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About the Tool

This document was designed to aid in the administration, use, and interpretation of the IFASIS (Inventory of Factors Affecting Successful Implementation and Sustainment). It standardizes IFASIS administration procedures with the intent to enhance the reliability and validity of the data collected and to ensure accurate assessment outcomes.

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1. What Is the IFASIS?

The IFASIS is a 27-item instrument that gathers information about factors within an organization or team that could influence efforts to implement a new intervention, program, or service. It can be used to inform, evaluate, improve programs, and benchmark progress over time. The IFASIS provides data-driven insights to support strategic planning and operational enhancements.

2. Key Definitions

Term	Definition	
Intervention	A structured program or action designed to bring about measurable change within a population, organization, or system.	
Implementation	The activities and processes required to deliver or sustain an intervention in everyday practice.	
Barriers	Factors that hinder or obstruct successful implementation, such as limited resources, resistance to change, or insufficient training.	
Advantages	Factors that support and enhance implementation efforts, including leadership, resources, and stakeholder engagement.	
Opportunities	Elements that can be leveraged to strengthen or accelerate implementation — representing areas of potential growth, innovation, or collaboration.	

3. Overview



Team Size: The inventory is best completed as a team of three to five individuals from an organization. Larger teams or individual ratings are acceptable if necessary. Team-based completion fosters discussion of each item, and consensus is needed for scoring.



Scoring: Each item is scored in two ways: 1) to reflect the item's status within an organization (rating), and 2) to indicate the item's importance to implementation efforts. If the best answer falls between two ratings, select the lower rating.



Time Required: Approximately 30 to 45 minutes to complete. A report will be generated upon completion.



4. Administration

The IFASIS can be administered in two ways:

- Self-administration by a team or organization.
- · Facilitation by a third party such as a research staff member or implementation coach.

Team or Organization Self-Administration

Use this option when your organization is familiar with the IFASIS and wants to identify areas for improvement or track progress internally.

A small group of three to five members should meet to complete the tool together. One person should serve as the session lead, guiding the discussion and recording responses.

Tips for success:

- Choose a mix of staff who know the intervention and its context.
- Review and rate items individually before meeting to discuss them as a group.
- Meet in a quiet, comfortable setting to allow open conversation.
- Keep the discussion neutral and encourage participation from everyone.
- Remind participants there are no right or wrong answers—honesty leads to more useful results.

Third-Party Facilitation

In research or coaching settings, a facilitator can support the process by observing, clarifying, and taking notes. The facilitator should not lead or influence responses.

igstar Tips for facilitators:

- Provide a quiet, private space where participants can speak freely.
- Maintain neutrality and avoid steering the discussion.
- Rephrase questions or provide examples when needed.
- Thank participants for their time and insight.
- Encourage examples from real experience, and reassure participants that all perspectives are valuable.

For participants not directly involved in implementation:

Reword questions to match their role. For example:

"What challenges have you encountered when engaging with [intervention]?"





If applicable, provide a statement on how confidentiality will be maintained and how information collected will be used.

Example: Please know that your privacy and any identifying information will be protected throughout this process. All notes taken during the interview will be stored safely, and input from today's discussion will be deidentified such that your name and any identifying information are not connected to the feedback.

6. Recording

If the session is recorded, specify how the recording will be stored, who will have access, and when/how it will be deleted.

Example: I want to remind you that our session will be audio-recorded for accuracy. You may ask to end the recording at any time. Only the research team will have access to the recordings, which will be destroyed once transcribed.

If participants prefer not to be recorded, take detailed notes instead and ensure they feel comfortable with the process.

7. Scoring

The IFASIS uses a dual-scoring approach: Each item receives a rating (status) and an importance score. This combination helps organizations prioritize actions.

Low rating + high importance = critical barrier.

High rating + low importance = stable advantage.

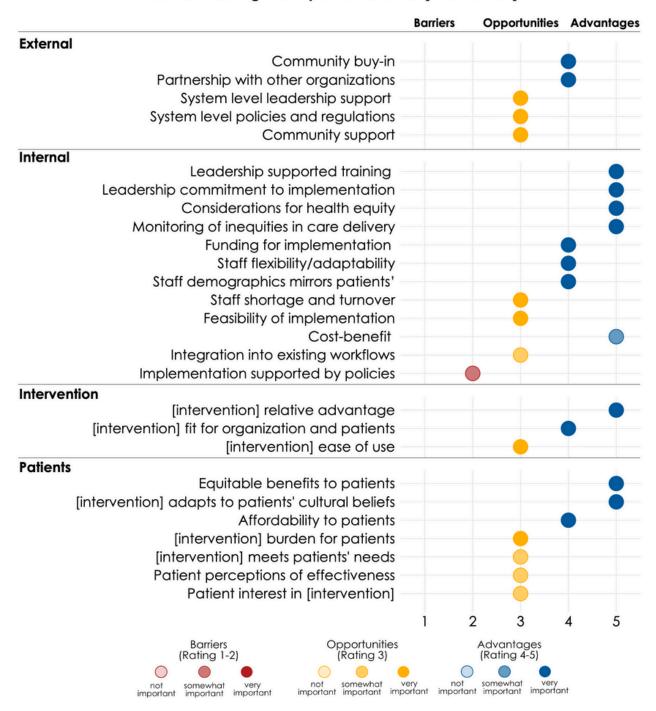
Each item is color-coded based on rating and importance: **barriers (red), opportunities (yellow)**, and **advantages (blue)**. The shading intensity corresponds to importance.

	Importance (1-3)		
Rating (1-5)	1	2	3
1-2	Barrier, low importance	Barrier, mid-importance	Barrier, high importance
3	Opportunity, low importance	Opportunity, mid-importance	Opportunity, high importance
4-5	Advantage, low importance	Advantage, mid-importance	Advantage, high importance



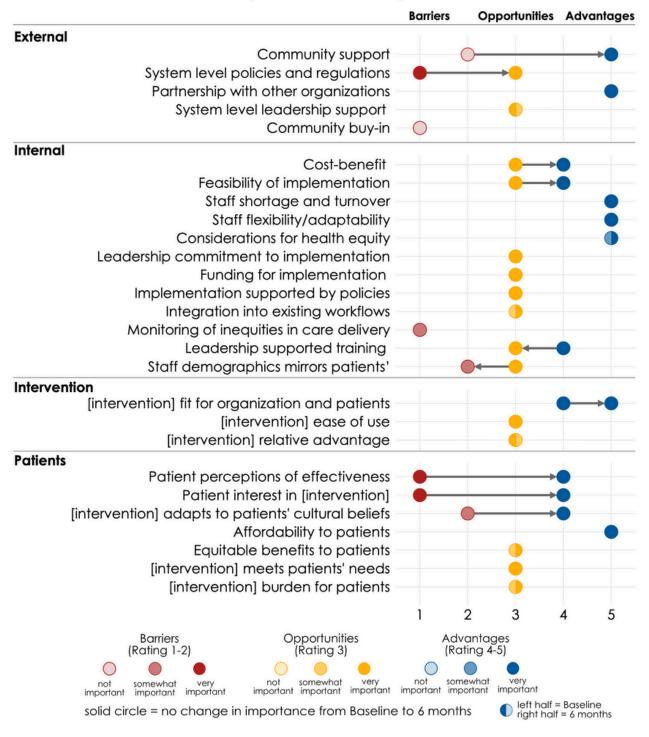
Visualizations such as charts can display changes in IFASIS ratings over time.

Factors Affecting the Implementation of [intervention]





Factors Affecting the Implementation of [intervention] (Baseline vs 6 Months)





8. At-A-Glance Domains, Subscales, and Items of IFASIS

Domains	Subscales	Items	
	External Policies	Support from system-level leadership System-level policies and regulations	
Factors Outside Your Organization	Community Support	Support from community organizations Consultations with community organizations about fit and acceptability Partnerships with health and social organizations	
Leadership		Support from internal leadership for training Commitment from leadership to implement the intervention	
Factors Within Your Organization	Resources	Staff shortages and turnover Financial capacity to implement Cost–benefit of intervention	
	Organizational Readiness	Policies to implement intervention Integration into workflow Staff flexibility and adaptability	
	Do-ability	Feasibility of implementing or expanding the intervention	
	Person-Focused Care	Leadership and staff demographics reflect the community served Program prioritizes health equity Program examines patient demographics for inequities	
	Fit	Intervention fits within the organization	
Factors About the Intervention	Usability / Complexity	Intervention is worthwhile and easy to use	
	Relative Advantage	Advantages to implementing intervention	
	Benefit to Recipient	Intervention is equitably beneficial to patients	
Factors About the Person Receiving the Intervention	Recipient Needs and Values	 Adaptable to cultural beliefs Meets patients' needs Considered effective Viewed as a burden Patients request the intervention Financial cost to patients 	