

Department of Human Services  
Addictions and Mental Health Services Division

2008 Evidence Based Practice Survey

According to records from our Evidence Based Practice Inventory that can be accessed online at <http://www.oregon.gov/DHS/mentalhealth/ebp/inventory-map/main.shtml>, «Program\_Name» located at «Program\_Address», «Program\_City» in «County» County, with contact person as «Program\_Contact», phone no. «Contact\_Phone» and email address of «Contact\_Email» has implemented or is implementing the following evidence based practices:

- «EBP\_Practice1»
- «EBP\_Practice2»
- «EBP\_Practice3»
- «EBP\_Practice4»
- «EBP\_Practice5»
- «EBP\_Practice6»
- «EBP\_Practice7»
- «EBP\_Practice8»
- «EBP\_Practice9»
- «EBP\_Practice10»

Please confirm this information. If you are no longer using a listed practice, place an “x” in the box. Please list any new practices you are implementing using the approved AMH list located at <http://www.oregon.gov/DHS/mentalhealth/ebp/practices.shtml>, and list them here and when the new EBP was implemented.

| EBP Title | Date of Implementation |
|-----------|------------------------|
|           |                        |
|           |                        |
|           |                        |

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**1. Implementation Phase**

For each of the listed practices (both the original list and any updates), indicate your stage of implementation using the following:

“Early” – Anywhere from having identified the practice you want to implement to actively planning implementation

- Identified the practice
- Outlined the implementation process
- Established a plan for improvement and sustainability

“Middle” – Anywhere from initial training to a year or more of implementation.

- Trained staff in the practice
- Delivered the practice
- Completed an internal review and made revisions
- Had an external review completed and made revisions

“Late” – At this point the practice is in continuous use and is sustainable

- Have regular external reviews and make ongoing revisions
- Revised sustainability plan
- Provided technical assistance to others
- Are identified as a model program for that practice

Practice

«EBP\_Practice1»

«EBP\_Practice2»

«EBP\_Practice3»

«EBP\_Practice4»

«EBP\_Practice5»

«EBP\_Practice6»

«EBP\_Practice7»

«EBP\_Practice8»

«EBP\_Practice9»

«EBP\_Practice10»

Level of Implementation

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List additional EBP if necessary

**2. Number of Clients Served**

How many combined total clients did you serve during the past 12 months using all of the previously listed EBPs? \_\_\_\_\_

In addition, if you have information on the number of clients served for the following specific practices please list them separately. AMH is collecting this information to include in our response to the Mental Health Block Grant, which asks for specific information regarding this list of EBPs:

- Assertive Community Treatment
- Family Psychoeducation
- Functional Family Therapy
- Illness Management Recovery
- Integrated Dual Disorders Treatment
- Multidimensional Treatment Foster Care
- Multisystemic (Family) Therapy
- Supported Employment
- Supported Housing

**3. Cost of Providing EBPs**

Please provide the total cost for delivering all services during the past 12 months:

\_\_\_\_\_

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If you are a mental health provider, please provide the total costs for delivering services specifically to people with serious and persistent disorders and/or serious emotional disorders: \_\_\_\_\_

*For the figure below, the estimated costs are to be the combination of the implementation of all evidence-based services listed. The costs are to be derived by estimating the percentage time spent by **all** staff supporting the practice(s) and multiplying it against the **total** costs of staff.  
(ex: Staff A estimates 20% time spent on supporting practice with full cost of employee of \$1000/mo and Staff B estimates 40% with full cost of employee of \$2000.  
.20 + .40 = .60, \$1000 + \$2000 = \$3000, take .60 x 3000 = \$1800)*

Please provide the total costs of delivering evidence-based practices:  
\_\_\_\_\_

**4. Maintaining Fidelity and/or Adherence to Practice Standards**

Please check all that apply to your efforts to implement all of your EBPs within the standards associated with the practices:

- Regularly occurring fidelity reviews
- Practice component reviews
- General organization review
- Clinical supervision
- Individual clinician proficiency reviews
- Consultation with the developer
- Quality assurance activities
- Corrections Program Checklist
- Other, please explain: \_\_\_\_\_

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**5. Outcomes**

In the space below, please summarize the outcomes you have achieved through implementation of evidence-based practices. These outcomes can be specific to a given practice or you can apply them to your program as a whole.