



F O G A R T Y



Implementation Research from Basics to Advanced: Terminology, Frameworks, & Theories to Guide the Process

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Yale CMIPS

Center for Methods in Implementation &
Prevention Science



Yale SCHOOL OF
PUBLIC HEALTH



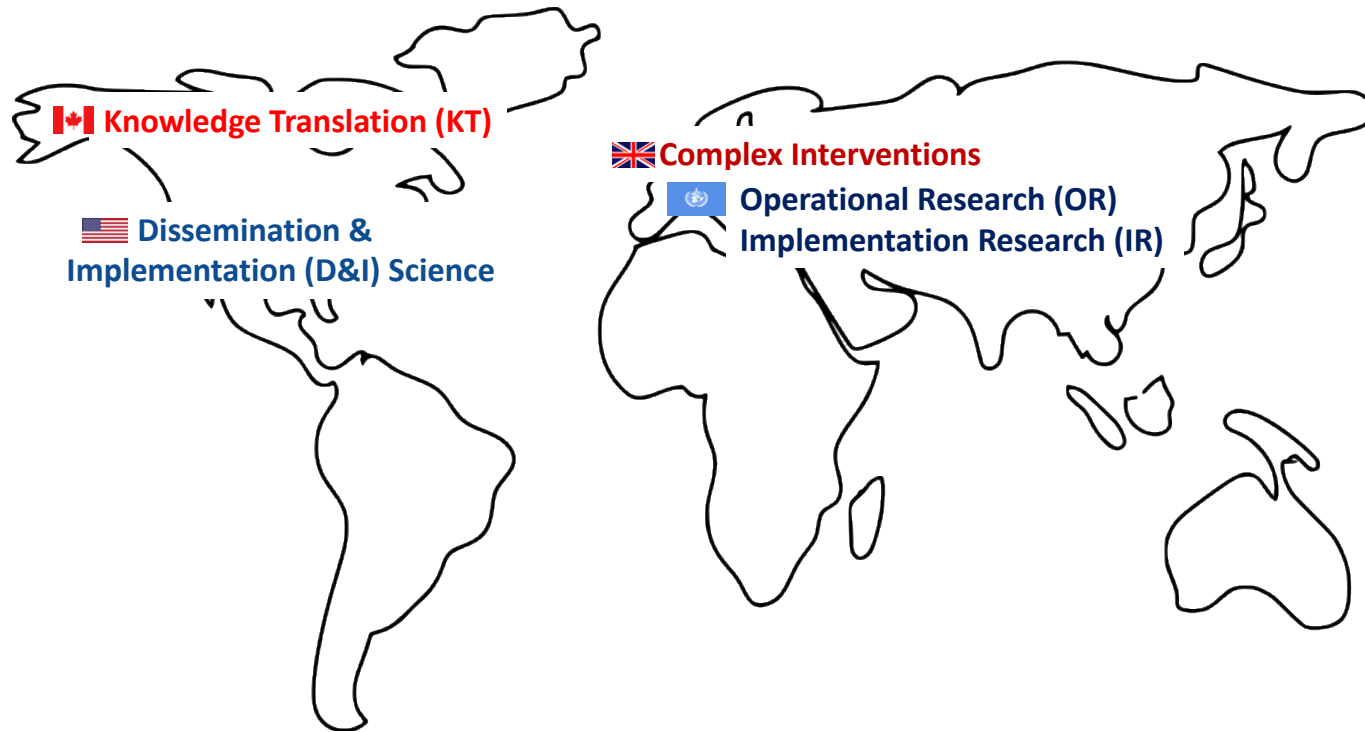
cira

Center for Interdisciplinary Research on AIDS

A definition of Implementation Science (IS)

Implementation science is
the scientific study of methods to promote
the systematic uptake of research findings & evidence-
based practices into routine practice
to improve the quality & effectiveness of health services.

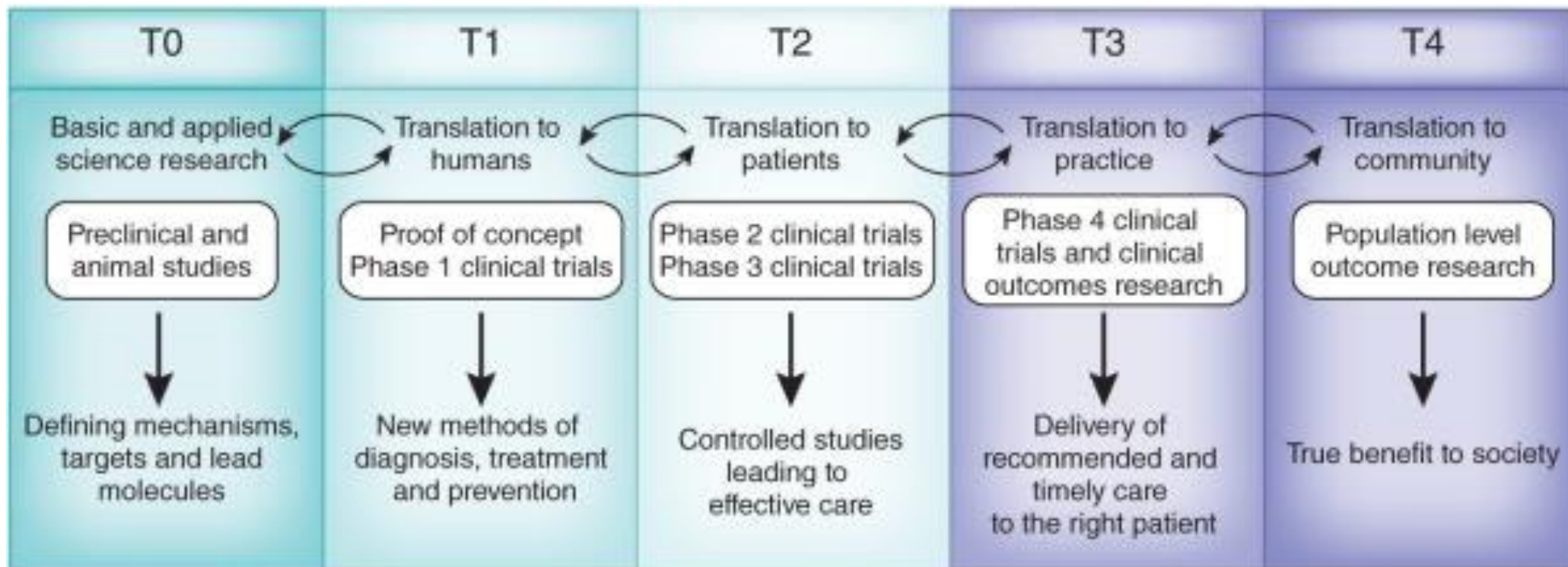
Terminology varies around the world...



Knowledge Translation	Dissemination Science	Implementation Science
Research	Dissemination Research	Implementation Research
Practice	Dissemination Practice	Implementation Practice

....but the need to bridge research & practice is a constant theme.

IS is a translational & iterative process



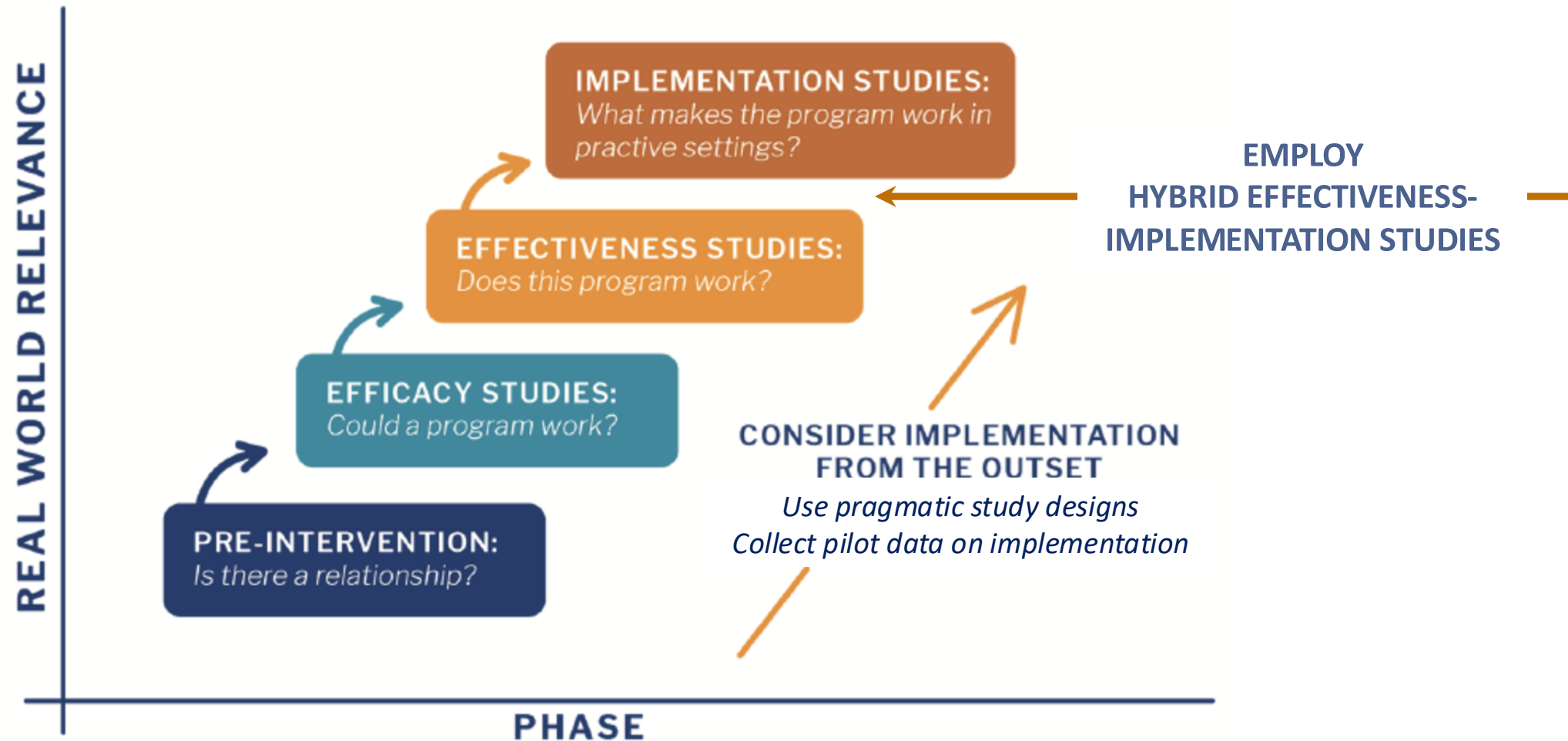
— Evidence Generation —→

Implementation Science



“It’s never too early to think about implementation”

~~“Isn’t it too early to think about implementation?”~~



It's also concerned with de-implementation & sustainability

"Implementation science is only about implementation"

Choose Wisely: Do You Need a CT Scan?

If you have a head injury and 1 or more of the following...

- Ongoing Confusion
- Skull Fracture
- Vomiting 2 or more vomiting episodes
- 65+ Age 65 years or older
- Dangerous Mechanism: A fall from higher than 3ft, or a motor vehicle, or occupant thrown from a vehicle, 5 stairs, a pedestrian hit by

*** Concussions do not show up on a CT Scan ***

...then you might need a CT scan

The Canadian CT Head Rule

The Canadian CT Head Rule is a tool used by doctors to identify patients very unlikely to have any serious injuries requiring special treatment. If you have one or more of the above, you might need a head CT. If you have none of these, a CT is unlikely to be helpful.

There is a **1 in 7,814** risk of needing neurosurgery if you have a negative Canadian CT Head Rule.

Risks of Medical Imaging Radiation

Medical Imaging is one of the biggest sources of ionizing radiation to the general population. Doses are measured in millisieverts (mSv). It can increase the risk of cancer in high doses.

Every 10 mSv of radiation may increase your lifetime cancer risk by **3%**

Dental X-ray (0.01 mSv)
Chest X-ray (0.2 mSv)
Mammography (0.4 mSv)
1 Year Average Background Radiation in Canada (1.3 mSv)
Head CT Scan (2 mSv)

4 Questions to Ask your Doctor

- Do I really need this head CT scan?
Tests are used to decide the best way to treat your issue. Tests may or may not be necessary.
- What are the downsides to getting a head CT scan?
Discuss the risks of any test or procedure with your doctor to make an informed decision together.
- Are there simpler, safer options?
Ask about your options. There may be a test, treatment, or procedure with lower risks and/or faster.
- What happens if I do nothing?
Ask your doctor what would happen if you waited to get a test, treatment or procedure now.

Sources:
 (1) Harman et al. Clinical decision making rules for adults with minor head injury: a systematic review. *Journal of Trauma*, 2011 Jul 7; 1(1):245-251 <http://www.ncbi.nlm.nih.gov/pubmed/21818031>
 (2) Government of Canada, Canadian Nuclear Safety Commission, <http://nuclearsafety.gc.ca/eng/resources/radiation/introduction-to-radiation/radiation-doses.cfm>
 (3) Eisenberg et al. Cancer risk related to low-dose ionizing radiation from cardiac imaging in patients after acute myocardial infarction. 2011 Mar 8; 183(6):450-456 <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC305047/>

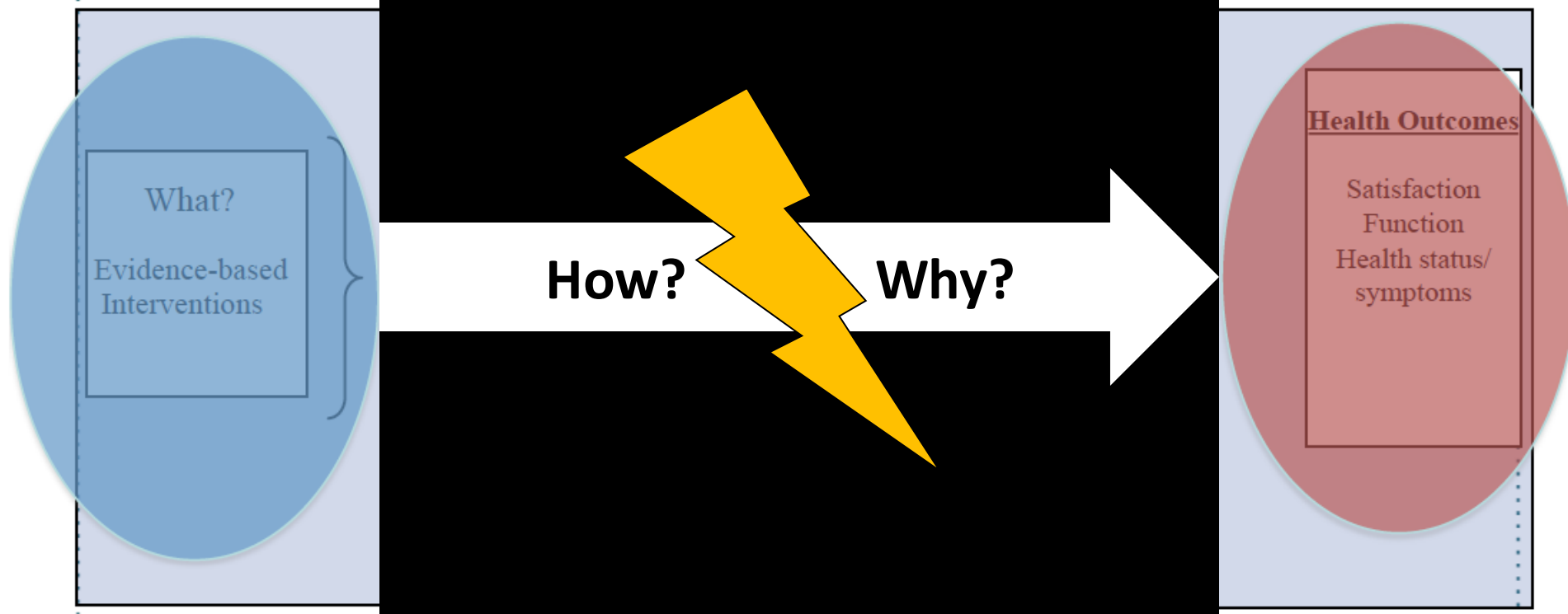


Figure adapted by The Center for Implementation
Original source: <https://sustaintool.org/>

Interventions, Strategies, or Outcomes?

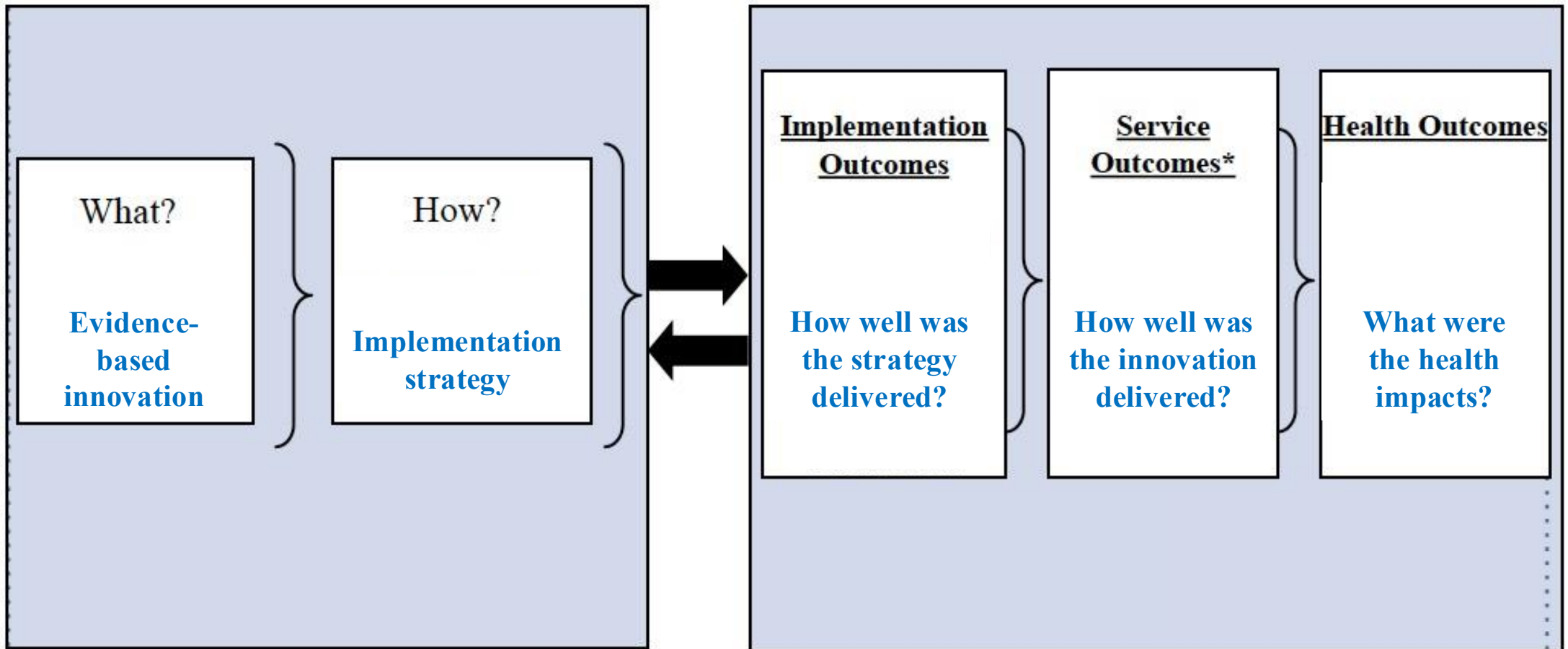
- The intervention/practice/innovation is **THE THING**
- Implementation strategies are the stuff we do to try to help people/places **DO THE THING**
- Main implementation outcomes are **HOW WELL** they **DO THE THING**

Something is missing in most effectiveness research



If the intervention does work, we won't know how.
If the intervention doesn't work, we won't know why.

Implementation outcomes are a defining feature of IS



A roadmap for today's talk

Implementation Science: Revisiting What it Is and What it is Not

What are theories, models, and frameworks & why do we need them?

How to choose a theory, model, or framework?

Theory, model, or framework?

- *A tool that describes and simplifies a phenomenon*

Model

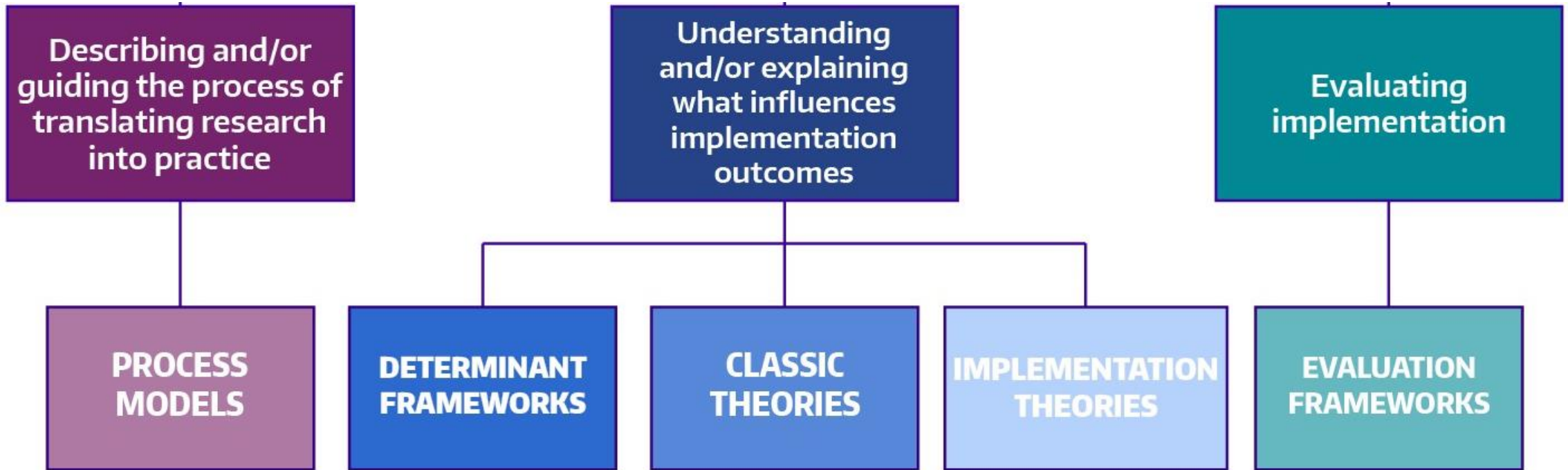
- *A set of principles or statements that explain & predict a phenomenon*

Theory

- *A structure for identifying factors that influence implementation*

Framework

Theoretical approaches used in IS: Function & Phases



Pre-
implementation

Implementation

Post-
implementation

Why not just use common sense instead of theory?

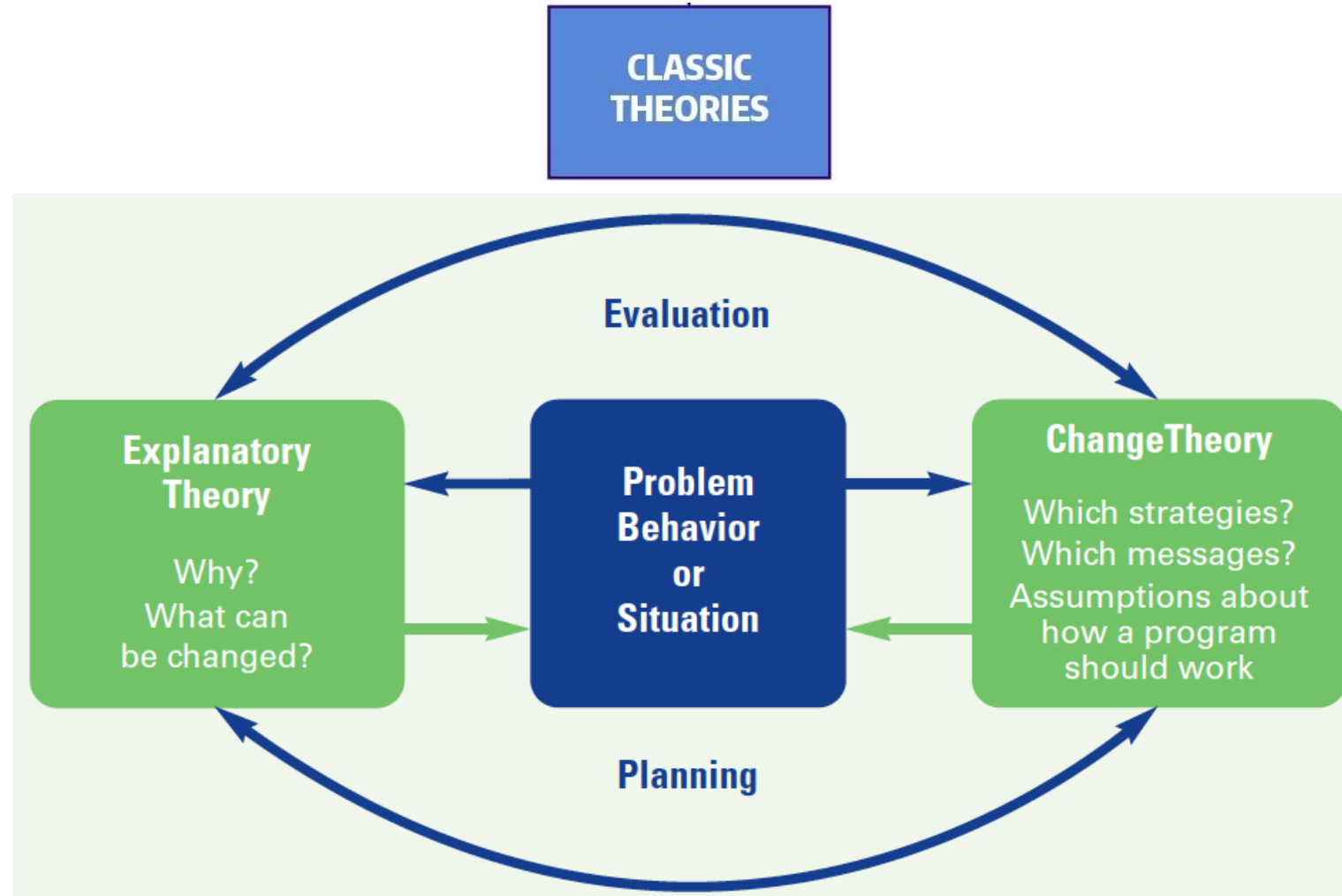
Common Sense	vs.	Theory
Practical		Conceptual
Implicit/Intuition-driven		Explicit/Hypothesis-driven
Inscrutable		Testable
Context-Specific		Generalizable



What is Theory?

- A systematic way to understand events or situations.
- Concepts, definitions, & propositions to explain or predict events or situations by illustrating (and ideally testing) relationships between variables.
- Theories must apply to a broad variety of situations.
- Abstract by nature, not confined to a specific content area.

Two general types of theories



Examples

- Explanatory Theory



Understanding why an employee smokes

e.g., Health Belief Model

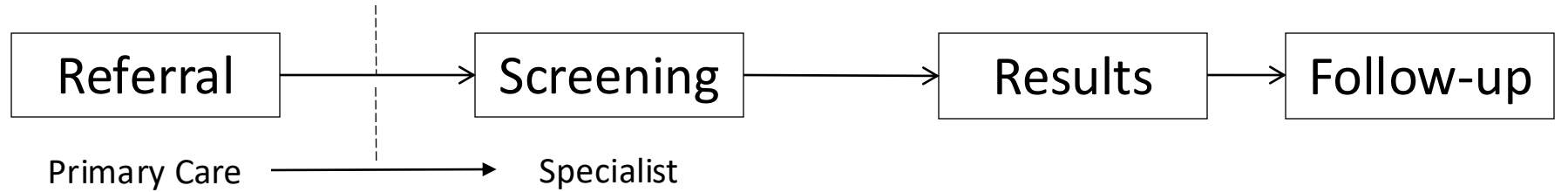
- Change Theory



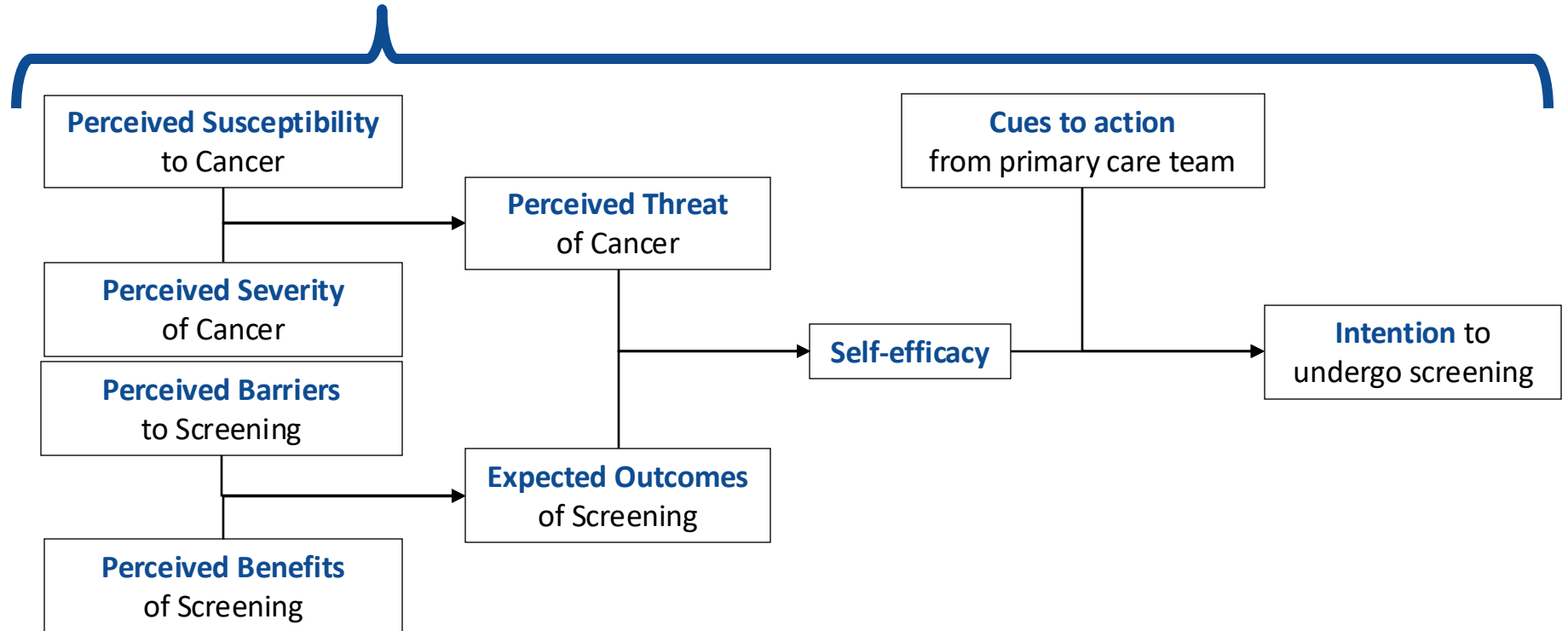
Understanding how to get an employee to quit smoking

e.g., Transtheoretical Model

Health Belief Model, explanatory theory for cancer screening

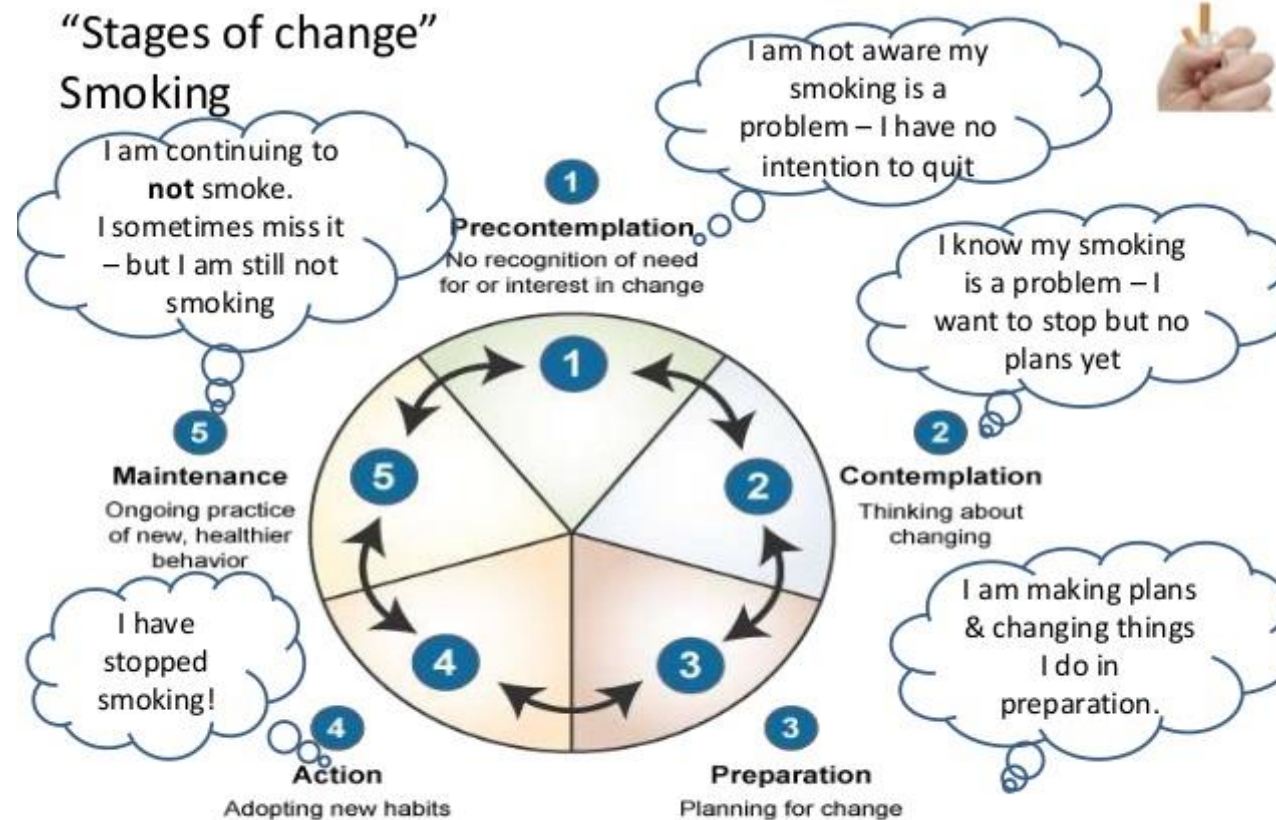


Premise:
Behavior is influenced by expected outcomes.



Stages of Change (Transtheoretical) Model, a theory of change

Premise:
Behavior change is a process, not an event.



@helenbevan

Prochaska, DiClemente & Norcross (1992)

Frameworks



DETERMINANT
FRAMEWORKS

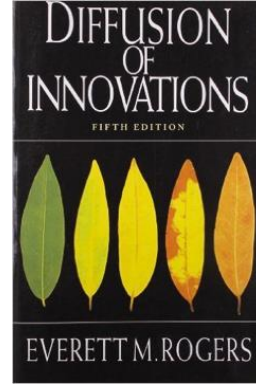
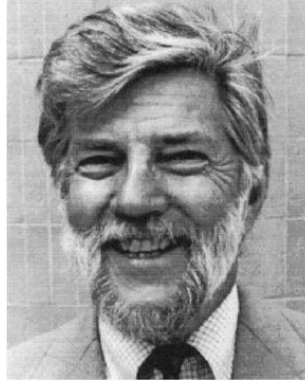
- Understand which *contextual* factors influence implementation & why



EVALUATION
FRAMEWORKS

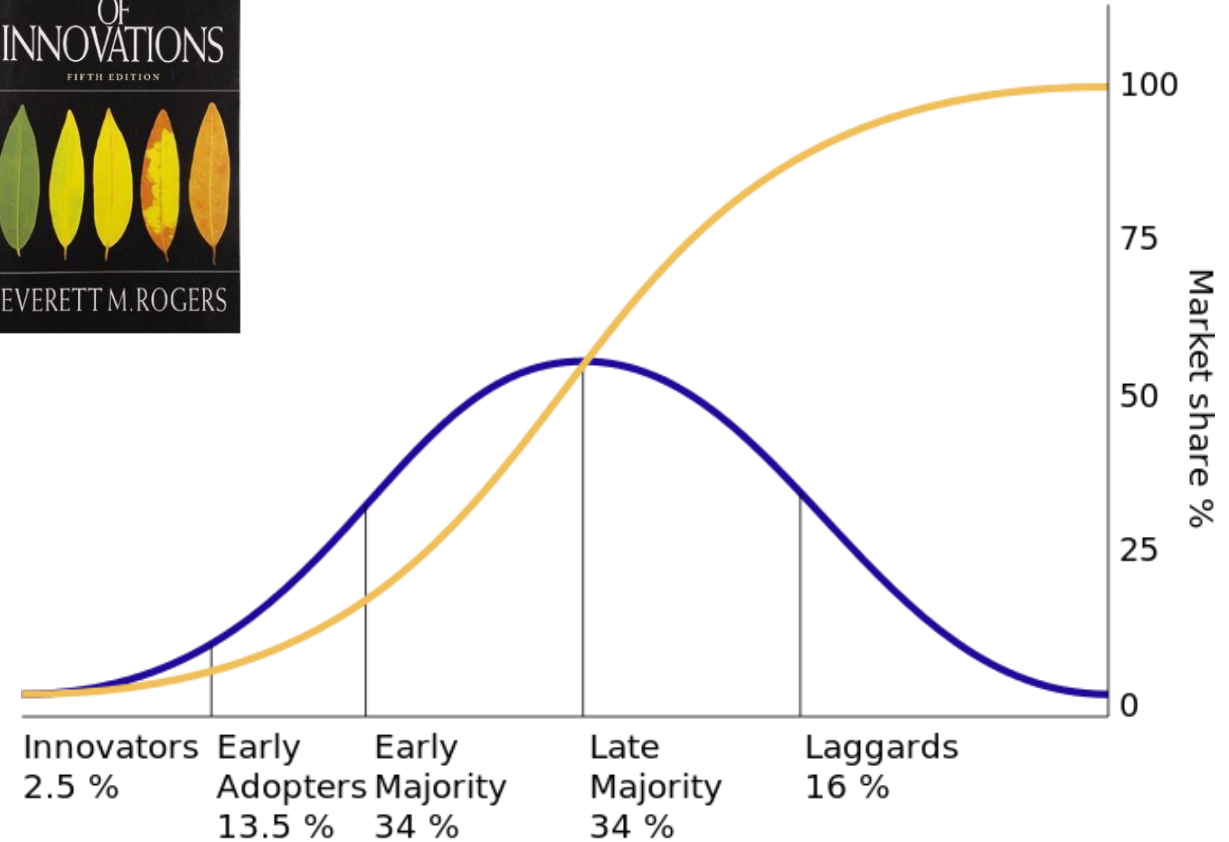
- Understand *fidelity/adaptation* & other implementation measures & how

Implementation Science Frameworks: Origins



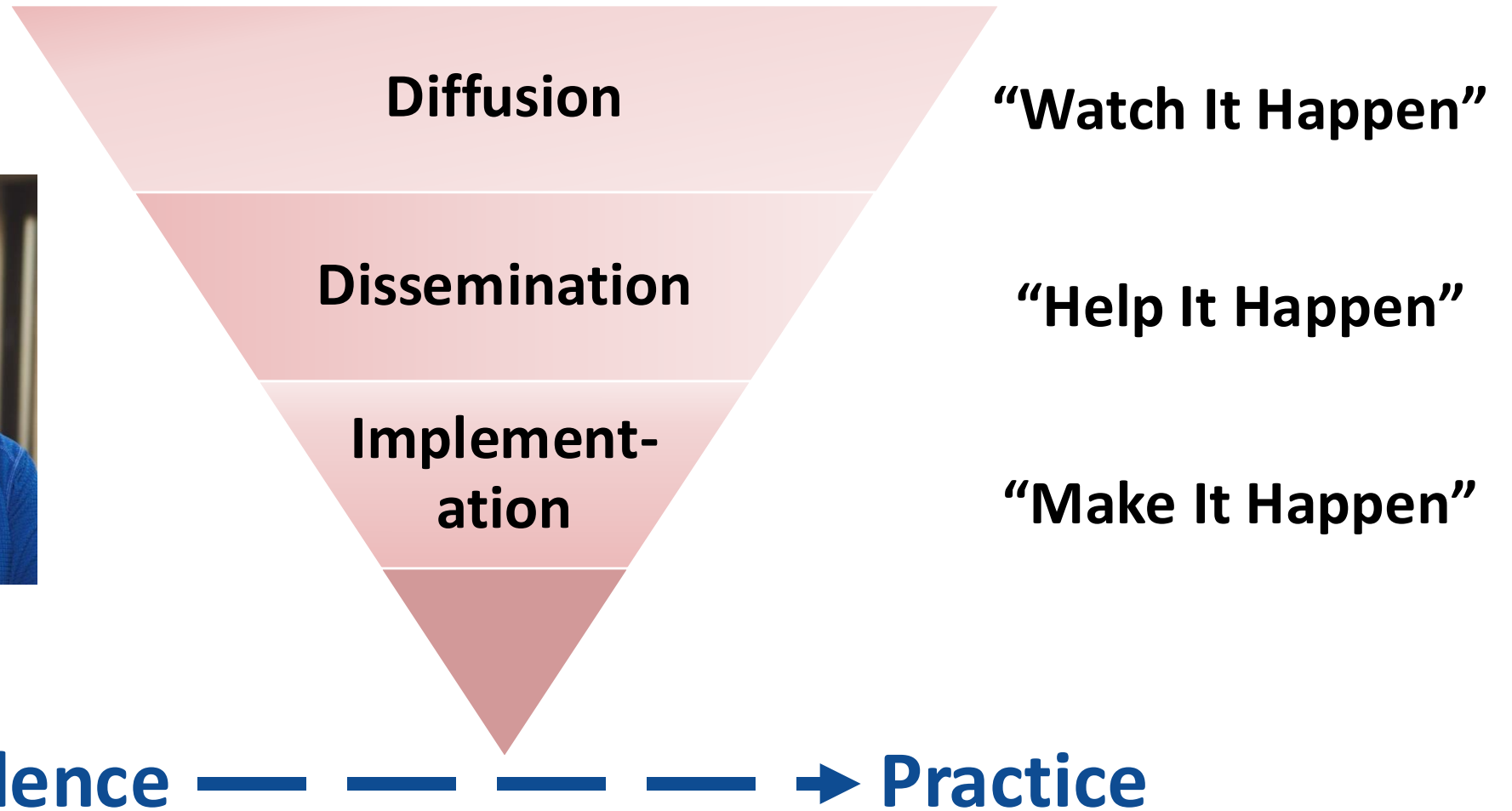
<i>Attribute</i>	<i>Key Question</i>
Relative advantage	Is the innovation better than what it will replace?
Compatibility	Does the innovation fit with the intended audience?
Complexity	Is the innovation easy to use?
Trialability	Can the innovation be tried before making a decision to adopt?
Observability	Are the results of the innovation observable and easily measurable?

Characteristics of innovations



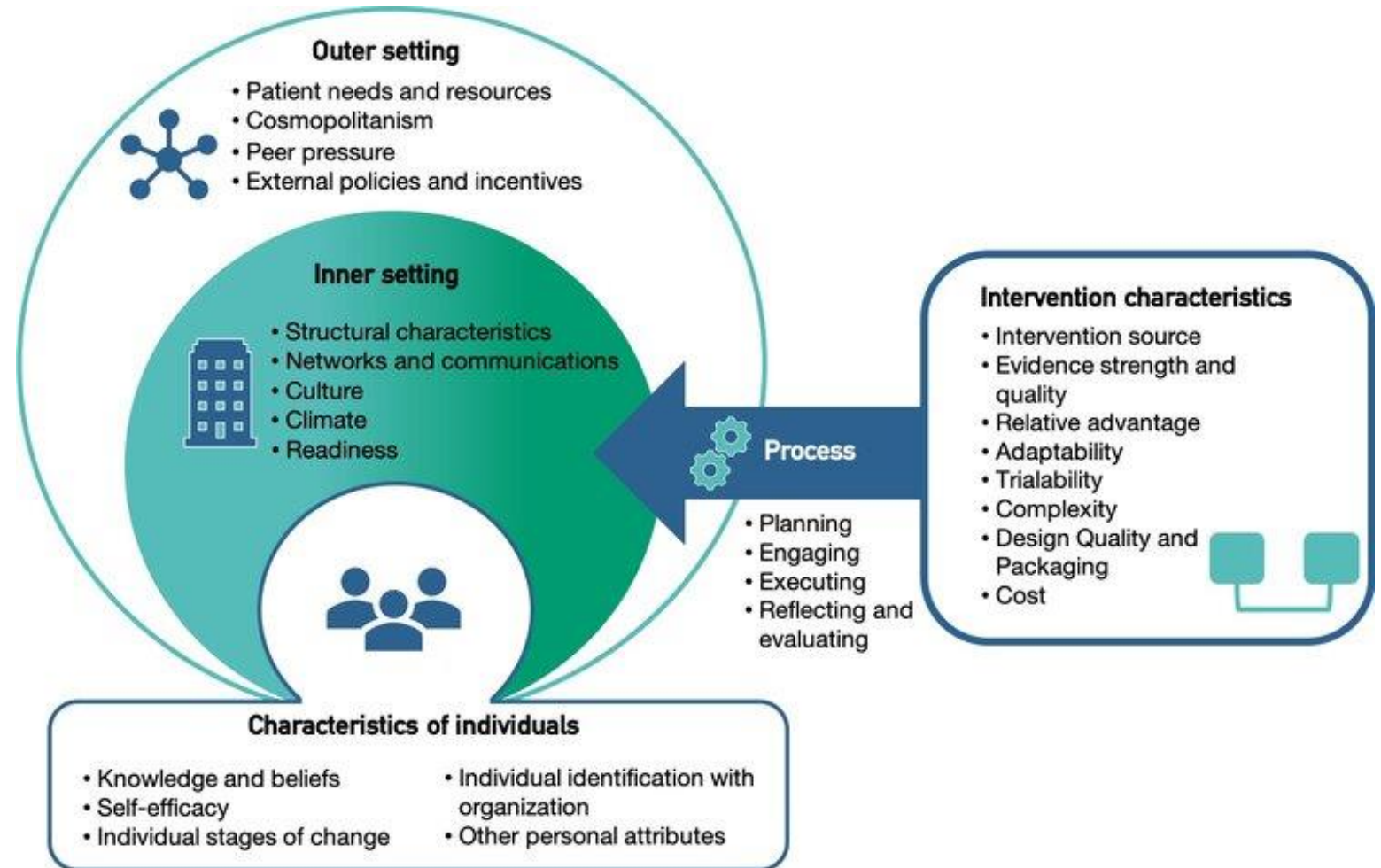
Characteristics of innovators

From Diffusion to Implementation

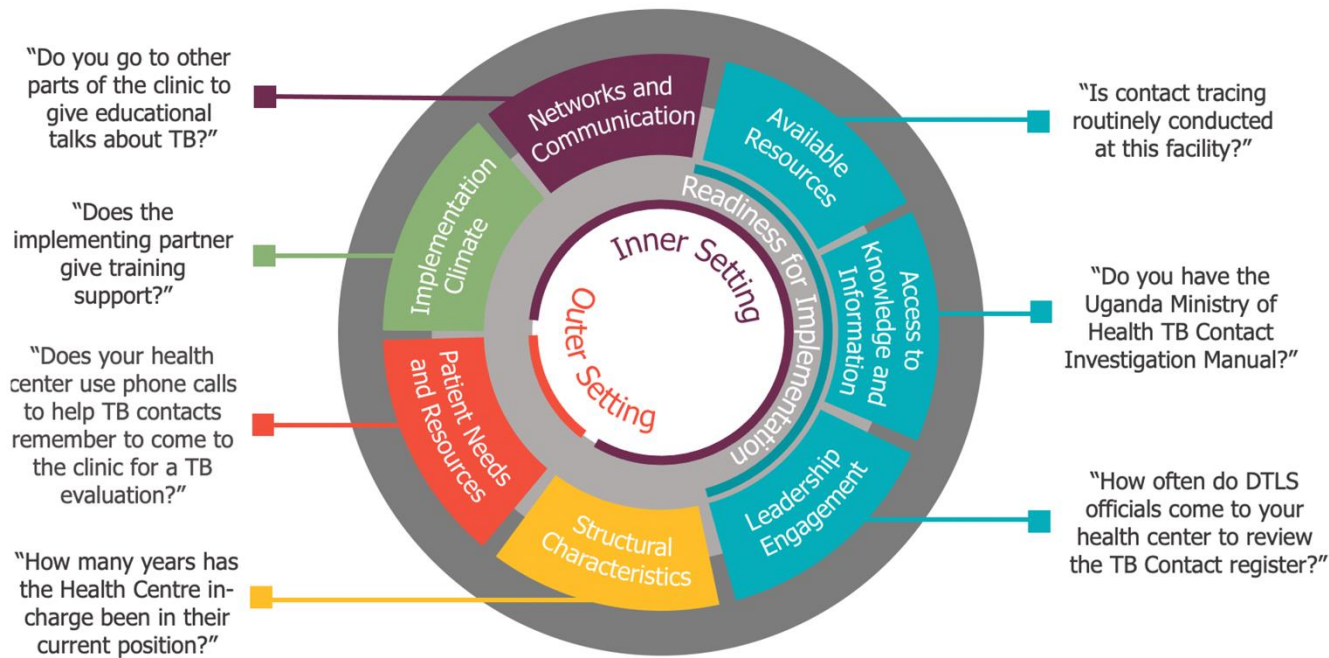


Consolidated Framework for Implementation Research (CFIR)

Premise:
Characteristics of individuals, structures, processes, and interventions influence implementation



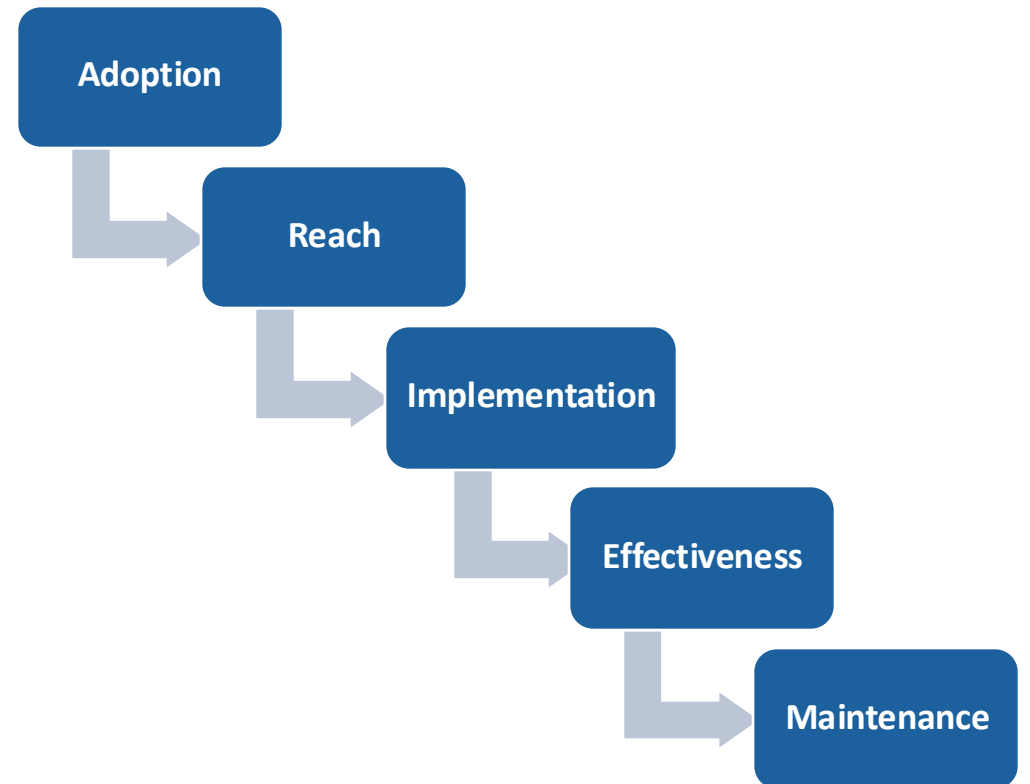
Example: Parallel, convergent mixed-methods study of implementation readiness to deliver TB contact investigation



CFIR Construct	Health Facility Attributes	% (n=28)
Available Resources	Conducting contact tracing outside home	38% (10/26)
	Trained staff on national TB CI guidelines	50% (14/28)
	Regular supervisory visits for contact investigation from District TB Officer	71% (20/28)
Leadership Engagement	On-site access & adherence to guidelines	25% (7/28)
Structural Characteristics	New clinic leadership in past 3 years	46% (13/28)
Patient Needs & Resources	Give education & counseling to TB patients	71% (20/28)
	Same-day TB testing and result allocation	64% (18/28)
	Provide social support for contacts	82% (23/28)
Implementation Climate	Receive training support from implementing partners	96% (27/28)
Networks & Communication	TB educational outreach	100% (28/28)

Evaluation Frameworks

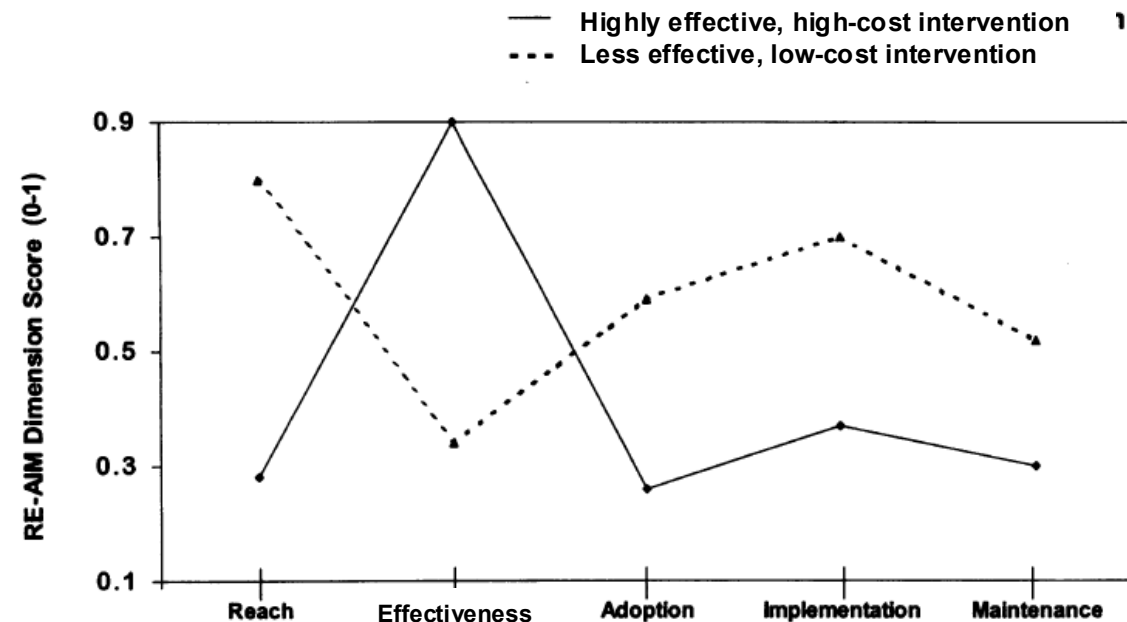
Premise: Implementation measures & process outcomes





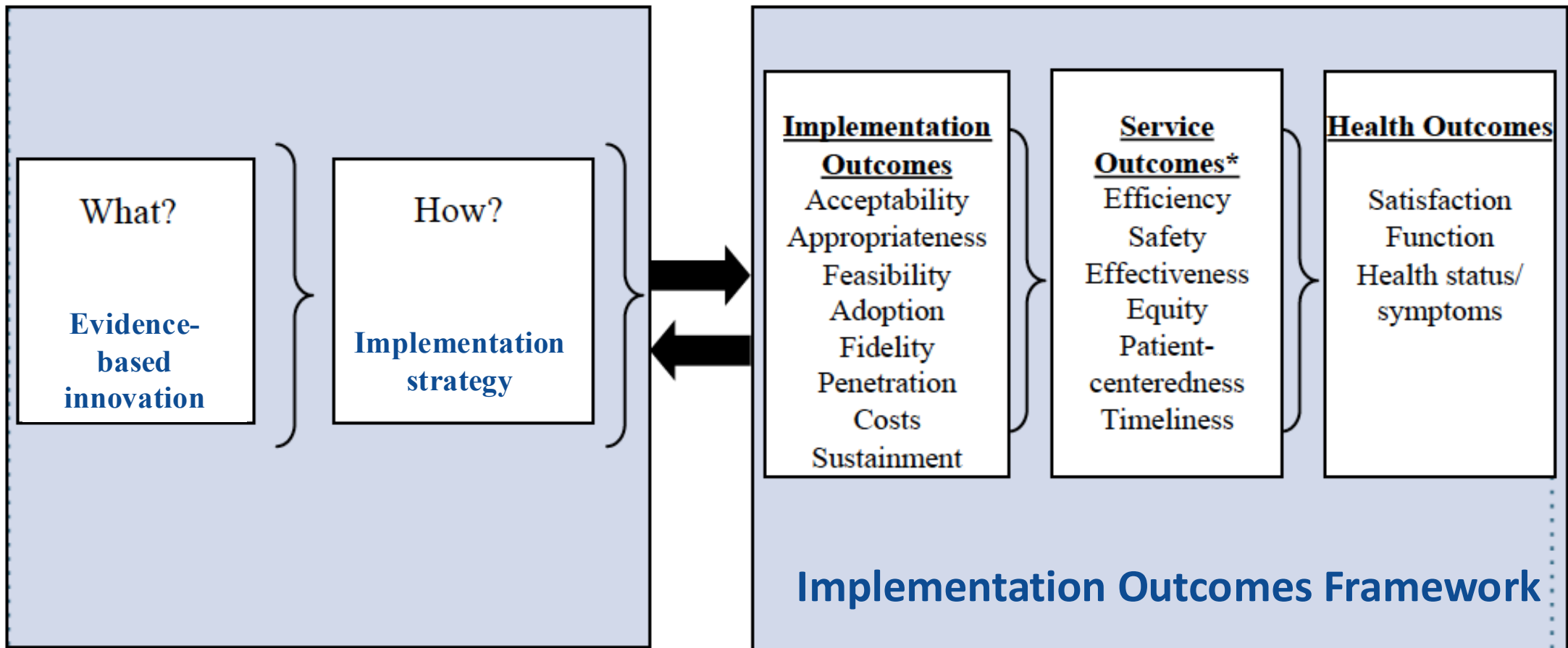
RE-AIM Evaluation Framework: Effectiveness+

Dissemination Step	Concept	% Impacted
50% of clinics use	Adoption	50
50% of clinicians prescribe	Adoption	25
50% of patients accept medication	Reach	12.5
50% follow regimen correctly	Implementation	6.2
50% of those taking correctly benefit	Effectiveness	3.2
50% continue to benefit after 6 mo	Maintenance	1.6



How well was the intervention delivered and for how long?
 Why did implementation succeed or fail?

One final evaluation framework



Models



PROCESS
MODELS

EPIS Framework (a kind of process model)

Premise: Implementation is a process where each stage poses unique questions

Exploration

- **What are the gaps** between current care & best practice?

Preparation

- **Which strategies** might facilitate implementation?

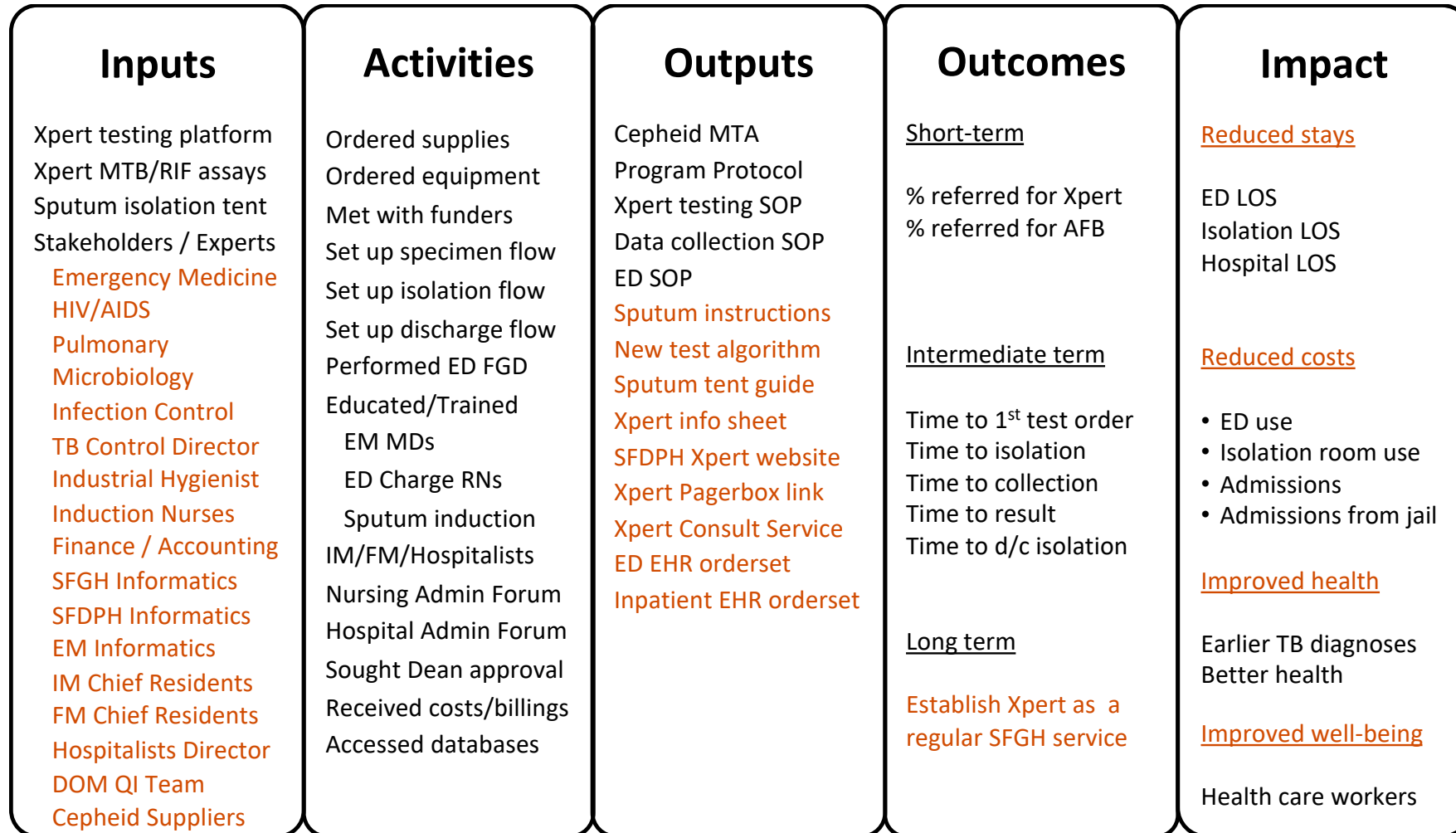
Implementation

- Were the practice & strategies **successful & delivered as intended?**

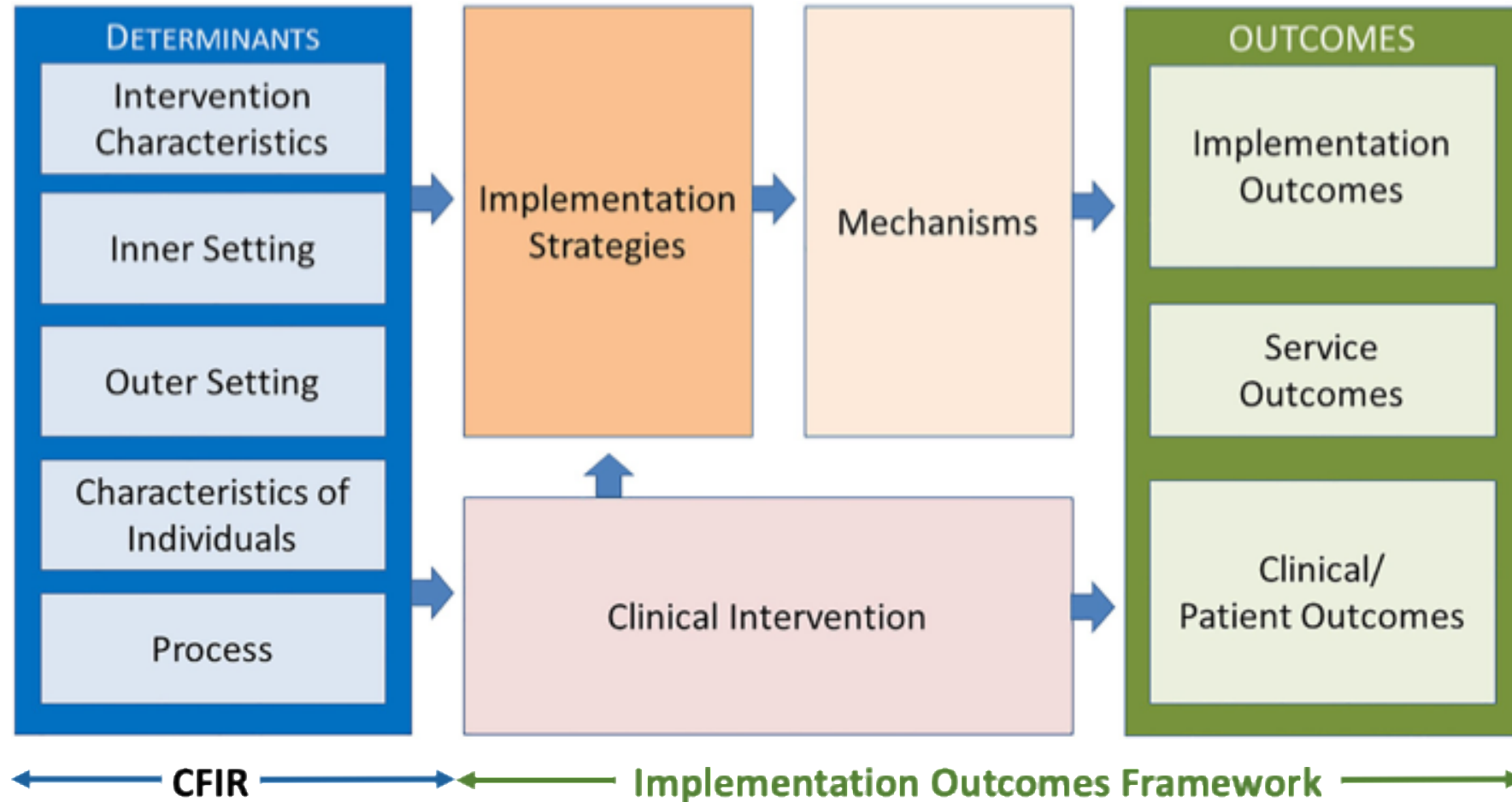
Sustainment

- How can the practices & strategies be **sustained over time?**

A logic model required by a funder



Implementation Research Logic Model





**All models are wrong,
but some are useful.**

GEORGE E. P. BOX



**“Experience without theory is blind, but
theory without experience is mere
intellectual play.”**

-Immanuel Kant

Reflection Questions

1. How do different types of theories, models, and frameworks help put research into practice?
2. Which ones would be most useful for your work?

A roadmap for today's talk

Implementation Science: Revisiting What it is and What it is Not

What are theories, models, and frameworks & why do we need them?

How to choose a theory, model, or framework?

Seminal Systematic Review of TMF in IS

Bridging Research and Practice Models for Dissemination and Implementation Research

Rachel G. Tabak, PhD, Elaine C. Khoong, BS, David A. Chambers, DPhil,
Ross C. Brownson, PhD

61 TMF identified focused on multi-level IS

Categorized according to

1. Construct flexibility
2. Dissemination vs Implementation focus
3. Level of social-ecological model

Multiple TMFs at all levels

Needs

1. Standardized terminology
2. Comparative measures
3. Info about how to select among them

How to choose?

Birken *et al.* *Implementation Science* (2017) 12:124
DOI 10.1186/s13012-017-0656-y

Implementation Science

SHORT REPORT

Open Access



Criteria for selecting implementation science theories and frameworks: results from an international survey

Sarah A. Birken^{1*}, Byron J. Powell¹, Christopher M. Shea¹, Emily R. Haines^{1,2}, M. Alexis Kirk^{1,2}, Jennifer Leeman³, Catherine Rohweder⁴, Laura Damschroder⁵ and Justin Presseau^{6,7,8}

- Choice of models is often haphazard and driven by convenience
- Have a reason why your choice is appropriate for the problem
- Choose an approach that is familiar to you and your audience

Theory Comparison and Selection Tool (T-CaST)

Birken *et al. Implementation Science* (2018) 13:143
<https://doi.org/10.1186/s13012-018-0836-4>


Implementation Science

RESEARCH

Open Access



T-CaST: an implementation theory comparison and selection tool

Sarah A. Birken^{1*} , Catherine L. Rohweder², Byron J. Powell¹, Christopher M. Shea¹, Jennifer Scott³, Jennifer Leeman⁴, Mary E. Grewe³, M. Alexis Kirk^{1,5}, Laura Damschroder⁶, William A. Aldridge II⁷, Emily R. Haines^{1,5}, Sharon Straus⁸ and Justin Presseau^{9,10,11}

The T-CasT Tool

1. Score each as 0, 1, or 2

0 = Poor fit

1 = Moderate fit

2 = Good fit

2. Sum scores for each TMF

Average across team members

3. Select highest scoring

Use sub-scores to justify



T-CasT Worksheet

Usability

- TMF includes relevant constructs (e.g., self-efficacy; climate)
- Key stakeholders (e.g., researchers; clinicians; funders) are able to understand, apply, and operationalize TMF.
- TMF has a clear and useful figure depicting included constructs and relationships among them.
- TMF provides a step-by-step approach for applying it.
- TMF provides methods for promoting implementation in practice.
- TMF provides an explanation of how included constructs influence implementation and/or each other.

Testability

- TMF proposes testable hypotheses.
- TMF includes meaningful, face-valid explanations of proposed relationships.
- TMF contributes to an evidence base and/or TMF development because it has been used in empirical studies.

Applicability

- TMF focuses on a relevant implementation outcome (e.g., fidelity; acceptability).
- A particular method (e.g., interviews; surveys; focus groups; chart review) can be used with TMF.
- TMF addresses a relevant analytic level (e.g., individual; organizational; community).
- TMF has been used in a relevant population (e.g., children; adults with serious mental illness) and/or conditions (e.g., attention deficit hyperactivity disorder; cancer).
- TMF is generalizable to other disciplines (e.g., education; health services; social work), settings (e.g., schools; hospitals; community-based organizations), and/or populations (e.g., children; adults with serious mental illness).

Acceptability

- TMF is familiar to key stakeholders (e.g., researchers; scholars; clinicians; funders).
- TMF comes from a particular discipline (e.g., education; health services; social work).

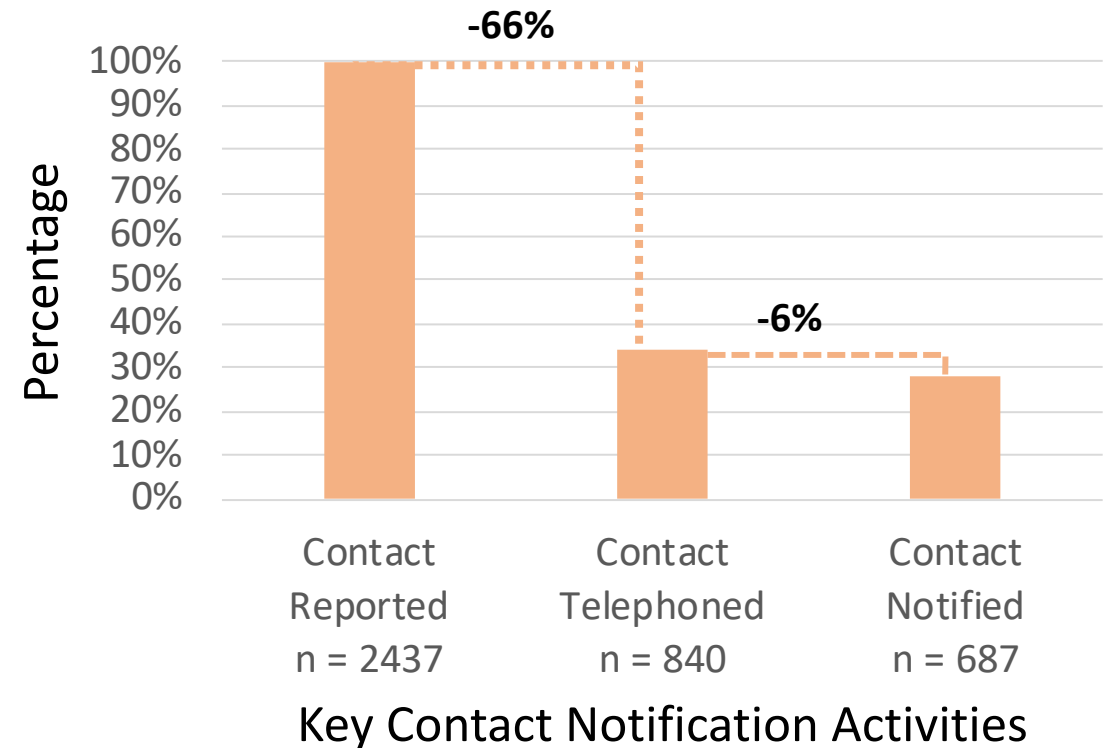
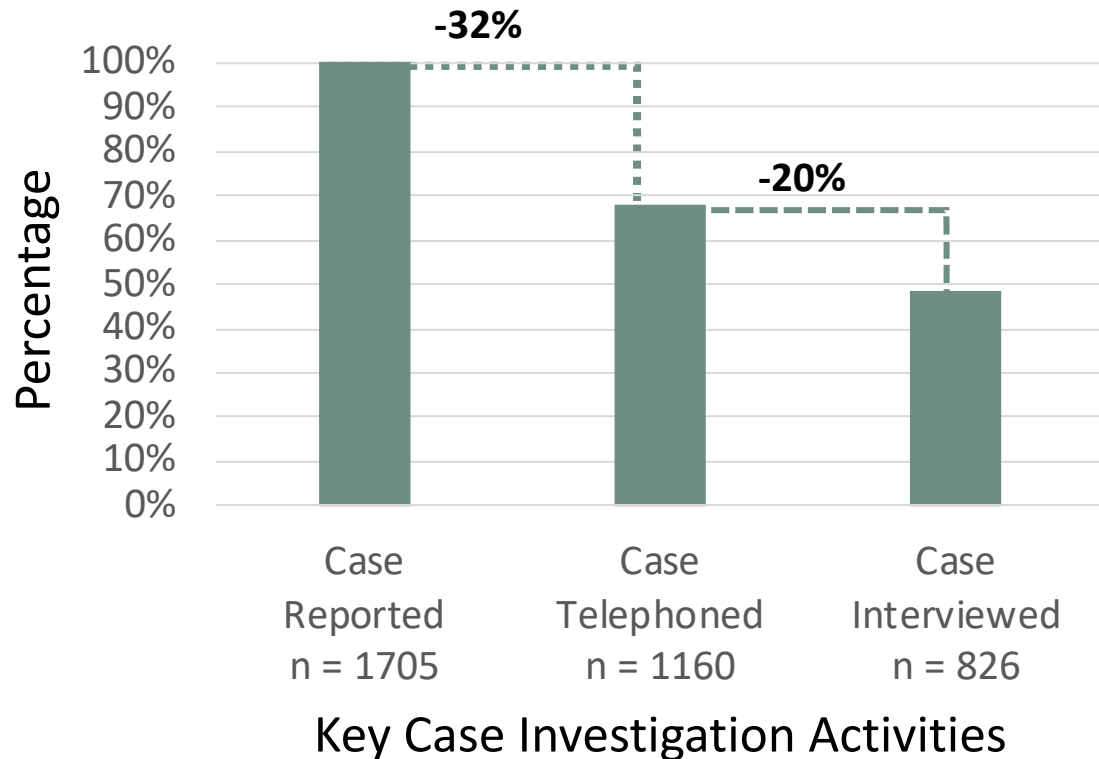


Lessons Learned From COVID-19 Contact Tracing During a Public Health Emergency: A Prospective Implementation Study

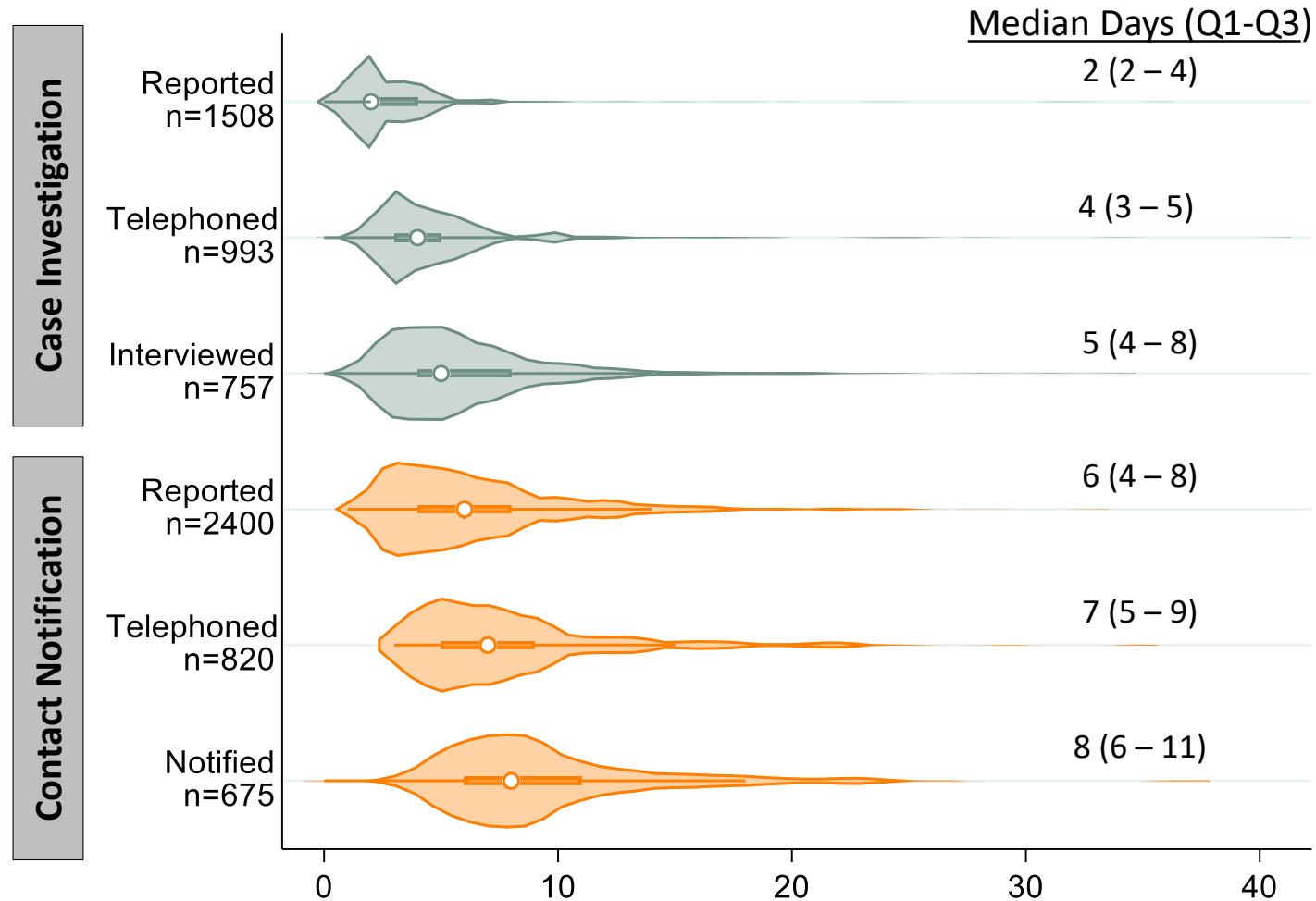
Tyler Shelby^{1,2†}, Christopher Schenck^{2†}, Brian Weeks^{3†}, Justin Goodwin^{1,2}, Rachel Hennein^{1,2}, Xin Zhou^{4,5}, Donna Spiegelman^{4,5}, Laretta E. Grau¹, Linda Niccolai¹, Maritza Bond^{3†} and J. Lucian Davis^{1,5,6†}*



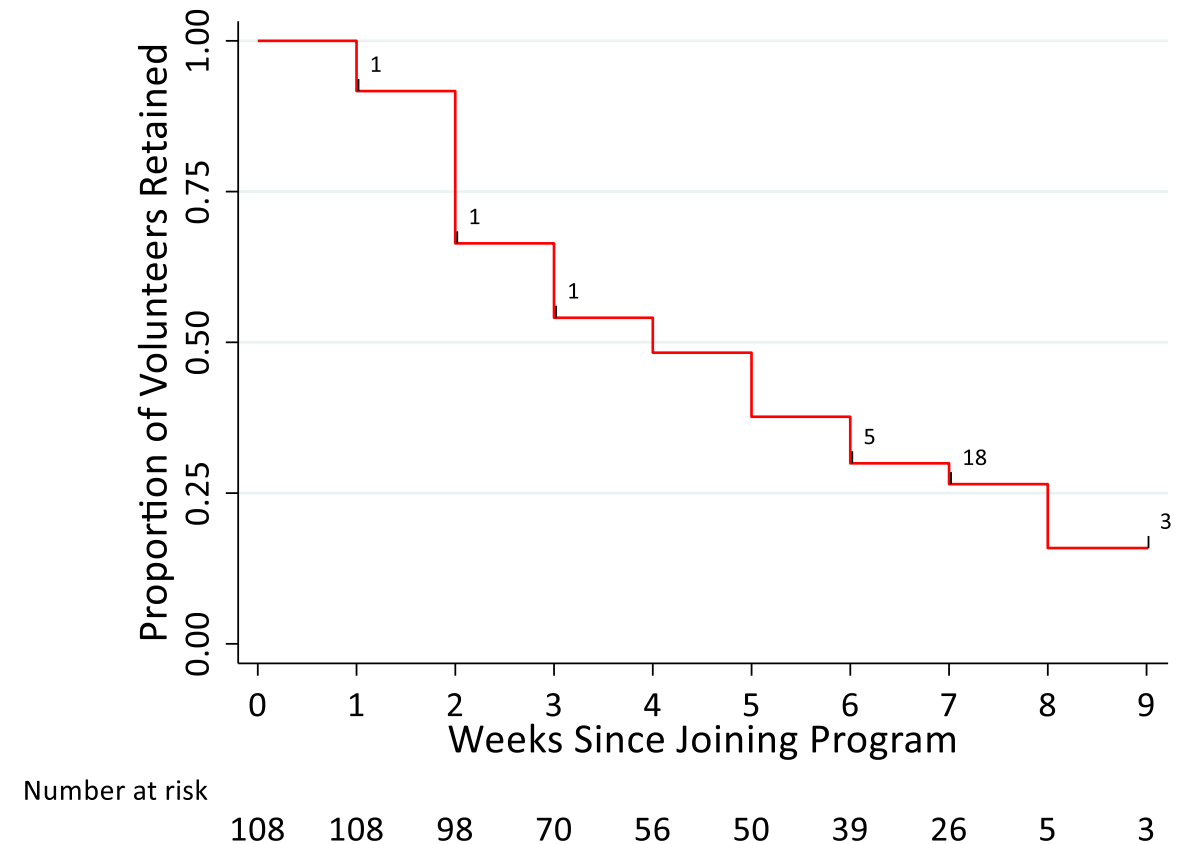
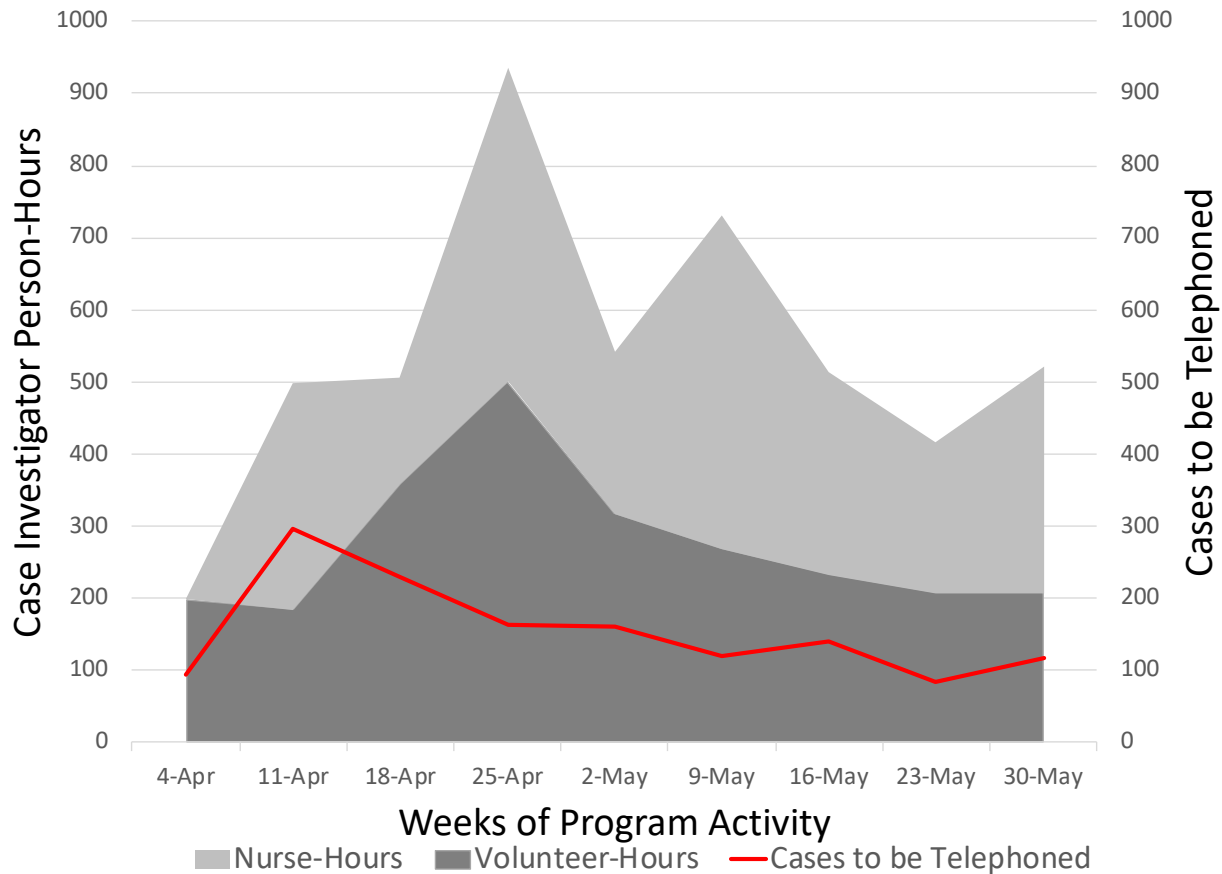
Reach: Large proportions of cases & contacts could not be reached



Implementation: Delayed reach to contacts reduced prevention of transmission



Adoption & Maintenance: Volunteers mostly met case demand, but retention was low





Synthesizing qualitative themes using RE-AIM



Reach

Offer 2-way SMS



Implementation

Personalize script



Effectiveness

Offer food, housing, income



Adoption

Continuing education



Maintenance

Academic credit for volunteers

Add privacy script

Standardize data collection

Automate data transfers

Offer peer support

↑ Awareness campaigns

Coordinate with other contact tracing initiatives

Verify preferred language

Make volunteer scheduling flexible

Combine case-contact outreach

Questions?

