

Request for Approval of Evidence Based Program or Promising Practice

Note: This form must be completed (separately) for each of your EBP's that were not pre-approved (e.g., not included on South Dakota's pre-approved EBP list). Provide answers/information below.

Coalition/Agency/Department Name and Contact Information:

EBP Name:

What target behavior(s) or environmental change is targeted by the EBP?

What type of EBP is this?

_____ Individual-Based _____ Population-Based _____ Both Individual and Population Based

Explain:

The EBP being submitted for approval: (*✓check one*)

Included on Federal Lists or Registries of evidence-based interventions;

OR

Has been reported (with positive effects on the primary targeted outcome) in a **peer-reviewed journal**;

The following documentation for this category of programs must be submitted as attachments to this completed form:

- Narrative description of the program, including how you are planning to implement this strategy. Please attach any supportive materials, such as a curriculum, syllabus, or implementation guide that you plan to follow. (in electronic form, if possible)
- Description of how well outcomes of the original evidence-based intervention match the expected outcomes in your community
- Explanation of why this strategy was chosen, rather than one of the approved evidence-based interventions
- Any evaluation data showing evidence of effectiveness (including information such as study design, number of studies/evaluations, consistency across studies/evaluations, population size of the study, and evidence of long-term effects).

OR

Has **documented effectiveness** supported by other sources of information and the consensus judgment of informed experts based on the following guidelines (provide documentation for each of the following).

The following documentation for this category of programs must be submitted as attachments to this completed form:

- The intervention is based on a theory of change that is documented in a clear logic or conceptual model (**required**);
- The intervention appears in a registry(ies) and/or the peer-reviewed literature; **and/or**
- The intervention is supported by documentation that it has been effectively implemented in the past in a manner attentive to scientific standards of evidence and with results that show a consistent pattern of credible and positive effects; **and/or**
- The intervention is reviewed and deemed appropriate by a panel of informed prevention experts that includes: well-qualified prevention researchers who are experienced in evaluating prevention interventions similar to those under review, local prevention practitioners, and key community leaders as appropriate (e.g., officials from law enforcement and education sectors or elders within indigenous cultures).
- Please list all sources for which documented evidence of effectiveness is available. In addition, please include a copy of each source (in electronic format, if possible) along with this form when you submit it.

- Describe how you are planning to implement this strategy and attach any supportive materials, such as a curriculum, syllabus, or implementation guide that you plan to follow (in electronic format, if possible).

**** Explain evidence and documentation supporting this EBP or Promising Practice**

What training is required to implement the EBP with fidelity: What are the costs of the training and what resources will be used to support the training?

**** Explain training requirements here**

Ability to Implement with Fidelity: Will this strategy be implemented as intended in your community?

___ Yes, this EBP will be implemented as intended. (Skip to the next question)

___ No, we will be making some changes to how this EBP is implemented...to better address our target population or the readiness/abilities of our community/coalition. (Discuss below**)

**** Explain your changes here.**

Test Cultural Fit: Is this EBP culturally appropriate and culturally relevant for your target population?

Yes, this strategy is culturally appropriate and relevant as intended. (Skip to the next question)

Yes, but we have modified it to make it more culturally appropriate and relevant for your community. (Discuss below***)

***Explain your modifications here.

Test Sustainability: What will be needed to sustain this EBP in your community beyond the PFS or other present funding? (place an X next to all that apply)

Additional funding

Strong support from stakeholders

Almost nothing, it should be sustainable on its own

Other, please specify

***Explain your plan for sustaining the EBP.

2. Using the chart below, provide the following information on the EBP you are requesting approval for:

EBP Title	Anticipated Outcomes	Ages	Races/Ethnicity	Settings	Cost
	1.				

Attachments included with documentation of programming mailed.

Logic Model – Please complete the logic model below for the EBP.

Problem and Related Behaviors the EBP will Address	Risk/Protective Factors	EBP/Intervention	Short Term Outcome (s)	Long Term Outcome(s)