

How Can We Accelerate the Real-World Impact of Health Care Interventions?

The Challenge

Implementation science improves the translation of interventions, programs, or services into real-world clinical settings. Many instruments, scales, and tools have been developed to measure specific implementation-related constructs such as barriers and facilitators to adoption. However, very few assess the extent to which critical and rigorous implementation research methods are used throughout the intervention development or evaluation process.

There is a need for an off-the-shelf tool that is practical for non-implementation research experts to determine the potential “implementability” of their intervention, program, or service.

The Five Dimensions



Evidentiary Support:

Determines the existing evidence supporting the effectiveness of the intervention, program, or service.



Partner Engagement:

Planning and co-designing with community and health care partners who will eventually implement the intervention for relevance, utility, and long-term sustainment.



Contextual Determinants:

Identifying barriers and facilitators to routine adoption of the intervention.



Implementation Strategies:

Tracking the specific steps and rationale used to install, support, adapt, or sustain the intervention by those who will eventually deliver it.



Implementation Outcomes:

Systematic and objective measures of how much and how well the intervention was implemented or sustained.

How the DIRC-SS Is Scored

The Dissemination & Implementation Research Capability Self Survey (DIRC-SS) consists of 15 items addressing the five dimensions of implementability. On a five-point scale, ratings help identify an intervention’s strengths and opportunities to improve potential translation.

Each item is rated on a five-point scale:

- 1** = None
- 2** = Minimal
- 3** = Moderate
- 4** = Strong
- 5** = Full/Comprehensive

How It Works

The DIRC-SS can be used as a team-based assessment by either the intervention developer or evaluator research team, or by an implementation expert during a consultation, or both. The DIRC-SS takes about one hour to complete.



Complete the Team-Based Survey: Research teams and implementation research experts can rate the same project independently on five key implementation dimensions.



Score Across the Five Dimensions: The dimension score is calculated by averaging the three items in each dimension. The total score is calculated by averaging all 15 items.



Compare and Discuss: Differences in ratings among the research team members can identify potential areas for integration of more rigorous implementation research methods. This can occur with or without consultation.



Target Improvements: Lower scores guide practical, project-specific areas for improvement.



Reassess Over Time: Repeating the DIRC-SS can track growth in implementation capability over time and validate the impact of protocol changes, training, consultation, and support.

The DIRC-SS can be used by research teams, implementation science experts, Clinical Translational Science Award (CTSA) hubs, funders, and program officers.

Why It Matters

Embedding high-quality implementation science methods early boosts translation and downstream public health impact by ensuring that health interventions are designed for real-world use early and throughout the research process.

The DIRC-SS offers a clear, accessible benchmark for the potential implementability of an intervention, program, or service.

Access & Next Steps

- The DIRC-SS is free to use and available online at c-dias.org.
- A user guide with definitions, examples, and key considerations for each item is in development to support standardized application across research teams and CTSA hubs.