

Criteria for Evaluating Evidence Based Practices
Iowa PIC
Evidence Based Practices/Outcomes Committee
March, 2002

1. The practice has undergone at least one randomized clinical trial and was more effective than treatment as usual. In addition, the clinical trial(s) should be evaluated on the following additional factors:
 - a. The results of the clinical trial have appeared in a refereed professional publication or journal.
 - b. The trial adequately addressed missing data in the analyses, including subject attrition.
 - c. The manner in which data were collected was adequate, including multiple outcome measures, if appropriate, and adequate follow-up period.
 - d. The relevance and quality of the outcome measures, including reliability and validity.
 - e. The appropriateness and technical adequacy of the data analysis.
 - f. The degree to which the trial addressed plausible threats to validity.
 - g. Whether or not outcomes were assessed in a blind fashion.
 - h. The data were obtained prospectively.
 - i. There was a clear presentation of inclusion and exclusion criteria.
 - j. There was adequate sample size to offer reasonable statistical power and a stable estimate of the effect size.
 - k. The statistical methods were described explicitly and clearly.
 - l. Diagnostic methods were appropriate and adequate.
2. The practice has demonstrated effectiveness in several replicated research studies using different samples, at least one of which is comparable to the population to be served in Iowa or there is clear evidence that the benefits are likely to generalize.
3. The practice either targets behaviors or shows good effects on behaviors that are generally accepted outcomes.
4. The practice can be logistically applied in Iowa settings that may include rural settings or other low population density areas.
5. The practice can be used in group interventions, may be attractive to third party payors, is of low cost, trainers are available, etc. All of these factors reflect on the feasibility of the intervention.
6. The practice is manualized or otherwise sufficiently operationalized for staff use, and program materials are available for implementation by others in the field.
7. The practice has suitable acceptability among providers and clients.
8. The program is based on a clear and well-articulated theory.
9. The program has associated methods of ensuring fidelity.
10. The program can be evaluated adequately.
11. The program shows good retention of participants.
12. The program satisfactorily addresses different ethnic/racial, age groups and gender.
13. The practice can be used by staff with a wide diversity of backgrounds and training.