national council on aging

UNIVERSITY of WASHINGTON
Health Promotion Research Center
Department of Health Systems and Population Health // School of Public Health

Administration for Community Living Evidence-Based Program (EBP) Review Process

Frequently Asked Questions

Q: Can I view the information session and download the slides?

A: Yes, you can access the recording and slides on NCOA Connect.

Q: Is there a 6-month follow up requirement for outcomes?

A: Yes, this is a requirement (criteria 1b). We understand a 6-month follow-up may not be feasible for some health promotion programs. If the follow-up period for your program differs, we encourage you to reach out to EBPreview@uw.edu.

Q: Will there be a cost for the application and any annual fees, if approved for EBP?

A: No, there are no application fees or additional fees to be included in the national list of evidence-based programs approved for ACL funding.

Q: What is the best approach to connect with researchers to fulfill the peer-reviewed publication requirement?

A: Contact a colleague at a university to establish an academic-community partnership. If you don't have connections at a university or within an academic setting, you can reach out to EBPreview@uw.edu for assistance.

Q: During the review/approval process, would we need studies on our specific program, similar programs in general, or both?

A: The purpose of this evidence-based review process is to acknowledge programs that serve diverse populations and address different focus areas. You will need to submit studies related to your specific program and highlight how it differs from similar programs.

Q: Is the follow-up requirement comparing baseline measures to 6-month follow-up measures?

A: Yes - the applicant should demonstrate meaningful change from program enrollment to 6-month follow-up.

Q: How has the 6-month follow-up been cleared by other programs that are on the registry, and is it possible for potential applicants to consult on how they maintained those benefits 6-months later and documented that for their applications?

A: Yes, it is possible for potential applicants to reach out for TA to consult on how other EBPs have documented maintenance of outcomes in their applications. We also discussed on the webinar that some programs may have collected data at different follow-up periods which may be appropriate given the outcomes being measured, program duration, population being served, and other study and program characteristics. The intention with this requirement is that program effects are maintained after the program ends so reporting beyond pre-post change in outcomes. Please reach out to EBPReview@uw.edu or join our upcoming office hours with any further questions or to schedule a time to discuss further.

Glossary

- **Adverse events (AE)** = any harmful experience (physical or psychological) a participant has while involved in a study. Serious AEs are life-threatening, require institutionalization, or substantial disruption of a person's ability to conduct normal life functions.
- **Demographics** = data to describe characteristics of study/program participants, e.g. age, gender, race, ethnicity
- **Dropout rates** = the percentage of participants who begin a study but do not complete it. Dropout rates are often expressed as a percentage of the initial sample size. Also called an "attrition" rate.
- **Effect sizes (ES)** = a statistical measure that shows the magnitude of a difference between two groups (e.g. intervention and control group, pre and post measures). ES suggests how meaningful the observed effect is (the practical implications) beyond whether the effect is statistically significant (p-values). Commonly used ES include Cohen's d (for comparing means between groups) and Pearson's r (for measuring correlation).
- **Outcomes** = the impact or results of a program for improving health and well-being or reducing disease, disability or injury among older adults (age 60+) and/or adults with disabilities. May be behavioral, psychosocial, physical and/or physiological outcome(s).
- **Representativeness** = The degree to which the study/program participants are similar to those of the target population that did not participate in the study to indicate how generalizable the findings are.