6. Approaches to Evaluation of Practice (EPAS Competency 9 – Evaluation of Practice) Evaluation is an important component of professional social work practice. In order to deliver effective services, one needs to gather information, assess whether or not the social work interventions provided have helped to address the identified goals, and then make necessary changes based on this evaluation. There are a variety of approaches to evaluation of practice. Two specific strategies are presented here. Regardless of the method, it is important to remember to conduct evaluation of practice in a collaborative manner with clients/consumers so that they are mutually involved in the process.

Goal Attainment Scaling

This approach to evaluation of one's own practice is very specific to the individual (or system) with whom you are working. The procedure is to identify a goal and then create a "scale" with anchors that the practitioner and client/consumer use to reflect how the client/consumer is doing and/or how close he/she is to attaining the goal on a regular basis over a period of time.

For example, a client has a problem with feeling anxious in situation X. The goal is to be anxietyfree. During weekly visits, the client rates on a scale of 1-10 how he/she felt during the week when faced with situation X. A scale may be as follows:

10) Extreme anxiety, sweaty palms, heart racing, thoughts racing, immobilized; just thinking about situation

X leads to symptoms, client avoids situation X

9) Thinking about situation X DOES NOT lead to symptoms, as situation X nears extreme anxiety builds:

sweaty palms, heart racing, thoughts racing, immobilized; client would like to avoid situation X

8) High anxiety, begins experience, quits early (this may be part of intervention plan)

7) High anxiety, has to stop before halfway point

- 6) High anxiety makes it to halfway point
- 5) Moderate symptoms ongoing in situation X, has to stop experience half way through
- 4) Moderate symptoms ongoing in situation X, fear that I can't complete, but does complete
- 3) Symptoms ongoing in situation X but can ignore them and complete experience
- 2) Intermittent feelings (heart beating faster, some sweating) while in situation X

1) No anxiety symptoms throughout experience of situation X

Another example could be with an agency where the goal of intervention is to fundraise. Here one can set the fundraising goal and use a "thermometer" at regular intervals to mark progress of the effort.