Central Florida Behavioral Health Network, Inc. Your Managing Entity

POLICIES & PROCEDURES

Evidence-Based Practice Guidelines

Policy

It is the policy of Central Florida Behavioral Health Network, Inc. (CFBHN) to maintain guidelines related to the implementation of evidence-based practices (EBP).

Purpose

The purpose of this policy is to outline the procedures followed by CFBHN to assist Network Service Providers (NSPs) in the identification, selection and implementation of evidence-based practices within the system of care.

Procedure

- 1. EBPs are defined as programs that have demonstrated their effectiveness through established practice, been replicated and achieved intended outcomes, and undergone scientific review to verify their results.
- 2. As defined by the Department of Children and Families (DCF) in Guidance Document 1:
 - A. The EBP selected and implemented by the NSP must be appropriate for the provider's target population, setting, and intended outcomes.
 - B. On an annual basis, NSPs are required to provide a written service activity description of the programs funded by CFBHN. This program description requires a summary of the evidence-based practices that are incorporated into the work of the organization and their delivery of mental health, substance use, and co-occurring disorders.
 - C. CFBHN is responsible for establishing monitoring procedures to ensure that NSPs maintain fidelity to the EBP that is delivered.
 - 1) This responsibility falls to the Program Manager or Senior Program Manager responsible for oversight of the program. It includes, as necessary, a review of the clinical practices of the program or strategy, and the provision of technical assistance to maintain EBP fidelity.
 - Elements of the monitoring of fidelity to a model may also be incorporated into monitoring tools utilized by the Continuous Quality Improvement team as part of NSP reviews that are conducted annually.
 - 3) If Care Coordination services are offered by the organization, CFBHN's Utilization Management staff work directly with the NSP to encourage the use of evidence-based strategies in its clinical practice.
 - 4) If the organization is required to undergo a Recovery-Oriented Monitoring review, members of CFBHN's Consumer and Family Affairs department conduct a peer review of the clinical practices of the organization and their alignment with recovery-oriented principles of care.
 - D. There are two options by which a program is considered an EBP.
 - Option 1 The proposed program or strategy aligns with the NSP's target population and is listed in a recognized evidence-based program registry. A formal list of national registries of EBPs recognized by DCF, including the Substance Abuse and Mental Health Services Administration National Outcome Measures, are included in Guidance Document 1.

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- 2) Option 2 The proposed program or strategy is supported by credible documentation and expert consensus. Programs/strategies that meet this requirement are not yet listed in a national registry but are able to provide evidence of the following to CFBHN.
 - a. Theory of Change and Logic Model A description of the program's expected outcomes, including a narrative on Theory of Change and a basic logic model that outlines inputs, activities and intended results.
 - b. Evidence of Scientific Basis A description of the ways the program or strategy is informed by clinical, prevention or public health principles that are similar in structure or purpose to interventions documented in EBP registries or peer-revised studies.
 - c. Prior Implementation and Outcome Data Records from at least two previous implementations that demonstrate fidelity to the model and measurable improvements in relevant outcomes.
 - d. Expert Panel and Endorsement Documentation of a review by qualified experts, including their names, affiliations, criteria used in the review, and a consensus statement endorsing the program's relevance and impact.
 - e. Review Checklist for Program Justification The NSP must complete the checklist included in Guidance Document 1 to verify that required components of Option 2 have been met.

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Approval:

Alan Davidson, President/Chief Executive Officer

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