



Implementation Strategies – Detailed Guidance

Evidence-informed techniques to change behavior, address barriers, and support consistent uptake of an intervention in practice.

Review the guidance organized by elements below.

We recommend using a worksheet to help teams gather and reconcile the information quickly and clearly.

Implementation strategies are different than your intervention. A big part of pragmatic trials is testing not only if your intervention or program works, but how to make it happen/delivered in the real world. To do this, you need to thoughtfully use implementation strategies.

In this section, we'll dive into different types of implementation strategies and how they can be used to fit specific contexts.

1. What is the intervention?

We define an intervention as the “thing” that you are doing, often collectively known as the 7Ps (program, pill, practice, procedure, policy, product, or principle) that have been shown to improve health behavior and outcomes. This is the evidence-based practice.

Why It Matters

Clearly understanding what the intervention is and why it matters in your specific setting, is the first step before selecting implementation strategies.

Some key characteristics of effective interventions include efficiency, low burden, generalizable, adaptable, aligned with patient flow, and able to be refined in collaboration with implementation staff.

Action Steps

- Keep in mind the problem or gap you aim to address with the proposed intervention.
- Identify the sources of evidence supporting your intervention.
- Outline the key characteristics (we recommend thinking of the functions or key goals) of the intervention to determine whether it is a good fit for addressing your health gap or problem.
- If the intervention has not yet been tested in a real-world setting, assess potential barriers and facilitators to implementing and sustaining it in your specific context.



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R2P2 combines strategies for fast results with strict patient-focused research standards.

Tools and Resources

- [An Overview of Research and Evaluation Designs for Dissemination and Implementation](#), is a paper that described the 7Ps mentioned above. Implementation strategies may vary depending on the type of P your intervention represents.
- Curran et al, in [Implementation science made too simple: a teaching tool](#). Simplify how we should conceptualize interventions, strategies, and outcomes.
- Perez Jolles et. al. Functions and Forms website discusses and provides examples of how to design strategies to achieve key goals or functions

2. What is an Implementation Strategy?

[Implementation strategies are the “how,” methods applied to enhance not only adoption and implementation, but also sustainment and scale-up of your intervention.](#)

There are 73 standardized implementation strategies in the field of implementation science. Among these, common strategies include education, incentives, audit/feedback, and policy change.

These are distinct from the intervention above that might be a program, procedure, etc.

Why It Matters

Ensures everyone on the project understands how and why the strategy was picked.

Specifying your strategy will be helpful to identify tools and resources are needed and which team members should implement the strategy.

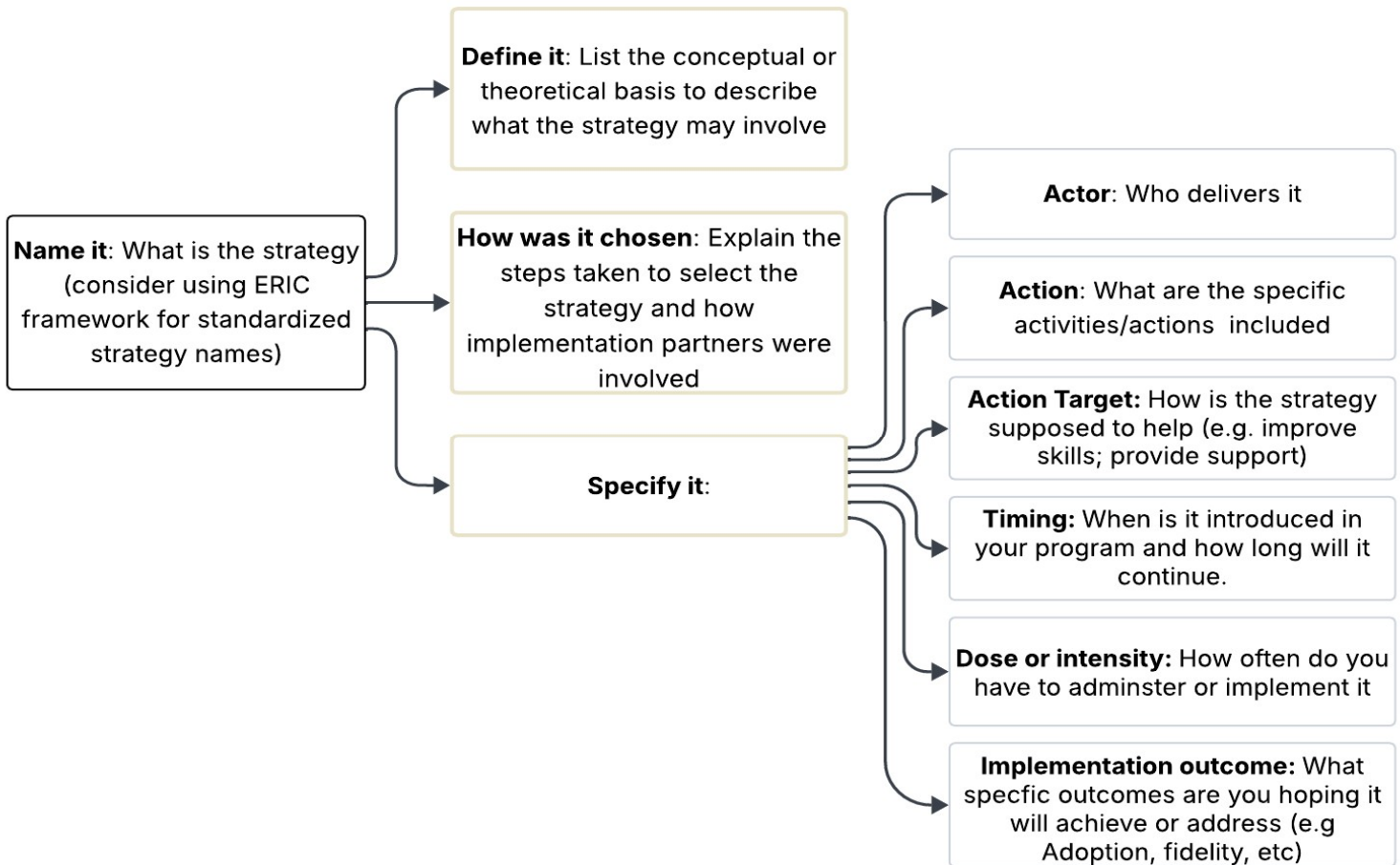
Action Steps

- Use Proctor’s Implementation Strategy specification approach below
- By following the figure below, you could specify or describe your implementation strategy in relation to your overall program goal in detail

Example

Exercise is an evidence based practice for diabetes prevention and management. To promote its uptake among patients, several implementation strategies may be employed, including **conducting educational meetings** to increase patient understanding of the benefits of exercise, **distributing educational materials (decision aid)**

that provide practical guidance on how to engage in physical activity, **facilitating patient access to exercise resources**, and **providing incentives** to motivate consistent participation.



Tools and Resources

- [Brownson, Colditz, and Proctor \(2018\)](#), in *Dissemination and Implementation Research in Health 2nd edition*, discuss implementation strategies in Chapter 15
- [Weiner, Lewis, and Sherr \(2022\)](#), in *Practical Implementation Science*, discuss about implementation strategies in chapter 3, 4 and 8
- To learn more about the original paper that introduced the implementation strategies specification framework, check out [Implementation strategies: recommendations for specifying and reporting](#) It provides an in-depth explanation of the stages.



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3. At what stages of implementation are you going to apply each strategy?

There are four phases of implementation: Pre-implementation, Implementation, Sustainment, and Scale-up. Your implementation strategy(ies) should be chosen to target the corresponding stage: You will likely need different strategies for different phases.

Why It Matters

Knowing which stage your strategy is intended to enhance is essential.

It is important to align your strategy with a stage, and think ahead about implications for later stages.

Action Steps

- Identify the stage of implementation for which you would like to develop a strategy
- The stages in the figure below are adapted from the [VA QUERI stages of implementation](#), with a modification that includes scale-up. [Continued on next page]



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Pre-Implementation

Use strategies early to shape readiness and fit (e.g., stakeholder engagement, co-creation, user-centered design, prospective costing, embedding into workflows/policies). **Example strategies:** stakeholder engagement, co-creation, prospective costing, user centered design methods; embedding strategies into standard workflows or polices etc.
Example use case: Conduct educational meetings with providers/patients and assess readiness, workflows, and contextual barriers/facilitators.

Implementation

Apply strategies to support delivery, ensure fidelity, and adapt to context as needed; document adaptations.
Example strategies: audit and feedback, cascade analysis, facilitation, supportive supervision, learning collaboratives.
Example use case: Provide patient education and resources, and use facilitation, incentives, and audit/feedback to reduce barriers and increase uptake.

Sustainment

Focus on maintaining the intervention by integrating it into routine practice; adjust scope or roles as needed and clearly communicate costs to leadership.
Reporting costs: Summarize both overall and type of costs to leadership to decide if the program can be sustained in its present form or if modifications are needed.
Example strategies: reducing intensity or costs; shifting tasks or responsibilities to others; champions to lead sustainment efforts,
Example use case: Integrate exercise into routine diabetes care with ongoing monitoring, feedback, and support to sustain engagement.

Dissemination and Scale-up

Expand a proven intervention to new settings to increase reach and impact; tailor messaging and cost information for decision-makers.
Example strategies: Reporting and communicating costs; including presenting to decision makers emphasizing the types of costs- and benefits- they are most concerned about
Example use case: Package materials for new sites and use train-the-trainer models and partnerships to support consistent adoption across settings.



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Tools and Resources

- [Stages of Implementation Completion \(SIC\)](#): outlines eight key stages and milestones in the implementation process, organized across three phases: pre-implementation, implementation, and sustainment.
- [The Exploration, Preparation, Implementation, Sustainment \(EPIS\) Framework](#): outlines four key phases of the implementation process and helps identify common and unique factors within both the broader system (outer context) and the organization (inner context). Starts from exploration phase to sustainment.
- [VA QUERI Implementation Roadmap](#): is a practical guide offering tools, case studies, and user-friendly methods to overcome barriers and speed up the adoption of proven care approaches.
- The [interactive PRISM Webtool](#) pragmatically and iteratively guides users in assessing the alignment of an intervention context by integrating the [PRISM framework's](#) multilevel domains—such as recipient characteristics, infrastructure, and external environment—with [RE-AIM](#) outcomes (Reach, Effectiveness, Adoption, Implementation, Maintenance).

4. Have you made, or do you plan to make, adaptations to the strategy(ies)?

Action Steps

Consider if your strategy(ies) need to be adapted. Be sure to track these adaptations when they are made in a systematic way.

Do data suggest that an adaptation to the strategy is needed? What changes are needed?

If yes, adapt the implementation strategy and track the answers to these questions:

When did the adaptation occur?

Were adaptations planned?

Who participated in the decision to adapt?

What was the goal?

What was modified?

At what level of delivery was the adaptation made?

What is the nature of the content modification?

Reason for adaptation?

Are core elements or core functions of the strategy known? If so, was the adaptation consistent with this (these) function(s)?

Can limitations of the strategy for this setting or population be addressed while preserving core elements or functions?

Does the timeframe of the proposed rollout of the EBP allow for a pilot study that includes proposed adaptations?

To what extent is the adapted strategy successful- on what outcome?

If the strategy is not successful, is it acceptable to stakeholders for the intervention to be less effective than originally planned?



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Tools and Resources

- Detailed guidance on the adaptation process using FRAME-IS, as shown above, can be found in the following resource. [The FRAME-IS: a framework for documenting modifications to implementation strategies in healthcare](#)
- [A multi-method, real-time longitudinal approach to systematically document adaptations during pre-implementation, implementation, and sustainment through a real-time tracking instrument, process maps, Implementation and Evaluation \(I&E\) team meeting minutes, and adaptation interviews](#)

| Potential pitfalls | Ways to Adapt Strategy |
|---|--|
| Assuming one strategy will work perfectly | Review effectiveness in similar contexts. Adapt or add strategies as needed. |
| Choosing strategies that are too intensive, complex, and expensive | Assess feasibility and cultural fit. Co-develop strategies with partners. |
| Selected strategies don't impact barriers or new barriers arise | Use tools like PRISM or CFIR to ERIC mapping. Conduct or review determinant assessments. |
| Poorly defined or described strategies | Use the Proctor specification tool to clearly define strategy components with your team. |

Additional Tools and Resources

- Kirchner JE, Waltz TJ, et al. (2023; 3rd edition). Implementation strategies. In R Brownson, G Colditz, E Proctor (Eds) Dissemination and implementation research in health. Oxford Publishing: New York. Pages 119- 146.
- Rabin, B.A., Cain, K.L., Glasgow, R.E. Adapting Public Health and Health Services Interventions in Diverse, Real-World Settings: Documentation and Iterative Guidance of Adaptations. Annu. Rev. Public Health 2025. 46:16.1–16.21. doi.org/10.1146/annurev-publhealth-071321-041652
- Singh, RR, Saldana, L. How to implement evidence-based interventions. In Weiner, B.J., Lewis, C.C., Sher, K. (2023). Practical implementation science: Moving evidence into action. Springer Publishing, New York. Pages 177- 202.