



Organizational Self-Assessment Tool

Is your organization ready to implement Evidence-Based Practices (EBPs)?

The following self-assessment tool is designed to gauge your readiness to implement EBPs at your organization. This is not a validated research tool but rather a guide to help support your own understanding of areas in which your organization may want to do some work. The organizational self-assessment tool examines six different areas within your organization: Leadership, Organizational Culture, Data Collection, Technology, Continuous Improvement and Collaboration. To use the tool, for each EBP readiness component, please circle the statement that best captures what your organization does.

EBP Readiness Component	Not Prepared Yet	On Our Way	Prepared	Implemented
LEADERSHIP				
Understands the value of evidence-based practices	Leadership has not articulated an understanding of EBPs to staff.	Leadership has begun to discuss EBPs with staff.	Leadership has communicated a clear understanding of EBPs.	Leadership regularly communicates the benefits of EBP to staff.
Works toward a shared vision of desired organizational outcomes	Leadership does not communicate a vision of how EBPs will improve outcomes.	Leadership sometimes engages with staff to discuss the future of the organization and the role of EBPs.	Leadership is accessible to staff and open to hearing suggestions about how to improve outcomes.	Leadership meets with staff regularly to ensure a shared understanding of desired organizational outcomes including the adoption of EBPs.
Promotes a positive attitude towards evidence-based practices	Leadership communicates that EBPs are a funding requirement.	Leadership shares that EBPs are required and engages staff in discussions regarding the benefits they may provide.	Leadership articulates that EBPs would help improve program services and outcomes.	Leadership promotes the message that using EBPs will help better serve clients through programs that have been found to result in the best outcomes for their specific needs.



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ORGANIZATIONAL CULTURE				
Staff has a positive attitude about their ability to improve client outcomes	Staff is dedicated to their work, but feel resigned to seeing clients recidivate.	Staff believes there is room for improvement in the way they currently work with clients.	Staff actively spends time and resources getting additional training and planning for service improvements.	Staff has realized the benefits of EBPs to improve the services they deliver.
Staff believes clients' behaviors can change	Generally, staff believes clients will always need supervision.	Staff is hopeful that clients can change their behaviors when engaged in appropriate programs and services.	Staff is willing to make changes in the way they do their work to increase client success rates.	Staff has discovered the benefits of using EBPs including standardized assessments for serving and placing clients appropriately.
Staff is well-informed about current trends in the field	Staff relies only on the existing policies and procedures to guide their work.	Staff sometimes attends workshops or trainings to learn about new methods for serving their clients.	Staff attends workshops or trainings and informally shares what they have learned with their colleagues.	Staff regularly attends workshops and trainings and commonly conducts internal peer-based workshops to share their knowledge with their colleagues.
Staff is flexible and generally adapts to organizational changes	Staff generally resists change and relies on "what they know" to conduct their work.	Staff is reluctant to change unless they believe the change will benefit them and their clients.	Staff understands that change is necessary if they are to remain effective in their work.	Staff has benefited from previous change and is open to additional organizational changes.
Staff is open to trying EBPs in their work	Staff believes EBPs are too academic and cannot replace their experience developed over years.	Staff does not fully understand EBPs, but is interested in learning more about the pros and cons.	Staff believes that there is value in implementing EBPs and that EBPs have the potential to help serve clients more effectively.	Staff knows that EBPs take time to learn but that they improve client outcomes.



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DATA COLLECTION				
Staff uses information (data) to direct the creation and implementation of individual service plans	Staff typically does not use formal client assessments to collect client information (data).	Staff has a standard application or intake form that allows them to collect some client information (data), but does not use it to inform service plans.	Staff uses a validated assessment tool, client interviews, family information, and recommendations from probation to create individual service plans.	Staff uses a validated assessment tool and regularly reviews client progress to determine if service and program needs have changed.
Staff regularly measures change in client behavior	Staff believes that only a counselor, case manager, or therapist can judge if there has been a change in behavior.	Staff meets with clients to discuss progress.	Staff uses client information (data) to demonstrate changes in risk, behaviors and attitudes.	Staff uses client information (data) to demonstrate changes in risk, behaviors and attitudes and measure short term and long-term change.
TECHNOLOGY				
The organization has an automated data system to maintain electronic case records that is used for decision-making.	Staff uses paper case/client files. Staff dreads having to keep client records and believe it distracts from client service.	Staff keeps electronic intake records but they are not used as part of an electronic case/client file. Staff collects information (data) but don't use it for anything.	Staff collects information through an electronic care management system and uses it to monitor and inform placement and measure client progress.	The client case management system, billing system, and evaluation reporting system are integrated. Individual service provider staff and management use automated electronic data systems.



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CONTINUOUS IMPROVEMENT				
Staff practices continuous improvement in service delivery	Staff typically believes that most of our clients will not change and does not make any changes in service delivery.	Staff sometimes questions why clients do not succeed but will only make slight adjustments in service delivery.	Staff discusses improving client outcomes and the organization has some systems in place to learn from shortcomings and make some adjustments to service delivery.	Staff regularly reviews client progress, expects positive change, and adjusts service delivery plans as needed.
COLLABORATION				
Staff partners with other service providers and colleagues	Staff provides all services for all of our clients.	Staff sometimes refers clients to other programs.	Staff works with a group of providers who complement our system of services.	Staff collaborates with a group of providers and coordinates treatment plans and service delivery.