

## Organizational Readiness Worksheet

Beginning a Collaborative Care program is a big undertaking and it's best to know the current strengths and weaknesses of your organization before embarking on a significant practice change. Use this worksheet to assess your readiness.

### 1. Organizational Capacity for Change

*Organizations that understand Collaborative Care involves practice change on many levels do better implementing it.*

1. What are your anticipated **internal** forces for and against change (e.g. strategic priorities, leadership support, organizational culture, experience with practice change, resistance to change)?
2. What are your anticipated **external** forces for and against change (e.g. financial, performance measures, other)?
3. What are **other** potential barriers and challenges (e.g. competing priorities, wrong incentives, depression stigma, other)

### 2. Organizational Support

*Organizations that have buy-in from **every** key stakeholder group are significantly more successful implementing Collaborative Care.*

1. How strong is support for Collaborative Care from: 1) primary care providers; 2) nursing and medical support staff; 3) clinic manager; 3) behavioral health providers; 4) administrative staff; 5) Board, CEO, CFO, CMO; 6) patients
2. Does the organization have a vision for Collaborative Care that was created and endorsed by all key stakeholders?
3. What challenges will you have in implementing Collaborative Care if you **don't** have support from each stakeholder group? How will you address these challenges? Will you be able to implement Collaborative Care without this support? If yes, how?

### 3. Quality/Process Improvement Initiatives

*Organizations with existing quality and process improvement structures in place are typically better able to plan for the practice change involved in Collaborative Care and to effectively institutionalize regular, ongoing program monitoring and adjustment. Organizations that do not have any significant competing quality or process improvement initiatives (e.g. implementation of an EMR or another significant clinical practice change) planned to coincide with launching Collaborative Care are typically more successful.*

1. How many quality/process improvement initiatives has your organization completed in the past 5 years?
2. What proportion of these initiatives are now part of usual care?
3. How many significant quality/process improvement initiatives do you have planned for the 12 month period following your planned launch of Collaborative Care?

### 4. Organizational Strengths and Challenges

*Organizations with stable leadership, a realistic assessment of their strengths and weaknesses as an organization and a strong plan for monitoring program outcomes and addressing challenges and are typically more successful implementing Collaborative Care.*

1. What is the length of tenure of organizational leadership (e.g., CEO, CMO, CNO, Clinic Manager, Behavioral Health Director)?
2. What are your organization's strengths regarding implementation of Collaborative Care? What are your anticipated challenges?
3. What is your plan for addressing both anticipated and unanticipated challenges? For example, what will be the process if the implementation doesn't go as planned or clinical outcomes are not as expected?

### 5. Identification of Partners

*Organizations that identify key partnerships, when that's relevant to their Collaborative Care program, and engage these partners in developing a shared vision and implementation plan are generally more successful.*

1. Are there any key partners inside or outside the organization (e.g. contract psychiatric consultant, behavioral health department providing psychotherapy, community organizations helping with identification of patients and/or supporting patients in treatment) that are essential to the Collaborative Care program?
2. What is the best way to engage the partner(s) to insure development of a shared vision, clear understanding of roles and expectations, a plan for implementation, and plans for ongoing monitoring and adjustment when needed.



## 6. Financing

*Organizations with a clear plan for how to fund both the start-up costs of Collaborative Care as well as ongoing program costs do substantially better at sustaining Collaborative Care.*

1. What are your organization's financial incentives and disincentives to implement Collaborative Care?
2. What are your expected start-up costs? How will these be covered?
3. What are your expected program maintenance costs? How will these be covered

