Form Approved

OMB No. 0920-xxxx

Exp. Date xx/xx/xxxx

Diabetes Prevention Recognition Program

Evaluation Data Elements: Definitions and Guidance

**Public reporting burden of this collection of information is estimated to average one hour per response for the submission of Evaluation Data, including the time for reviewing instructions, searching existing data sources, gathering and maintaining data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC Reports Clearance Officer; 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; ATTN: PRA (0920-xxxx)**

Each DPRP recognized organization (full or pending) must transmit evaluation data to CDC every 6 months. This requirement begins 6 months from the date of the first lifestyle intervention session held following acceptance of the DPRP application. Each transmission must include data from all of the lifestyle intervention sessions conducted during the preceding 6 months.

All of the data elements listed below must be transmitted to CDC. Data must be transmitted as a data file using the comma separated value (CSV) format, which is compatible with the majority of statistical, spreadsheet, and database applications. Each row in the data file should represent one session attended by one participant (i.e., participant will have new row for each session). Each column in the data file should represent one field containing specific data for the evaluation data elements listed below.

Transmitted data must conform to the specifications in the data dictionary that is included below. The variable names, codes, and values, contained in the data dictionary (**Table 2**) must be used. Applicant organizations should take time to become familiar with all of the data elements and specifications.

No information in identifiable form (directly or indirectly identifiable) (IIF) about lifestyle program coaches or participants should be transmitted to CDC. All identifiers (except the organization code, which is provided by CDC) will be assigned and maintained by the applicant organization according to the specifications outlined in the data dictionary.

#### Evaluation Data Elements

1. **Participant ID** Will be assigned by the applicant organization to uniquely identify and track participants across sessions. Must be included on all session attendance records generated for an individual participant. The Participant ID should not be based on social security number or other IIF.
2. **Participant’s Prediabetes Determination** Should be recorded at enrollment and included on all session attendance records generated for an individual participant. Indicates whether a participant’s prediabetes status was determined by a blood-based diagnostic test, by a previous diagnosis of gestational diabetes mellitus (GDM), or by screening positive on the CDC Prediabetes Screening Test (see appendix B). Multiple responses are allowed. This element requires responses for five fields (refer to Table 2, the data dictionary).
3. **Participant’s Age** Should be recorded at enrollment and included on all session attendance records generated for an individual participant. Should be recorded to the nearest whole year.
4. **Participant’s Ethnicity** Should be recorded at enrollment and included on all session attendance records generated for an individual participant. The participant should self-identify and have the opportunity to choose one of the following: "Hispanic or Latino" or "Not Hispanic or Latino.”
5. **Participant’s Race** Should be recorded at enrollment and included on all session attendance records generated for an individual participant. The participant should self-identify and have the opportunity to choose one or more of the following: American Indian or Alaska Native, Asian, Black or African American, Native Hawaiian or Other Pacific Islander, and White. Multiple responses are allowed. This element requires responses for five fields (refer to Table 2, the data dictionary).
6. **Participant’s Sex** Should be recorded at enrollment and included on all session attendance records generated for an individual participant. The data record should indicate male or female.
7. **Participant’s Height** Should be recorded at enrollment and included on all session attendance records generated for an individual participant. Height may be self-reported (i.e., it is not necessary to measure the participant’s height; the participant may simply be asked, “What is your height” or “How tall are you?”). Participant’s height should be recorded in inches.
8. **Organization Code** Will beassigned by CDC after the DPRP application is received and prior to the first data transmission. Each DPRP applicant will have a unique organization code. Should be included by the applicant organization on all data records submitted.
9. **Location Code** Will be assigned by the applicant organization to uniquely identify each venue or location used to conduct the applicant’s lifestyle intervention program sessions. The location code will indicate the venue used for each session.
10. **Core Group Code** Will be assigned by the applicant organization to uniquely identify each lifestyle intervention class (set of core program sessions).
11. **Session Date** Each time a participant attends a session, the actual date of the session should be recorded. The date should be recorded in mm/dd/yyyy format.
12. **Lifestyle Coach ID** Will be assigned by the applicant organization to uniquely identify each lifestyle coach conducting lifestyle intervention sessions for the applicant organization. The Lifestyle Coach ID should not be based on social security number or other IIF.
13. **Participant’s Weight** Each time a participant attends a core or post-core session, his or her body weight will be measured and recorded to the nearest whole pound. The weight must be included on the record for that participant and session. If a participant is pregnant, her data will not be included when calculating average weight loss (see data dictionary for the appropriate code.)
14. **Participant’s Physical Activity Minutes** At some or all program sessions, participants will be asked to report the number of minutes of brisk physical activity completed during the preceding week. This information should be included on the record for that participant and session. If physical activity monitoring has not yet begun in the curriculum, this element may be coded “monitoring not begun in curriculum.” If physical activity is not recorded for any other reason (e.g., if physical activity monitoring is not done during the post-core phase), the default code should be used. (Refer to the data dictionary for the appropriate codes.)
15. **Session Type** This element will identify the session attended as a scheduled core session, a makeup session (attended to make up for a missed core session), or a post-core session.
16. **Session ID** This element will identify the session attended as one of the core sessions (numbered 1 through 16) or as a post-core session (coded as “999”).

Table 2. Data Dictionary: Evaluation Data Elements

| **Data element description** | **Variable name** | **Coding/valid-values** | **Comments** |
| --- | --- | --- | --- |
| Participant ID | PARTICIP | Up to 25 alphanumeric characters | Required. Participant ID is uniquely assigned and maintained by the applicant organization, must not contain any IIF |
| Participant’s Prediabetes Determination (1 of 5) | FPG | 1 Prediabetes diagnosed by FPG  2 Prediabetes NOT diagnosed by FPG (default) | Required |
| Participant’s Prediabetes Determination (2 of 5) | OGTT | 1 Prediabetes diagnosed by 2-hour OGTT  2 Prediabetes NOT diagnosed by OGTT (default) | Required |
| Participant’s Prediabetes Determination (3 of 5) | A1C | 1 Prediabetes diagnosed by A1c  2 Prediabetes NOT diagnosed by A1c (default) | Required |
| Participant’s Prediabetes Determination (4 of 5) | GDM | 1 Prediabetes determined by clinical diagnosis of GDM during previous pregnancy  2 Prediabetes NOT determined by GDM (default) | Required |
| Participant’s Prediabetes Determination (5 of 5) | RISKTEST | 1 Prediabetes determined using the CDC Prediabetes Screening Test  2 Prediabetes NOT determined using the CDC Prediabetes Screening Test (default) | Required |
| Participant’s Age | AGE | 18 to 125 (in years, rounded with no decimals) | Required |
| Participant’s Ethnicity | ETHNIC | 1 Hispanic or Latino  2 Not Hispanic or Latino  9 Not reported (default) | Required. If ethnicity is not reported by the participant, this variable will be coded as ‘9’ |
| Participant’s Race  (1 of 5) | AIAN | 1 American Indian or Alaska Native  2 Not American Indian or Alaska Native (default) | Required. If race is not reported by the participant, all of the 5 race variables will be coded as ‘2’ |
| Participant’s Race  (2 of 5) | ASIAN | 1 Asian  2 NOT Asian (default) | Required. If race is not reported by the participant, all of the 5 race variables will be coded as ‘2’ |
| Participant’s Race  (3 of 5) | BLACK | 1 Black or African American  2 NOT Black or African American (default) | Required. If race is not reported by the participant, all of the 5 race variables will be coded as ‘2’ |
| Participant’s Race  (4 of 5) | NHOPI | 1 Native Hawaiian or Other Pacific Islander  2 NOT Native Hawaiian or Other Pacific Islander (default) | Required. If race is not reported by the participant, all of the 5 race variables will be coded as ‘2’ |
| Participant’s Race  (5 of 5) | WHITE | 1 White  2 NOT White (default) | Required. If race is not reported by the participant, all of the 5 race variables will be coded as ‘2’ |
| Participant’s Sex | SEX | 1 Male  2 Female | Required |
| Participant’s Height | HEIGHT | 30 to 98 (in inches)  *— or—*  99 Not reported (default) | Required |
| Organization Code | ORGCODE | Up to 25 alphanumeric characters | Required, provided by CDC |
| Location Code | LOCATION | Up to 25 alphanumeric characters | Required |
| Core Group Code | CORECODE | Up to 25 alphanumeric characters | Required |
| Session Date | DATE | mm/dd/yyyy | Required. Each data record represents attendance by one participant at one session; must include actual date of the session |
| Lifestyle Coach ID | COACH | Up to 25 alphanumeric characters | Required. The lifestyle coach ID is uniquely assigned and maintained by the applicant organization; must not contain any IIF |
| Participant’s Weight | WEIGHT | 70 to 997 (in pounds)  —*or—*  998 Pregnant (data will not be included when calculating average weight loss  —*or—*  999 Not recorded (default) | Required. At each session, participants are weighed; weight must be included on the record for that session and participant |
| Participant’s Physical Activity Minutes | PA | 0 to 997 (in minutes)  —*or—*  998 Monitoring not begun in curriculum  —*or—*  999 Not recorded (default) | Required. At some or all program sessions, participants are asked to report the number of minutes of brisk physical activity they completed in the preceding week |
| Session Type | SESSTYPE | C Core session  P Post-core session  M Make-up for core session | Required |
| Session ID | SESSID | 1 to 16 Core or makeup session  —*or—*  99 Post-core session | Required. Core group sessions and core-group make-up sessions should be numbered 1 through 16. The session ID should correspond to the specific session attended. Post-core sessions should all be coded as ‘99’ |

A1c Hemoglobin A1c test; FPG fasting plasma glucose test; GDM Gestational Diabetes Mellitus; IIF information in identifiable form (directly or indirectly identifiable); OGTT oral glucose tolerance test

If you have any questions about the evaluation data elements or their transmission, please call the Centers for Disease Control and Prevention’s help line, CDC-Info:

800-CDC-INFO

(800-232-4636)

TTY: (888) 232-6348

24 Hours/Every Day

[cdcinfo@cdc.gov](mailto:cdcinfo@cdc.gov).

Please ask the help desk staff for information about submitting evaluation data to the Diabetes Prevention Recognition Program. You may also send an e-mail to the CDC help desk with the subject line “Diabetes Prevention Recognition Program Evaluation Data.”