

## **HHS Initial Practice Criteria and First List of Services and Programs Selected for Review as part of the *Title IV-E Prevention Services Clearinghouse***

The Family First Prevention Services Act requires HHS to conduct an independent systematic review of evidence to rate services and programs as promising, supported, and well-supported practices.

On June 22, 2018, HHS published a Federal Register Notice (FRN; [83 FR 29122](#)) requesting public comment on initial criteria and potential services and programs to be considered for systematic review in the *Title IV-E Prevention Services Clearinghouse* (*herein the Clearinghouse*). The initial criteria were intended to (a) determine eligibility of programs and services for review by the Clearinghouse, (b) prioritize eligible programs and services for review, (c) determine eligibility of studies aligned with prioritized programs and services, (d) prioritize eligible studies for rating, (e) rate studies, and (f) rate programs and services as promising, supported, and well-supported practices. The FRN also requested recommendations of potential services and programs to be considered for systematic review. The comment period closed on July 22, 2018. Over 360 responses were received, most containing multiple comments. Commenters included state and local administrators, service and program developers, foundations, non-profit organizations, researchers and evaluators, and other stakeholders.

This attachment includes revised initial criteria and the first dozen services and programs selected for systematic review. The Clearinghouse will select additional services and programs for review on a rolling basis. In developing these revised initial criteria and selecting the first dozen services and programs, HHS considered public comments on the FRN and input from federal partners, as well as other key stakeholders including the California Evidence-Based Clearinghouse.

Overall, public comments recommended adopting broad and inclusive criteria to determine services or programs and associated studies considered for review. Public comments and feasibility considerations informed several notable revisions to the initial criteria. For example, the revised initial criteria no longer consider target population/sample, implementation period, trauma-informed approach, magnitude of effects, and in-home delivery setting in determining eligibility, prioritization, or rating. When possible, the Clearinghouse will document and release additional information beyond that considered as part of the revised initial criteria. This additional information may include, but is not limited to details about: the extent to which the service or program is provided under an organizational structure or framework in accordance with principles of a trauma informed approach and/or represents a trauma specific intervention; intended target population of service or program; availability of culturally specific, location or population-based adaptation of service or program; service or program delivery setting; and study specific information such as effect sizes, power, and additional detail on study sample and subsample.

### **I. Revised Initial Criteria**

The Clearinghouse will use the *Service or Program Eligibility and Prioritization Criteria* to identify and prioritize services and programs for review. Subsequently, the Clearinghouse will

use the *Study Eligibility and Prioritization Criteria* to identify and prioritize our review of studies for each of the selected services and programs. The Clearinghouse will use the *Study Rating Criteria* to assess the design, execution, and impacts of studies. The Clearinghouse will use the *Service or Program Rating Criteria* to rate services or programs as “promising,” “supported,” “well-supported,” or “does not currently meet criteria.” A more detailed description of the revised initial criteria and procedures for systematic review and re-review along with definitions of key terminology will be included in the forthcoming Title IV-E Prevention Services Clearinghouse Procedures Handbook.

1. *Service or Program Eligibility Criteria.* Services or programs must, at a minimum, meet the following criteria to be eligible for review by the Clearinghouse [sections 471(e)(1) and 471(e)(4)(C) of the Social Security Act (the Act)]:
  - a. Types of Services and Programs. Eligibility will be limited to mental health and substance abuse prevention and treatment services and in-home parent skill-based programs as well as kinship navigator programs.
  - b. Book/Manual/Writings Available. Eligibility will be limited to services or programs that have a book, manual, or other available documentation that specifies the components of the practice protocol and describes how to administer the practice.
  
2. *Service or Program Prioritization Criteria.* Timing and resources may not allow for the Clearinghouse to conduct a detailed review of all services and programs that meet the *Service or Program Eligibility Criteria*. Services or programs will be prioritized for Clearinghouse review using the following criteria:
  - a. Target Outcomes. Services or programs that aim to impact target outcomes identified by the Clearinghouse will be prioritized for review [section 471(e)(4)(C) of the Act]. Target outcomes for mental health and substance abuse prevention and treatment services and in-home parent skill-based programs will include a wide array of outcomes that fall broadly under the following domains: child safety, child permanency, child well-being, and adult (parent and kin caregiver) well-being. Target outcomes for kinship navigator programs will include all outcome domains listed above as well as access to, referral to, and satisfaction with services and programs.
  - b. In Use/Active. Services or programs currently in use with a book, manual, or other documentation available in English will be prioritized.
  - c. Implementation and Fidelity Support. Services or Programs that have implementation training and staff support and/or fidelity monitoring tools and resources available to implementers in English will be prioritized.

Initially, the *Title IV-E Prevention Services Clearinghouse* will give particular consideration to services and programs recommended by state and local government administrators in response to the FRN, included as part of existing evidence reviews, and/or evaluated by Title IV-E Child Welfare Waiver Demonstrations. The Clearinghouse will also give particular consideration to ensure services and programs from each category (i.e., mental health, substance abuse, in-home parent, or kinship navigator) are represented.

3. *Study Eligibility Criteria.* Studies examining each of the selected services and programs will be screened for eligibility for inclusion in the Clearinghouse using the following criteria:
  - a. *Source.* Eligibility will be limited to studies included in peer-reviewed journal articles and/or publicly available literature that may include, but is not limited to federal, state, and local government and foundation reports.
  - b. *Study Design.* Eligibility will be limited to study designs that assess effectiveness (i.e., impact) using quantitative methods and utilize an appropriate control. Eligible study designs include Randomized Controlled Trials (RCT), Quasi-Experimental Designs (QED), and other non-experimental designs that utilize an appropriate control.
  - c. *Target Outcomes.* Eligibility will be limited to studies that examine the impact of the service or program on at least one ‘target outcome.’ Target outcomes for studies of mental health and substance abuse prevention and treatment services and in-home parent skill-based programs will include a wide array of outcomes that fall broadly under the following domains: child safety, child permanency, child well-being, and adult (parent and kin caregiver) well-being. Target outcomes for studies of kinship navigator programs will include all outcome domains listed above as well as access to, referral to, and satisfaction with services and programs.
  - d. *Study Available in English.* Eligibility will be limited to studies available in English.

Initially, the *Title IV-E Prevention Services Clearinghouse* will give particular consideration to studies published or prepared in or after 1990.

4. *Study Prioritization Criteria.* Timing and resources may not allow for the Clearinghouse to conduct a detailed review of all studies determined within a selected service or program to be eligible according to the *Study Eligibility Criteria*. The order and depth of review for studies will be determined on the basis of study features that may include sample size, duration of sustained effects examined, and type of study design.
5. *Study Rating Criteria.* The Clearinghouse will rate studies using the following criteria:
  - a. *Study Design and Execution.* Building from the standards of existing evidence reviews such as the What Works Clearinghouse (WWC) and Home Visiting Evidence of Effectiveness (HomVEE), the Clearinghouse will assess studies on the basis of study design, overall and differential sample attrition, the equivalence of intervention and comparison groups at baseline (as applicable), and when necessary, procedures accounting for clustering. In addition, the study must account for confounding factors and examine at least one “target outcome” (see *Study Eligibility Criteria*) using a measure that is reliable and achieves face validity. Inconsistencies in systematic administration, as noted in study text, will also be considered. Studies will be rated as “high,” “moderate,” or “low.” The study-level ratings will provide an indicator of the extent to which a study provides unbiased estimates of model impacts.

- b. Effects. The following effects, defined using conventional standards of statistical significance, will be examined in the full analysis sample for studies that achieve a “high” or “moderate” rating on Study Design and Execution:
  - i. Favorable Effects. Studies will be rated based on whether they demonstrate at least one meaningful favorable effect (i.e., positive significant effect) on a ‘target outcome.’
  - ii. Unfavorable Effects. Studies will be rated based on the number of unfavorable effects (i.e., negative significant effects) on either ‘target’ or non-target outcomes.
  - iii. Sustained Favorable Effect. Studies with at least one meaningful favorable effect on a ‘target outcome’ will be rated on whether or not they demonstrate a favorable effect sustained beyond the end of treatment. Studies will be classified as not demonstrating a sustained favorable effect (i.e., effects are demonstrated for less than 6 months), demonstrating a sustained favorable effect of 6 months or more (but less than 12 months), or demonstrating a sustained favorable effect of 12 months or more.

Initially, due to time and resource constraints, the Clearinghouse will use only effects resulting from analyses of the full study sample for rating. This decision may be reconsidered in the future.

6. *Service or Program Rating Criteria.* The Clearinghouse will rate a service or program as a ‘promising,’ ‘supported,’ or ‘well-supported’ practice if it meets the below criteria that collectively assess the strength of evidence for a practice and build from the *Study Rating Criteria* [section 471(e)(4)(C) of the Act].
  - a. *Promising Practice:* A service or program will be rated as a ‘promising practice’ if the service or program has at least one study that achieves a rating of ‘moderate’ or ‘high’ on Study Design and Execution and demonstrates a favorable effect on at least one ‘target outcome.’
  - b. *Supported Practice:* A service or program will be rated as a ‘supported practice’ if the service or program has at least one study carried out in a usual care or practice setting that achieves a rating of ‘moderate’ or ‘high’ on Study Design and Execution and demonstrates a sustained favorable effect of at least 6 months beyond the end of treatment on at least one target outcome.
  - c. *Well-Supported Practice:* A service or program will be rated as a ‘well-supported practice’ if the service or program has at least two studies with non-overlapping analytic samples carried out in a usual care or practice setting that achieve a rating of ‘moderate’ or ‘high’ on Study Design and Execution. At least one of the studies must demonstrate a sustained favorable effect of at least 12 months beyond the end of treatment on at least one target outcome.
  - d. *Does Not Currently Meet Criteria:* A service or program will be rated as ‘does not currently meet criteria’ if the service or program has been reviewed and does not currently meet the evidence criteria for ‘promising,’ ‘supported,’ or ‘well-supported’ practices.

In accordance with the Family First Prevention Services Act, a service or program will not be rated as a ‘promising,’ ‘supported,’ or ‘well-supported practice’ if there is an empirical basis, as evidenced by multiple unfavorable effects on target or non-target outcomes across reviewed studies that suggest the overall weight of evidence does not support the benefits of the service or program.

## **II. First Services and Programs Selected for Systematic Review**

HHS received and carefully considered a high volume of recommendations for services and programs to review as part of the Clearinghouse. The recommendations have informed the first services and programs selected for review and will inform additional services and programs to be selected for review on a rolling basis. Building from recommendations received from the FRN, federal partners, and other key stakeholders, as well as new information gathered, the Clearinghouse will utilize the forthcoming procedures and revised initial criteria to identify and prioritize additional services and programs for review.

The first services and programs selected for systematic review met at least two of the following conditions: (1) recommendation from State or local government administrators in response to the FRN; (2) rated by the California Evidence-Based Clearinghouse; (3) evaluated by Title IV-E Child Welfare Waiver Demonstrations; (4) recipient of a Family Connection Discretionary Grant; and/or (5) recommendation solicited from federal partners in the Administration for Children and Families, Health Resources and Services Administration, the National Institutes of Health, the Centers for Disease Control and Prevention, the Office of the Assistant Secretary for Planning and Evaluation, and the Substance Abuse and Mental Health Services Administration. Findings from the review of the first dozen services and programs are scheduled for release in Spring 2019. This review will rate programs as “promising,” “supported,” “well-supported,” or “does not currently meet criteria.” The Clearinghouse will select additional services and programs for review on a rolling basis using the revised initial criteria.

### *Prevention Services and Programs*

#### *Mental Health:*

Parent-Child Interaction Therapy  
Trauma Focused-Cognitive Behavioral Therapy  
Multisystemic Therapy<sup>1</sup>  
Functional Family Therapy

#### *Substance Abuse:*

Motivational Interviewing  
Multisystemic Therapy<sup>2</sup>  
Families Facing the Future  
Methadone Maintenance Therapy

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<sup>1</sup> Also included under the “Substance Abuse” category

<sup>2</sup> Also included under the “Mental Health” category

Attachment C. HHS Initial Practice Criteria and First List of Services and Programs Selected for Review as part of the Title IV-E Prevention Services Clearinghouse

*In-Home Parent Skill-Based:*

Nurse-Family Partnership  
Healthy Families America  
Parents as Teachers

*Kinship Navigator Programs*

Children's Home Society of New Jersey Kinship Navigator Model  
Children's Home Inc. Kinship Interdisciplinary Navigation Technologically-Advanced Model (KIN-Tech)

The Clearinghouse will release procedures for implementing the *Service or Program Eligibility and Prioritization Criteria* along with definitions of key terminology in the forthcoming Title IV-E Prevention Services Clearinghouse Procedures Handbook.