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Attachment N. Pre-Interview Session Review Guide

Pre-Interview Session Review Guide (English Groups)

Greetings [Name],

Thank you for being willing to take part in the Centers for Disease Control and Prevention MyMobility study on [Date] and [Time]. CDC is seeking feedback on a set of *MyMobility* resources. These resources contain information that can help people ages 60 or older protect their ability to get places they need to go as they age.

Before taking part in our online group discussion about the MyMobility resources, we would like to ask you to read and review each of the documents provided with email. We will be discussing these during the interview session. We will be sending copies of the materials you will be reviewing both through email and regular mail.

To help guide your review, provided below are instructions on what we would like you to do or consider while reviewing each of the resources. The instructions will ask you to fill out the resources with your personal information to help you with your review. Please know that you will not be sharing this personal information during the group discussion.

Your review prior to meeting will help ensure we have rich and thoughtful discussion.

Thank You,

Jon Poehlman, Project Director
RTI International

MyMobility Resource	Review Instructions
MyMobility Plan	• Fill out the MyMobility Plan with your own information as best as you can. (You will not be asked to share the Plan and any information in it with anyone. This is just for your own personal learning.) • While reading the MyMobility Plan, write down or circle any words or phrases that you find confusing or

	unclear.
MyMedications Fact Sheet	• While reading the MyMedications Fact Sheet, write down or circle any words or phrases that you find confusing or unclear.
MyMedications List	• Fill out the MyMedications List with your own information as best as you can. (You will not be asked to share the List and any information in it with anyone. This is just for your own personal learning.) • While reading, write down or circle any words or phrases that you find confusing or unclear.
MyMedications Action Plan	• Fill out the MyMedications Action Plan with own information as best as you can. (You will not be asked to share the Plan and any information in it with anyone. This is just for your own personal learning.) • While reading the MyMedications Action Plan, write down or circle any words or phrases that you find confusing or unclear.

[Include PDFs of all four MyMobility products]

Pre-Interview Session Review Guide (Spanish Groups)

Hola, [Nombre]:

Gracias por estar dispuesto a participar en el estudio MyMobility de los Centros para el Control y la Prevención de Enfermedades (CDC, por sus siglas en inglés) el [fecha] a las [hora]. Los CDC están buscando opiniones sobre un conjunto de recursos de *MyMobility*. Estos recursos contienen información que puede ayudar a las personas de 60 años o más a proteger su facultad de ir a los lugares que necesitan a medida que envejecen.

Antes de participar en nuestra discusión grupal por el Internet sobre los recursos de MyMobility, nos gustaría pedirle que lea y revise cada uno de los documentos proporcionados por correo electrónico. Los analizaremos durante la sesión de entrevistas. Le enviaremos copias de los materiales que examinará tanto por correo electrónico como por correo ordinario.

Para ayudarle a orientar su revisión, a continuación, encontrará instrucciones sobre lo que nos gustaría que hiciera o pensara mientras revisa cada uno de los recursos. Las instrucciones le pedirán que complete los recursos con su información personal para ayudarle en su revisión. Tenga en cuenta que no compartirá esta información personal durante la discusión grupal.

Su revisión antes de la reunión ayudará a asegurar que tenemos una discusión enriquecedor y reflexivo.

Gracias,

Jon Poehlman, director del proyecto
RTI International

Recurso de MyMobility	Instrucciones al revisar los recursos
Plan de MyMobility	• Complete el plan de MyMobility con su propia información lo mejor que pueda. (No se le pedirá que comparta el plan ni la información que contiene con nadie. Es solo para su aprendizaje personal.) • Mientras lee el plan de MyMobility, escriba o marque con un círculo las palabras o frases que le parezcan confusas o poco claras.
Hoja informativa de MyMedications	• Mientras lee la hoja informativa de MyMedications, escriba o marque con un círculo las palabras o frases que le parezcan confusas o poco claras.
Lista de MyMedications	• Complete la lista de MyMedications con su propia información lo mejor que pueda. (No se le pedirá que comparta la lista ni la información que contiene con

	nadie. Es solo para su aprendizaje personal.) • Mientras lee, escriba o marque con un círculo las palabras o frases que le parezcan confusas o poco claras.
Plan de acción de MyMedications	• Complete el plan de acción de MyMedications con su propia información lo mejor que pueda. (No se le pedirá que comparta el plan ni la información que contiene con nadie. Es solo para su aprendizaje personal.) • Mientras lee el plan de acción de MyMedications, escriba o marque con un círculo las palabras o frases que le parezcan confusas o poco claras.

[Include PDFs of all four MyMobility products]

Pre-Interview Session Review Guide (Tribal Groups)

Greetings [Name],

Thank you for being willing to take part in the Centers for Disease Control and Prevention MyMobility study on [Date] and [Time]. CDC is seeking feedback on a set of *MyMobility* resources. These resources contain information that can help people ages 55 or older protect their ability to get places they need to go as they age.

Before taking part in our online group discussion about the MyMobility resources, we would like to ask you to read and review each of the documents provided with email. We will be discussing these during the interview session. We will be sending copies of the materials you will be reviewing both through email and regular mail.

To help guide your review, provided below are instructions on what we would like you to do or consider while reviewing each of the resources. The instructions will ask you to fill out the resources with your personal information to help you with your review. Please know that you will not be sharing this personal information during the group discussion.

Your review prior to meeting will help ensure we have rich and thoughtful discussion.

Thank You,

Jon Poehlman, Project Director
RTI International

MyMobility Resource	Review Instructions
MyMobility Plan	• Fill out the MyMobility Plan with your own information as best as you can. (You will not be asked to share the Plan and any information in it with anyone. This is just for your own personal learning.) • While reading the MyMobility Plan, write down or circle any words or phrases that you find confusing or unclear.
MyMedications Fact Sheet	• While reading the MyMedications Fact Sheet, write down or circle any words or phrases that you find confusing or unclear.
MyMedications List	• Fill out the MyMedications List with your own information as best as you can. (You will not be asked to share the List and any information in it with anyone. This is just for your own personal learning.)

	• While reading, write down or circle any words or phrases that you find confusing or unclear.
MyMedications Action Plan	• Fill out the MyMedications Action Plan with own information as best as you can. (You will not be asked to share the Plan and any information in it with anyone. This is just for your own personal learning.) • While reading the MyMedications Action Plan, write down or circle any words or phrases that you find confusing or unclear.

[Include PDFs of all four MyMobility products]