

## **Social Innovation Fund's Rubric for Identifying Subgrantee Applicants' Incoming Level of Evidence**

This rubric is intended to be a tool to assist Social Innovation Fund's (SIF) intermediaries in assessing subgrantee applicants' incoming level of evidence (i.e., Preliminary, Moderate, Strong) of their proposed interventions. The process of determining the incoming and final level of evidence<sup>1</sup> for an intervention requires thoughtful assessment that can be complicated and often requires technical knowledge of research and evaluation design and methods. The rubric introduced in this document provides a framework for assessing the existing body of evidence behind an intervention based on past research and evaluation studies conducted on the program.

If you have any questions on how to use this rubric or how you are assessing proposed interventions, please feel free to reach out to us (i.e., staff from the Office of Research and Evaluation or SIF POs) and we will work with you in consultation with the JBS to answer them.

### **I. ATTAINING A LEVEL OF EVIDENCE**

As described in the SIF NOFA, all SIF funded interventions require at least a Preliminary level of evidence upon entering the SIF. This level of evidence will be demonstrated by studies conducted prior to applying for SIF funding.

- To attain the **Preliminary** level of evidence required for SIF funding, an intervention must, at a minimum, have a study that has “yielded promising results for either the program or a similar program.” Specifically, the program must have at least some outcome information such as pre- and post-tests without a comparison group, or post-test comparison between program and comparison groups.
- To attain a **Moderate** level of evidence, an intervention needs to have evidence “from studies whose designs can support causal conclusions (i.e., studies with high internal validity<sup>2</sup>), but have limited generalizability (i.e., moderate external validity<sup>3</sup>), or studies with high external validity, but moderate internal validity.”<sup>4</sup> Studies with high internal validity will likely use Quasi-experimental Designs (QED) (such as a matched comparison group or a comparative interrupted time series design) or Randomized

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<sup>1</sup>CNCS/SIF and JBS team conduct an assessment of the incoming final level of evidence of all interventions funded under the SIF grant and classify the interventions according to that level of evidence. The program ensures that the evaluation planned and implemented under SIF advances that intervention's base of evidence and targets moderate or strong level of evidence.

<sup>2</sup>Internal validity for a study is the extent to which the observed difference in the average group outcomes (usually program participants versus control or comparison group members) can be causally attributed to the intervention or program.

<sup>3</sup>External validity for a study is the extent to which evaluation results are applicable to groups other than those in the research.

<sup>4</sup>Moderate internal validity could come from a study having a comparison group formed without statistical matching techniques, statistical matching techniques that resulted in lower than desirable pre-test group equivalence or an interrupted time series design without a comparison group.

Controlled Trials (RCT) also known as Experimental Designs. At least one study with high internal or external validity is typically needed to attain a **Moderate** level of evidence.

- To attain a **Strong** level of evidence, an intervention should have designs that “can support causal conclusions (i.e., studies with high internal validity), and studies that in total include enough of the range of participants and settings to support scaling up to the state, regional, or national level (i.e., studies with high external validity).” Interventions that enter the SIF with a **Strong** level of evidence would have conducted either one large, multisite RCT or QED study or several smaller RCT or QED studies either in different locations or with different populations.

## II. ASSESSING INCOMING LEVEL OF EVIDENCE

Although there are several factors to consider when assessing a subgrantee’s incoming level of evidence, this rubric focuses on two important sets of factors: 1) the similarity of the proposed SIF intervention to the previous studied intervention(s) in terms of where and how they were implemented (see Income Evidence Review Rubric); and, 2) type of study or studies conducted which yielded positive results.

- 1.) Similarity of the proposed SIF interventions to previously studied interventions: Identify how the previously studied interventions relate to the intervention being proposed by the SIF applicant. Specifically, assess how closely the interventions studied match the proposed intervention in terms of two dimensions:
  - a) Was the intervention implemented by the applying organization or a different one?; and,
  - b) How closely matched is the studied intervention to the proposed intervention? Was the studied intervention identical or very similar to the proposed intervention in terms of content, delivery or target population, or was it substantially modified, adapted, or combined with other interventions?
- 2) Type of study conducted which yielded positive results: Identify which types of research or evaluation designs have been used in prior studies which yielded positive results of the proposed intervention.
  - What types of studies showed positive results rather than null or negative, results for the outcomes targeted by the applicant program?
    - For example, as you read through a subgrantee’s application material, do they cite positive results from studies that have used designs such as a pre- and post-tests with a single group? Do they cite studies that have used a study with a matched comparison group? Do they report on a randomized controlled trial?

### III. ISSUES TO CONSIDER

Additional issues to consider when assessing incoming evidence:

- 1) Adapting an intervention or combining multiple evidence-based interventions may lower incoming level of evidence for the “new” intervention.
- 2) Even with the same study design (e.g., a single site RCT), a proposed intervention using evidence from studies of a similar intervention may have a lower incoming level of evidence than an intervention using studies from the identical intervention.
- 3) Unless an intervention is being intentionally replicated with fidelity, studies for the same intervention conducted by a different program or organization may also offer lower levels of evidence than studies conducted by the proposing subgrantee.
- 4) A study or studies (i.e., single group pre-post test) conducted in a different organizational context than the one being proposed does not likely have sufficient evidence to be considered preliminary under SIF standards. This is due to the fact that the preliminary evaluations such as single group pre-post tests do not have sufficient internal validity to show that the program “causes” the outcome. For studies that only offer pre-post testing, it is possible that something in the program context other than the intervention (e.g. how they select their participants) may be causing the changes seen by that program.

### IV. USING THE RUBRIC

To use the Incoming Evidence Review Rubric on the next page and find an intervention’s incoming level of evidence:

1. Review each study the subgrantee offers as incoming evidence for their proposed intervention. Identify the studies that generally show positive, rather than null or negative, results for the outcomes targeted by the applicant’s program.
2. Determine the connection of the subgrantee’s proposed intervention to the studied intervention and use the labels in the top row “Similarity to Proposed Intervention” to select the column that best represents how that study relates to the proposed intervention.
3. Put a check in the box(es) of the column selected in step 2 above, where it intersects with the row for the design type used in the study from the choices in the left hand column “Study Design”.
4. Review each study and check each relevant box until the reviewers have exhausted the studies and can clearly see where it all lands in terms of level of evidence.
5. After following this procedure for each study cited by the grantee, the highest-ranked checked box (e.g. Preliminary, Moderate, Strong) is the incoming level of evidence for the subgrantee’s proposed intervention.

## Incoming Evidence Review Rubric

Applicant/Subgrantee \_\_\_\_\_ Highest Ranked Checked Box: \_\_\_\_\_

		Similarity to Proposed Intervention: How matched is the studied intervention to the proposed Intervention by organization and similarity to intervention? Was it done by:				
		A different organization doing a similar, but not identical intervention?	A different organization doing an identical intervention? <i>(The proposed intervention will be replicated with fidelity)</i>	The same organization doing a combination of interventions that include the one studied?	The same organization doing an intervention that is similar, but not identical to the studied intervention?	The same organization, doing exactly the same intervention?
		<b>What type of design was used for studies where the results on relevant outcomes were positive?</b>	None or none known	Not yet preliminary ( )	Not yet preliminary ( )	Not yet preliminary ( )
	Implementation only	Not yet preliminary ( )	Not yet preliminary ( )	Not yet preliminary ( )	Not yet preliminary ( )	Not yet preliminary ( )
	Pre-post testing	Not yet preliminary ( )	Not yet preliminary ( )	Not yet preliminary ( )	Not yet preliminary/ Preliminary (Depending on the extent of similarity) ( )	Preliminary ( )
	Pre-post or post only with non-matched comparison group, or interrupted time series with no comparison group	Not yet preliminary ( )	Not yet preliminary ( )	Preliminary ( )	Preliminary ( )	Preliminary ( )
	Single site, well designed and implemented QED or RCT	Preliminary ( )	Preliminary ( )	Preliminary ( )	Preliminary ( )	Moderate ( )
	Two or three well designed and well implemented single site RCTs or QEDs	Preliminary ( )	Moderate ( )	Preliminary ( )	Preliminary/Moderate (Depending on extent of modification) ( )	Moderate ( )
	National/large scale multi-site well designed and well implemented QED or RCT, or multiple (three or more) well designed and well implemented QEDs or RCTs in different locations	Preliminary ( )	Strong* ( )	Preliminary ( )	Preliminary/Moderate (Depending on extent of modification) ( )	Strong* ( )

\*(To be designated Strong+ and to be exempted from the requirement to attain moderate evidence with their SIF evaluation, the program would need an extensive, multi-site history of RCT's/QED's with the population in question.)