# FY 2018-2019

# Evidence-based Intervention (EBI) - Implementation & Evaluation Planning Form

# (APPENDIX E - Revised)



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| 1a. Name of Prevention Provider: | 1b. Contact Person: | | | | 2. Date:  Click or tap to enter a date.  Start of FY  MID-YEAR  YEAR-END | |
| 3. Name of Evidence-based Intervention (EBI)/Initiative & BRIEF synopsis: | | | | | | |
| 4. CMHPSM Priority Area(s):  (1) Reduce Childhood and Underage Drinking  (4) Reduce Illicit Drug Use  (2) Reduce Prescription and Over-the-Counter Drug Abuse/Misuse  (5) SUD Other:  (3) Reduce Youth Access to Tobacco | | | | | | |
| 5. Targeted Primary Problem(s)/Consequences: | | | | | | |
| 6. Targeted Intervening Variables/Risk & Protective Factors/Underlying Causes: | | | | | | |
| 7. Evidence-based Category for this EBI:  SAMHSA  Other Federal Agency (NIDA, OJJDP, etc.)  Peer Reviewed Journal  Local Evidence  Other: | | | | | | |
| 8. CSAP Prevention Strategies (check all that apply):    Information Dissemination  Education  Alternatives  Community-Based Process  Environmental  Problem Identification & Referral | | | | | | |
| 9. Geographic Area Served/Community: | | | | | | |
| 10. Population Type/Service Population:    Universal  Selective  Indicated | | 11. Targeted Domain(s):  Individual  Peer  Community  Family  School  Other: | | | | |
| 12. **EBI CORE STEPS** for Implementing and Evaluating this Program with  Fidelity to the Research Model | | | 13. Projected Timeline | | | CORE STEP STATUS  MID-YEAR  YEAR-END |
| Start Date | End Date | |
| 12-1. | | |  |  | |  |
| 12-2. | | |  |  | |  |
| 12-3. | | |  |  | |  |
| 12-4. | | |  |  | |  |
| 12-5. | | |  |  | |  |
| 12-6. | | |  |  | |  |
| 12-7. | | |  |  | |  |
| 12-8. | | |  |  | |  |
| 12-9. | | |  |  | |  |
| 12-10. | | |  |  | |  |
| 12-11. | | |  |  | |  |
| 12-12. | | |  |  | |  |
| 12-13. | | |  |  | |  |
| 12-14. | | |  |  | |  |
| 12-15. | | |  |  | |  |

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| 12. **EBI CORE STEPS** for Implementing and Evaluating this Program with  Fidelity to the Research Model | 13. Projected Timeline | | CORE STEP STATUS  MID-YEAR  YEAR-END |
| Start Date | End Date |
| 12-16. |  |  |  |
| 12-17. |  |  |  |
| 12-18. |  |  |  |
| 12-19. |  |  |  |
| 12-20. |  |  |  |
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| 12. **EBI CORE STEPS** for Implementing and Evaluating this Program with  Fidelity to the Research Model | 13. Projected Timeline | | CORE STEP STATUS  MID-YEAR  YEAR-END |
| Start Date | End Date |
| 12-31. |  |  |  |
| 12-32. |  |  |  |
| 12-33. |  |  |  |
| 12-34. |  |  |  |
| 12-35. |  |  |  |
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| 12-44. |  |  |  |
| 12-45. |  |  |  |

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| FY 2018-2019 – APPENDIX E - OUTCOMESEvidence-based Intervention (EBI) Implementation and Evaluation Planning Form | | | | | |
| Name of Evidence-based Intervention (EBI)/Initiative: | | | | | |
| 14. CMHPSM  Priority  Area(s) # | 15. Intervening Variables  (Underlying Cause,  Risk/Protective Factor) | 16. **P**revention **O**utcomes (PO)  SMART (CDC) **- Specific, Measurable, Achievable,**  **Realistic, Time-phased** and include evaluation method. | **OUTCOME STATUS REPORT**  **MID-YEAR  YEAR-END** | | |
| Number  Targeted  To-Date | Number  Achieved  To-Date | Outcome Status |
| #1  #2  #3  #4 |  | PO-1 |  |  | On Target  or above  More than  10% Below |
| If the above outcome is more than 10% below the targeted number for this timeframe, provide a brief narrative. What is your action plan to achieve this outcome? | | | | | |
| #1  #2  #3  #4 |  | PO-2 |  |  | On Target  or above  More than  10% Below |
| If the above outcome is more than 10% below the targeted number for this timeframe, provide a brief narrative. What is your action plan to achieve this outcome? | | | | | |
| #1  #2  #3  #4 |  | PO-3 |  |  | On Target  or above  More than  10% Below |
| If the above outcome is more than 10% below the targeted number for this timeframe, provide a brief narrative. What is your action plan to achieve this outcome? | | | | | |
| #1  #2  #3  #4 |  | PO-4 |  |  | On Target  or above  More than  10% Below |
| If the above outcome is more than 10% below the targeted number for this timeframe, provide a brief narrative. What is your action plan to achieve this outcome? | | | | | |

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| Number  Targeted  To-Date | Number  Achieved  To-Date | Outcome Status |
| #1  #2  #3  #4 |  | PO-5 |  |  | On Target  or above  More than  10% Below |
| If the above outcome is more than 10% below the targeted number for this timeframe, provide a brief narrative. What is your action plan to achieve this outcome? | | | | | |
| #1  #2  #3  #4 |  | PO-6 |  |  | On Target  or above  More than  10% Below |
| If the above outcome is more than 10% below the targeted number for this timeframe, provide a brief narrative. What is your action plan to achieve this outcome? | | | | | |
| #1  #2  #3  #4 |  | PO-7 |  |  | On Target  or above  More than  10% Below |
| If the above outcome is more than 10% below the targeted number for this timeframe, provide a brief narrative. What is your action plan to achieve this outcome? | | | | | |
| #1  #2  #3  #4 |  | PO-8 |  |  | On Target  or above  More than  10% Below |
| If the above outcome is more than 10% below the targeted number for this timeframe, provide a brief narrative. What is your action plan to achieve this outcome? | | | | | |

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| Number  Targeted  To-Date | Number  Achieved  To-Date | Outcome Status |
| #1  #2  #3  #4 |  | PO-9 |  |  | On Target  or above  More than  10% Below |
| If the above outcome is more than 10% below the targeted number for this timeframe, provide a brief narrative. What is your action plan to achieve this outcome? | | | | | |
| #1  #2  #3  #4 |  | PO-10 |  |  | On Target  or above  More than  10% Below |
| If the above outcome is more than 10% below the targeted number for this timeframe, provide a brief narrative. What is your action plan to achieve this outcome? | | | | | |
| #1  #2  #3  #4 |  | PO-11 |  |  | On Target  or above  More than  10% Below |
| If the above outcome is more than 10% below the targeted number for this timeframe, provide a brief narrative. What is your action plan to achieve this outcome? | | | | | |
| #1  #2  #3  #4 |  | PO-12 |  |  | On Target  or above  More than  10% Below |
| If the above outcome is more than 10% below the targeted number for this timeframe, provide a brief narrative. What is your action plan to achieve this outcome? | | | | | |

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| Number  Targeted  To-Date | Number  Achieved  To-Date | Outcome Status |
| #1  #2  #3  #4 |  | PO-13 |  |  | On Target  or above  More than  10% Below |
| If the above outcome is more than 10% below the targeted number for this timeframe, provide a brief narrative. What is your action plan to achieve this outcome? | | | | | |
| #1  #2  #3  #4 |  | PO-14 |  |  | On Target  or above  More than  10% Below |
| If the above outcome is more than 10% below the targeted number for this timeframe, provide a brief narrative. What is your action plan to achieve this outcome? | | | | | |
| #1  #2  #3  #4 |  | PO-15 |  |  | On Target  or above  More than  10% Below |
| If the above outcome is more than 10% below the targeted number for this timeframe, provide a brief narrative. What is your action plan to achieve this outcome? | | | | | |
| #1  #2  #3  #4 |  | PO-16 |  |  | On Target  or above  More than  10% Below |
| If the above outcome is more than 10% below the targeted number for this timeframe, provide a brief narrative. What is your action plan to achieve this outcome? | | | | | |

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| Number  Targeted  To-Date | Number  Achieved  To-Date | Outcome Status |
| #1  #2  #3  #4 |  | PO-17 |  |  | On Target  or above  More than  10% Below |
| If the above outcome is more than 10% below the targeted number for this timeframe, provide a brief narrative. What is your action plan to achieve this outcome? | | | | | |
| #1  #2  #3  #4 |  | PO-18 |  |  | On Target  or above  More than  10% Below |
| If the above outcome is more than 10% below the targeted number for this timeframe, provide a brief narrative. What is your action plan to achieve this outcome? | | | | | |
| #1  #2  #3  #4 |  | PO-19 |  |  | On Target  or above  More than  10% Below |
| If the above outcome is more than 10% below the targeted number for this timeframe, provide a brief narrative. What is your action plan to achieve this outcome? | | | | | |
| #1  #2  #3  #4 |  | PO-20 |  |  | On Target  or above  More than  10% Below |
| If the above outcome is more than 10% below the targeted number for this timeframe, provide a brief narrative. What is your action plan to achieve this outcome? | | | | | |

FY 2018-2019 Revised Appendix E – EBI Implementation & Evaluation Plan (CMHPSM, J. Goerge, 9.18)