). Please indicate your organization's status below.

- My organization holds a current Stanford CDSMP license.
- My organization is partnering with an organization that holds a current Stanford CDSMP license, a letter of agreement describing our partnership is attached to this application.
- My organization has applied for a Stanford CDSMP license and expects to complete paperwork before the leader training.

For detailed information regarding program licensure, please visit <http://patienteducation.stanford.edu/licensing/> or contact the Stanford University Patient Education Research Center at (650) 723-7935.

Please note that training cannot be provided to individuals who are not affiliated with a licensed organization.

2. Organizational Questions

Please answer the following questions about your organization.

1. How does Living Well fit into your organization's long-range plans for supporting people with chronic conditions in your community?

2. Describe staff roles within your organization and how staff can dedicate time to promote and coordinate Living Well programs twice a year, and support lay leaders (community volunteers).

3. Newly trained Leaders should deliver their first program within two months of this training. Please indicate the date and location for the first program your newly trained Leader(s) will be involved in leading.

3. Applicant Information

Name of Leader applicant: _____

Leader Training you are applying for? Location: _____ Date: _____

Will you be a Lay Leader (non health/social service professional)? Yes No

Are you living with a chronic condition? Yes No

Have you attended a Living Well program as a participant? Yes No

Sponsoring Agency: _____

Title/Position: _____

Address: _____

Phone: _____ Email: _____

Briefly describe your interest in participating in this program and how this relates to the licensed organization.

Do you anticipate any barriers to leading two workshops a year (work or family obligations, transportation, health, etc.)? If yes, please explain.

Applicant Signature Title Date

Accommodations requested:

- | | |
|---|---|
| <input type="checkbox"/> Sign language interpreter | <input type="checkbox"/> Wheelchair-height tables |
| <input type="checkbox"/> FM System (for hearing impairment) | <input type="checkbox"/> Large print training materials |
| <input type="checkbox"/> Other (please specify): _____ | |

Sponsoring Agency signature Title Date