CFIR Index
The Consolidated Framework for Implementation Research (CFIR) Index Manual
For Administration and Scoring
2018 Stanford University School of Medicine
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The Consolidated Framework for Implementation Research (CFIR) Index Manual
INTRODUCTION

Introduction to Implementation Science

Research suggests it can take an average of 17 years to translate just 14% of research to direct patient care benefit [1, 2]. A more recent review finds variation in the number of years [3]; however, there is general consensus that improvements need to be made for effective dissemination and implementation of evidence-based practices (EBPs) into routine settings. The goal of implementation science is to bridge the gap between EBP and its widespread use so that effective services are brought to those who need it, thereby improving health services and public health.

As an emerging science, implementation research is guided by theories, models, and frameworks that can be used to understand and explain its processes and findings. Nilsen’s taxonomy of frameworks outlines the different types of theories, models, and frameworks, as well as the overarching aims of their use in implementation science [4]. In this manual, the focus is on one type of framework, the determinant framework. The determinant framework is defined as identifying dimensions and types of barriers and facilitators that influence the implementation process, with the goal of understanding or explaining the influences on implementation outcomes. There are many examples of determinant frameworks. The Consolidated Framework for Implementation Research (CFIR) is one such example.

Why Operationalize the Consolidated Framework for Implementation Research (CFIR)?

The Consolidated Framework for Implementation Research (CFIR) was first developed by Damshroder and colleagues [5]. A systematic review by Kirk et al has reported its widespread use since its development in 2009 [6]. Tabak et al conducted a comprehensive review of models and frameworks and identified the CFIR as a promising model for quantitative measure development [7].

The CFIR organizes contextual barriers and facilitators to implementation and consists of five dimensions and 39 items. The five dimensions are: 1) Characteristics of the intervention (i.e., the evidence-based practice, guideline or FDA-approved medication to be implemented); 2) Outer setting (i.e., systems, community, and economic aspects to the implementation of the intervention); 3) Inner setting (i.e., organizational aspects such as leadership, climate, and readiness); 4) Characteristics of the providers (i.e., workforce, workflow, and self-efficacy); and 5)
Process (i.e., aspects to the planning and procedures to the implementation process itself). More information about the CFIR can be found at www.cfirguide.org [8].

Thus far, the CFIR has primarily been used as a qualitative or formative method to understand contextual barriers and facilitators. Typically, the CFIR method is used by intervention developers or those involved in dissemination work as an initial aim to understand aspects that could undermine the study. However, the CFIR can be adapted for use as a quantitative measure. In fact, Kirk et al describe three studies in which the CFIR was operationalized [6]. The scientific benefits of a quantitative measure include transparency, rigor and reproducibility—all are critical for the science of implementation to advance.

The Consolidated Framework for Implementation Research (CFIR) Index

The CFIR Index was initially developed by McGovern and colleagues in 2014 via an iterative process of successive drafts and refinement of item definitions based on field data and analysis of data obtained. The CFIR Index is a quantitative measure that uses a mixed-methods approach to examine contextual barriers and facilitators to the implementation process. The measure consists of 29 items over four dimensions. The four dimensions are: 1) Perceptions of the intervention; 2) Perceptions of the system and community; 3) Perceptions of the program; and 4) Perceptions of the clinicians who will use the intervention. The fifth dimension, Process, was dropped as it focuses on the planning and process of the implementation strategy, whereas the other four dimensions are more clearly associated with barriers and facilitators to the implementation process. The “Design Quality and Packaging” item from the Perceptions of the intervention dimension was also dropped.

Information gathered by independent and trained raters during a half-day site visit to an organization is used to complete the CFIR Index. Information is obtained via key informant interviews (e.g., staff members and patients), document review, and ethnographic observation. Data from all sources are then synthesized and summarized to make ratings on a 5-point Likert-type scale with specific anchors, which ranges from: -2 (Barrier) to 0 (Neutral) to +2 (Facilitator).

CFIR Index Psychometrics

The development and psychometric study of the CFIR Index is reported in Assefa and McGovern (2018). It should be noted that the number of CFIR Index items, the names and definitions of CFIR Index dimensions and items, and the scoring anchors were all revised in 2017.
The CFIR Index was initially used in two different National Institute on Drug Abuse (NIDA) clinical trials. The NIDA studies were conducted in Vermont and New Hampshire from 2014–2016. In the first clinical trial (McGovern, PI), CFIR Index ratings were obtained from seven community addiction treatment programs at the sustainment phase. In the second clinical trial (Budney, PI), CFIR Index ratings were obtained from one community treatment program at the pre-implementation phase.

RELIABILITY

Inter-Rater Reliability
Assefa and McGovern found an intra-class correlation (ICC) of .86 (p<0.001) across all CFIR Index items at two sites and two raters. ICCs by CFIR dimensions were also calculated: 1) *Perceptions of the intervention* = .73 (p<0.001); 2) *Perceptions of the system and community* = .91 (p<0.001); 3) *Perceptions of the program* = .90 (p<0.001); and 4) *Perceptions of the clinicians who will use the intervention* = .68 (p=0.002)

Internal Consistency
The Cronbach’s alpha coefficients varied across the four dimensions. Assefa and McGovern found two dimensions had acceptable alphas: *Perceptions of the clinicians who will use the intervention* (.81); and *Perceptions of the program* (.93). The other two alphas were marginally acceptable at .67 for the *Perceptions of the system and community* dimension and .60 for the *Perceptions of the intervention dimension* (only after the “relative advantage” item was removed).

VALIDITY

Predictive Validity
The first clinical trial with seven treatment programs involved two behavioral therapies for co-occurring PTSD and substance use disorder: Integrated Cognitive Behavioral Therapy (ICBT) and Individual Addiction Counseling (IAC). Sites were categorized into low (n=3) and high (n=4) implementation sites. The low implementation sites enrolled significantly fewer cases (ICBT: m=5.5, sd=1.92; IAC: m=5.25, sd=1.50) than high implementation sites (ICBT: m=19.25, sd=2.99; IAC: m=19.25, sd=4.27) and delivered significantly less ICBT and IAC (ICBT: m=4.00, sd=2.00; IAC: m=3.50, sd=1.00) than high implementation sites (ICBT: m=13.75, sd=3.30; IAC: m=13.25, sd=2.22).

Two CFIR Index dimensions had statistically significant differences between the high and low implementation sites (*Perceptions of the intervention* and *Perceptions of the program*).
Discriminant Validity

Discriminant validity was examined by t-tests of both the dimension and item means, in addition to the standard deviations. In the ICBT and IAC clinical trial, comparisons of all seven programs were assessed. Because IAC was a manualized version of a longstanding clinical practice already in place, we hypothesized it would have higher facilitator than barrier scores relative to ICBT. ICBT was a new manual approach that was not integrated into routine practice. Items in the Perceptions of the intervention and Perceptions of the system and community dimensions were found to be statistically significant. For the Perceptions of the intervention dimension, the following items distinguished likely IAC versus ICBT sustainment within agencies: “relative advantage” (t= 4.04; p< 0.01); “adaptability” (t= -3.62; p< 0.01); and “testability” (t= -5.29; p< 0.001). For the Perceptions of the system and community dimension, the “network connectivity” item was significantly different between IAC and ICBT (t= 3.25; p= 0.01).

Manual Organization

This manual is meant to assist in the administration and scoring of the CFIR Index. There is a section on data sources and CFIR Index administration for pre-, during, and post-site visit. In addition, there is a section on scoring the CFIR Index. A detailed description of each of the CFIR Index items is also included. The description for each item includes: the definition; examples of data sources to be considered when determining the score; sample open-ended entry and probing questions that can be asked during key informant interviews; and an item response coding to assist with scoring the item as well as example responses.
HOW CAN THE CFIR INDEX BE USED?

As a standardized measure of contextual barriers and facilitators, the CFIR Index has wide application. Standardized measures can more rapidly advance implementation science through the processes of rigor and transparency, reproducibility, incremental refinement, comparative investigation, and meta-analyses. Furthermore, the CFIR Index can be used in diverse settings, at different stages of implementation, and still be applied to various implementation strategies.

For implementation researchers, the CFIR Index can be used as a baseline measure to compare organizations and identify potential moderators of the implementation process. In comparative implementation strategy research, the evaluation of specific strategies to modify CFIR Index variables can be examined. In mediation analyses, evaluation of CFIR Index dimensions on implementation outcomes can be explored.

The CFIR Index is practical and easy to use. The list below summarizes examples of the different ways information gathered from the CFIR Index can be used, including:

- Research – e.g., the CFIR Index can be used to predict implementation outcomes.

- Quality Improvement – e.g., the CFIR Index can be used to assess supportive/unsupportive practice change for an agency.

- Program Evaluation – e.g., the CFIR Index can be used to assess supportive/unsupportive practice change for a program. Both Quality Improvement and Program Evaluation are similar in their use of the CFIR Index. However, both differ from Research in that the results of the CFIR Index for Quality Improvement and/or Program Evaluation are specific to the system or program being assessed and therefore, not necessarily generalizable knowledge.

- Readiness – e.g., the CFIR Index can be used by a system leader to conduct an assessment of the various system sites to determine which will be the beta site or if all sites will be included in the implementation of the intervention.

- Tailoring Implemented Strategies – e.g., the CFIR Index can be used to tailor implemented strategies for an item and/or dimension that has been identified by the CFIR Index assessment as a barrier to implementing the intervention.
METHODOLOGY

Observational Approach and Data Sources

The CFIR Index uses qualitative and observational methods to gather information about a program and rate the barriers and facilities to the implementation process using a quantitative scale. External raters conduct an onsite visit to a program and collect data from three different sources: open-ended key informant interviews with program staff and patients; ethnographic observation of the physical setting, team meetings, and other relevant sources; and review of documents such as brochures, patient charts, program mission statements, and other relevant materials.

Defining the Intervention or Service to be Implemented

It is important to define the intervention or service to be implemented before administering the CFIR Index. Please note that we have used the term “intervention” throughout this manual. However, it may be an intervention, a service, guideline, or any other evidence-based practice that is being implemented. Be sure to use the term that best applies. When using the measure, there is a section of the CFIR Index that allows you to enter the name of the intervention/service being implemented (see the CFIR Index Version 3.1 section). Sample questions may differ depending on how the intervention has been defined (see The CFIR Index: Dimensions and Items and the Sample Questions sections for more information).

It should also be noted that how the intervention is defined may change according to the implementation phase, where clarity increases through the different phases. It is also possible that the intervention is known at the exploration phase. Using the four phases of implementation outlined by Aarons et al [9], below are examples of how the definition of the intervention can change at various implementation phases:

1) Exploration – trying to identify which intervention will be the best fit

2) Preparation – an intervention has been identified, but it may be vague or loosely defined

3) Implementation – an intervention has been identified and clearly defined

4) Sustainment – the definition of the intervention will be specific to what was implemented
CFIR Index Administration

CONDUCTING THE SITE VISIT

Pre Site Visit
Make sure to pre-arrange site visits with the program leader before the site visit. You will also want to confirm the time and location the day before the site visit. The preparation call should include a description of the purpose of the visit and an explanation of what to expect from the site visit, including: the type of people you’ll be meeting with (e.g., staff members and patients); the amount of time for each meeting as well as the overall amount of time for the site visit; and the composition of the meetings (e.g., individually and/or small groups). You can also send a brief summary that includes a description and the purpose of the site visit for the program leader to distribute to staff members in advance of the visit.

Before the site visit, make sure to have all the materials needed ready. This includes: two copies of the CFIR Index (one for each rater); two legal pads (one for each rater) to write down notes from team meetings, interviews, and observations; pens; and extra copies of the site visit summary.

Note, you may also want to pack light as you will be walking around interviewing people who are doing their job, and you may not have a place to leave your belongings.

Also, be clear who will be the primary and secondary rater. The primary rater will take the lead when interviewing, and the secondary rater can ask clarifying questions and/or take notes.

During Site Visit
When you get to the site, ask the program manager if there is a room available to interview people. This will offer some privacy and be less distracting when conducting interviews. However, if a dedicated space is unavailable, you can conduct interviews wherever you find available participants. Meet with as many people as possible over the course of the site visit. Site visits can range anywhere from 3 – 4 hours on average, but each interview will probably be approximately 15 – 20 minutes. You can interview staff members and patients in small groups and/or individually.

Interviews can include a range of staff members such as: 1) clinicians (e.g., physicians, psychologists, social workers, and counselors); 2) clinical and medical senior management (e.g., directors and supervisors); 3) clinical support staff (e.g., nurses and patient care coordinators); 3) administrative and financial leaders; and 4) administrative support staff (e.g., reception, human resource, information technology, and billing clerks). Interviews with patients who receive services from the program should also be included.
When interviewing staff and patients, make sure to explain to them the purpose of the site visit. Inform each person interviewed that notes will be taken, but also assure them that all information provided will be confidential and will not include any identifying or protected health information (see Confidentiality section).

The primary rater will lead the interviews and the secondary rater will support the lead. When interviewing participants, it’s best to ask open-ended questions to elicit the most information. Depending on the stage of implementation (e.g., pre-implementation phase, implementation phase, sustainment phase) and the interviewee (e.g., staff versus patient), you will need to adjust your questioning (see the Key Informant Interviews section for more information on how to ask questions). It may be useful to have the CFIR Index items present during the interviews to make sure that you are asking questions and gathering data that will later help inform the scoring of the measure.

Review of documentation including clinical records, program brochures, educational materials, or program policies and procedures should also be done. This can help provide further information to complete the CFIR Index.

If the program has a team meeting scheduled for that day, ask the program manager if you can attend the meeting. This is another source of information that can be used to complete the CFIR Index.

**Post Site Visit**

After the end of the site visit, preliminary feedback to the program leader can be verbally communicated. This can include thanking them for their time, providing them with a brief overview of the site visit, and reminding them that a summary report of the site visit is forthcoming. A follow up email sent the next day is also suggested.

Scoring the CFIR Index away from the organization, but soon after the site visit is recommended. Both raters should complete scoring each item of the CFIR Index independently, reviewing all information gathered from the site visit including interviews, observations, and document review (see Scoring and Interpretation section for more information on how to score the CFIR Index). After scoring, raters should meet to discuss and resolve any discrepancies in scoring.

The final scores for each CFIR Index item should then be entered into the CFIR Index workbook, which will calculate dimension scores and generate graphs of dimension and item scores (see Scoring the CFIR Index and CFIR Index Graphs sections for more information on the workbook). Write a report of the visit to send to the organization using the summary of dimension scores and
graphs. The report should also include a review of data sources, program strengths, and realistic recommendations for improvement (see Feedback to Programs section for more information on reports).

**KEY INFORMANT INTERVIEWS**

Key informant interviews should be conversational and organic. While sample questions are provided, these are meant to provide examples of open-ended entry and probing questions to elicit responses that can be used to score the CFIR Index. Avoid using sample questions as a script or as a checklist as it will prevent the flow of conversation with the key informant. It’s also important to note that questions will differ by type of key informant, stage of implementation, and intervention. Sample entry and probing questions have also been categorized and developed according to key informant type. Entry questions for each item have been selected from the CFIR Interview Guide Tool ([www.cfirguide.org](http://www.cfirguide.org)). Probing questions for each item have been developed by the manual authors. Both entry and probing questions are available in The CFIR Index: Dimensions and Items and the Sample Questions sections.

**CONFIDENTIALITY**

When conducting the CFIR Index assessment, it is important to assure participants that information gathered during all aspects of the site visit will be kept confidential. Some participants may feel hesitant or uncomfortable openly discussing perceptions of the program, providers, and/or others. Reassure them at the start of the interview that everything they say will be kept confidential and that any notes taken during the course of the interview will not include names. While you may want to keep a track of the sources used by tallying the number and type of participants interviewed (e.g., staff type or patient) for the report, you will not need to link responses to participants. If the site visit includes chart review, it’s important to respect the confidentiality of the patient. Whenever possible, to safeguard privacy and confidentiality, conduct individual interviews in a private room. Only report results of the CFIR Index assessment in aggregate. Do not discuss individual sources of information gathered from key informant interviews, team meetings, chart review, etc. with others.

**SELF-EVALUATION**

Objective raters with knowledge of the CFIR Index and each item response coding will improve the accuracy and usefulness of the CFIR Index. As such, we recommend two independent and trained raters to conduct the assessment. Self-evaluation; however, is possible. Before attempting self-evaluation, it’s important to be aware of potential drawbacks, including: the potential for
reduced objectivity (i.e., interviewer bias) which can result in a higher likelihood of rating CFIR Index items as facilitators versus barriers; and the potential for influencing key informant responses (i.e., respondent bias), which can result in a higher likelihood of staff and patients unwillingness to express negative perceptions to internal evaluators. Below are a list of recommendations to consider before conducting self-evaluations:

- Start fresh
- Be aware of potential biases (both interviewer and respondent)
- Base scorings on data collected during assessment and not assumptions
- Reassure staff and patients there will be no negative consequences for their responses
- Conduct the assessment with two self-evaluators (versus individually)
- Gain understanding of CFIR Index dimension and item definitions
- Gain understanding of CFIR Index item response coding
SCORING AND INTERPRETATION

Scoring Each CFIR Index Item

Each CFIR Index item is rated on a 5-point Likert type scale. The scale ranges from -2 (Barrier) to 0 (Neutral) to +2 (Facilitator).

- A score of -2 corresponds to an item that is identified as a barrier to the implementation process.
- A score of 0 corresponds to an item that is identified as neutral to the implementation process.
- A score of +2 corresponds to an item that is identified as a facilitator to the implementation process.
- A score of -1 and +1 correspond to an item that falls between the anchor scores of -2, 0, and +2 and is identified as a less extreme barrier and facilitator to the implementation process.

When rating an item, it is helpful to understand that each item will be based on data gathered from key informant interviews, ethnographic observations, and document review. Data from all sources gathered during the half-day onsite visit are then synthesized and summarized to make ratings on a 5-point scale with specified anchors.

Starting at neutral, move the pen/pencil along the scale according to the data away from neutral either towards barrier or facilitator. If the majority of the data supports that the item is a barrier, give the item a score of -2. If the majority of the data supports that the item is a facilitator, give the item a score of +2. If the data supporting the item is varied, give the item a score of 0. For data that is not quite at the extreme of either barrier or facilitator, give the item a score of -1 or +1. In general, where discordancy is observed, ratings move toward the barrier end of the scale.

It’s important to note that there may be overlap in meaning for some items or items may have subtle distinctions (e.g., “Tension for change” and “Relative advantage” items). However, it’s important to consider each item separately and to assess all sources of data to answer each item individually (see CFIR Index: Dimensions and Items section for definitions of each item).
Scoring the CFIR Index

Scoring the CFIR Index will provide ratings on the four dimensions. CFIR Index dimension scores are the average scores of all the items within a dimension. The dimension scores can be examined for barriers and facilitators to the implementation process.

The CFIR Index dimension scores can be calculated by:

1) Adding the number of -2’s, -1’s, 0’s, +1’s, and +2’s that each item in the dimension received for the total sum

2) Dividing the total sum for the dimension by the total number of items in the dimension for the mean score

Alternatively, the rating for each CFIR Index item can be entered into the workbook, which will automatically calculate the mean score for each of the four dimensions.

CFIR Index Graphs

The CFIR Index workbook will automatically populate CFIR Index graphs. This includes bar graphs of the CFIR Index dimension and item scores:

- CFIR Index Overall
- Intervention Items
- System and Community Items
- Program Items (1-7)
- Program Items (8-14)
- Clinician Items

The graphs are visual depictions of the CFIR Index and can be useful when providing feedback to programs. Graphs are also useful when assessments are conducted at multiple time points as they display changes in CFIR Index scores over time. The CFIR Index excel workbook is available upon request (see contact information).
Feedback to Programs

Providing feedback to programs based on their assessment is an important step. Make sure to provide verbal feedback at the end of the site visit and a formal written report to be sent later.

Verbal feedback will be informal and provide program leadership with preliminary feedback. The feedback should include a focus on the program’s strengths as well as areas that need improvement, especially if the program has already identified areas that can be addressed.

The written report will also be addressed to program leadership and will include sources of data assessed, a summary of the CFIR Index scores, graphs of the CFIR Index scores, acknowledgement of strengths, and realistic suggestions for areas of improvement. Recommendations for improvements can be specific (e.g., items identified as barriers) or general (e.g., dimensions identified as barriers). Reports should also include thanking the program leadership and staff for their time.
THE CFIR INDEX: DIMENSIONS AND ITEMS

A. Perceptions of the Intervention

A1. INTERVENTION SOURCE

**Definition:** There is a perceived advantage of the intervention being developed, either internally (within the organization) or externally (from an outside source).

**Source:** Key informant interviews (e.g., staff members and patients)

**Sample Entry Question(s):** An entry question is a question that can be asked initially to gather information during a key informant interview. Below is a sample entry question\(^1\) that can be asked during a key informant interview:

- “Who developed the intervention?”

**Sample Probing Question(s):** A probing question is a question that can be asked to expand on a response to an entry question, elicit more detailed information, or prompt a key informant to talk. Below are sample probing questions that can be asked during a key informant interview:

- “What are your thoughts about the intervention?”
- “Is it important whether the intervention was developed by people from your organization or outside your organization? Why or why not?”
- “Can you tell me more about your thoughts on how the intervention was developed?”

**Item Response Coding:** Coding of this item requires an understanding of whether there is a perceived advantage of the intervention being internally or externally developed.

- Barrier (SCORE -2): There is no perceived advantage among multiple key informants of the intervention being either internally or externally developed. The following is an example statement that would be scored -2: “The state mandate requires us to implement this intervention, but if they had asked us, we wouldn’t have implemented the intervention. Not only is there no need, but it will also negatively impact our workload. But then again, what does the state know about this?”

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\(^1\) Intervention can be replaced with whatever is being implemented (see Defining the Intervention or Service to be Implemented section)

\(^2\) Sample entry questions are selected from the CFIR Interview Guide Tool at [www.cfirguide.org](http://www.cfirguide.org) (see Key Informant Interviews section)
• Neutral (SCORE 0): The perceived advantage among multiple key informants of the intervention being either internally or externally developed is varied. For example, the item is scored 0 if responses include a mixture of both barrier and facilitator statements.

• Facilitator (SCORE +2): There is a perceived advantage among multiple key informants of the intervention being either internally or externally developed. The following is an example statement that would be scored +2: “This intervention was based on a need identified by us and will improve our ability to help patients.”
A2. EVIDENCE STRENGTH AND QUALITY

**Definition:** Belief in the strength of evidence for the intervention’s effectiveness.

**Source:** Key informant interviews (e.g., staff members and patients)

**Sample Entry Question(s):** An entry question is a question that can be asked initially to gather information during a key informant interview. Below is a sample entry question that can be asked during a key informant interview:

- “What kind of information or evidence are you aware of that shows whether or not the intervention will work in your setting?”

**Sample Probing Question(s):** A probing question is a question that can be asked to expand on a response to an entry question, elicit more detailed information, or prompt a key informant to talk. Below are sample probing questions that can be asked during a key informant interview:

- “What do you think about the evidence for the effectiveness of this intervention?”
- “How convinced are you about its effectiveness?”
- “Can you tell me more about your thoughts on the effectiveness of the intervention?”

**Item Response Coding:** Coding of this item requires an understanding of whether there is a belief in the strength of evidence for the intervention’s effectiveness.

- **Barrier (SCORE -2):** The belief among multiple key informants that there is no strength of evidence for the intervention’s effectiveness. The following is an example statement that would be scored -2: “Evidence supporting the intervention, including systemic review of the literature, appears to be inconclusive at best.”

- **Neutral (SCORE 0):** The belief among multiple key informants in the strength of evidence for the intervention’s effectiveness is varied. For example, the item is scored 0 if responses include a mixture of both barrier and facilitator statements.

- **Facilitator (SCORE +2):** The belief among multiple key informants in the strength of evidence for the intervention’s effectiveness. The following is an example statement that would be scored +2: “This intervention was implemented at another agency and it was successful.”
A3. RELATIVE ADVANTAGE

**Definition:** Belief in the advantage of implementing the intervention versus another option.

**Source:** Key informant interviews (e.g., staff members and patients)

**Sample Entry Question(s):** An entry question is a question that can be asked initially to gather information during a key informant interview. Below is a sample entry question that can be asked during a key informant interview:

- “How does the intervention compare to other similar existing programs in your setting?”

**Sample Probing Question(s):** A probing question is a question that can be asked to expand on a response to an entry question, elicit more detailed information, or prompt a key informant to talk. Below are sample probing questions that can be asked during a key informant interview:

- “What are your thoughts about the intervention compared to other options?”
- “How is implementing the intervention better or worse compared to other options?”
- “Can you tell me more about how implementing the intervention is better or worse compared to another intervention or what you’re already doing?”

**Item Response Coding:** Coding of this item requires an understanding of whether there is belief in the advantage of implementing the intervention versus another option.

- **Barrier (SCORE -2):** The belief among multiple key informants that there is no advantage of implementing the intervention versus another option. The following is an example statement that would be scored -2: “I don’t think the intervention is the best option for this organization, especially when there are other options available.”

- **Neutral (SCORE 0):** The belief among multiple key informants in the advantage of implementing the intervention versus another option is varied. For example, the item is scored 0 if responses include a mixture of both barrier and facilitator statements.

- **Facilitator (SCORE +2):** The belief among multiple key informants in the advantage of implementing the intervention versus another option. The following is an example statement that would be scored +2: “After reviewing several interventions, I believe this intervention is the best option for the organization.”
A4. ADAPTABILITY

**Definition:** Belief that the intervention can be adapted, modified, or refined to better fit the organization, treatment providers or patient needs.

**Source:** Key informant interviews (e.g., staff members and patients)

**Sample Entry Question(s):** An entry question is a question that can be asked initially to gather information during a key informant interview. Below is a sample entry question that can be asked during a key informant interview:

- “What kind of changes or alterations do you think you will need to make to the intervention so it will work effectively in your setting?”

**Sample Probing Question(s):** A probing question is a question that can be asked to expand on a response to an entry question, elicit more detailed information, or prompt a key informant to talk. Below are sample probing questions that can be asked during a key informant interview:

- “What, if any, are the types of changes or modifications necessary for the intervention to better fit the needs of the organization/providers/patients?”
- “Do you believe the intervention can modified, if needed? Why or why not?”
- “How would these modifications make for a better fit here?”
- “Can you tell me more about how these modifications make for a better fit here?”

**Item Response Coding:** Coding of this item requires an understanding of whether there is a belief that the intervention can be adapted, modified, or refined to better fit the organization, providers, or patient needs.

- **Barrier (SCORE -2):** The belief among multiple key informants that the intervention cannot be adapted, modified, or refined to better fit the organization, treatment providers, or patient needs. The following is an example statement that would be scored -2: “The intervention protocol is rigid and any modifications will compromise the integrity of the intervention.”

- **Neutral (SCORE 0):** The belief among multiple key informants that the intervention can be adapted, modified, or refined to better fit the organization, treatment providers, or patient needs is varied. For example, the item is scored 0 if responses include a mixture of both barrier and facilitator statements.
• Facilitator (SCORE +2): The belief among multiple key informants that the can be adapted, modified, or refined to better fit the organization, treatment providers or patient needs. The following is an example statement that would be scored +2: “There were components of the intervention that we were able to adapt to better fit the need of the organization.”
A5. TESTABILITY

**Definition:** Belief that the intervention can first be tested on a small scale and then abandoned if it fails.

**Source:** Key informant interviews (e.g., staff members)

**Sample Entry Question(s):** An entry question is a question that can be asked initially to gather information during a key informant interview. Below is a sample entry question that can be asked during a key informant interview:

- “Do you think it would be possible to pilot the intervention before making it available to everyone?”

**Sample Probing Question(s):** A probing question is a question that can be asked to expand on a response to an entry question, elicit more detailed information, or prompt a key informant to talk. Below are sample probing questions that can be asked during a key informant interview:

- “What are your thoughts about the intervention first being tested on a small scale?”
- “Can you tell me more about how the intervention might be tested on a small scale before rolling it out to the whole organization?”

**Item Response Coding:** Coding of this item requires an understanding of whether there is a belief that the intervention can first be tested on a small scale and then abandoned if it fails.

- **Barrier (SCORE -2):** There is a belief among multiple key informants that the intervention cannot be first tested on a small scale and then abandoned if it fails. The following is an example statement that would be scored -2: “The intervention cannot be piloted and once it’s implemented, the organization will have committed too much time and money to abandon it if it fails. Better not to start it at all, than start even on a small scale.”

- **Neutral (SCORE 0):** The belief among multiple key informants that the intervention can be first tested on a small scale and then abandoned if it fails is varied. For example, the item is scored 0 if responses include a mixture of both barrier and facilitator statements.

- **Facilitator (SCORE +2):** The belief among multiple key informants that the intervention can be first tested on a small scale and then abandoned if it fails. The following is an
example statement that would be scored +2: “There are components of the intervention that we were able to adapt to better fit the need of the organization.”
A6. COMPLEXITY

**Definition:** Belief that the intervention is complicated and highly complex.

**Source:** Key informant interviews (e.g., staff members)

**Sample Entry Question(s):** An entry question is a question that can be asked initially to gather information during a key informant interview. Below is a sample entry question that can be asked during a key informant interview:

- “How complicated is the intervention?”

**Sample Probing Question(s):** A probing question is a question that can be asked to expand on a response to an entry question, elicit more detailed information, or prompt a key informant to talk. Below are sample probing questions that can be asked during a key informant interview:

- “Are there components of the intervention that are more or less complicated than others?”
- “What are your thoughts about the intervention’s complexity?”
- “In terms of its complexity, how would you characterize the intervention?”
- “Can you tell me more about the intervention in terms of it being simple or straightforward or complex?”

**Item Response Coding:** Coding of this item requires an understanding of whether there is a belief that the intervention is complicated and highly complex.

- **Barrier (SCORE -2):** There is a belief among multiple key informants that the intervention is complicated and highly complex. The following is an example statement that would be scored -2: “Most of our staff finds the intervention to be too long and complicated, and will likely cause major disruption to the current workflow.”

- **Neutral (SCORE 0):** The belief among multiple key informants that the intervention is complicated and highly complex is varied. For example, the item is scored 0 if responses include a mixture of both barrier and facilitator statements.

- **Facilitator (SCORE +2):** There is a belief among multiple key informants that the intervention is not complicated or highly complex. The following is an example statement that would be scored +2: “Because the intervention is straightforward and doesn’t have highly complex components, we were able to implement it without disruption to our workflow.”
A7. COST

Definition: Costs of the intervention, including the costs associated with implementing it.

Source: Key informant interviews (e.g., staff members)

Sample Entry Question(s): An entry question is a question that can be asked initially to gather information during a key informant interview. Below is a sample entry question that can be asked during a key informant interview:

• “What costs will be incurred to implement the intervention?”

Sample Probing Question(s): A probing question is a question that can be asked to expand on a response to an entry question, elicit more detailed information, or prompt a key informant to talk. Below are sample probing questions that can be asked during a key informant interview:

• “What are your thoughts about the cost of the intervention?”
• “How, if at all, do the costs of the intervention impact implementation?”
• “Can you tell me more about how costs of the doing this intervention might impact the organization?”

Item Response Coding: Coding of this item requires an understanding of the costs of the intervention including the costs associated with implementing it.

• Barrier (SCORE -2): There is a perception among multiple key informants that the costs of the intervention including the costs associated with implementing it are too much. The following is an example statement that would be scored -2: “The cost of the intervention is too high. Our organization has spent a lot of money and time on implementing this intervention.”

• Neutral (SCORE 0): The perception among multiple key informants that the costs of the intervention including the costs associated with implementing it is varied. For example, the item is scored 0 if responses include a mixture of both barrier and facilitator statements.

• Facilitator (SCORE +2): There is a perception among multiple key informants that the costs of the intervention including the costs associated with implementing it are not too much. The following is an example statement that would be scored +2: “We were able to
implement the intervention with little cost to the organization as we already had many of the components in place.”
B. Perceptions of the System and Community

B1. PATIENT NEEDS AND RESOURCES

**Definition:** Belief that the intervention fits with patient needs, preferences and resources.

**Source:** Key informant interviews (e.g., staff members and patients)

**Sample Entry Question(s):** An entry question is a question that can be asked initially to gather information during a key informant interview. Below is a sample entry question that can be asked during a key informant interview:

- “How well do you think the intervention will meet the needs of the individuals served by your organization?”

**Sample Probing Question(s):** A probing question is a question that can be asked to expand on a response to an entry question, elicit more detailed information, or prompt a key informant to talk. Below are sample probing questions that can be asked during a key informant interview:

- “How, if at all, does the intervention fit with your patients’ needs, preferences and resources?”
- “Can you tell me more about how patient needs, preferences and resources might be addressed by the intervention?”

**Item Response Coding:** Coding of this item requires an understanding of whether there is a belief that the intervention fits with patient needs, preferences and resources.

- **Barrier (SCORE -2):** The belief among multiple key informants that the intervention does not fit with patient needs, preferences and resources. The following is an example statement that would be scored -2: “My main concern with the intervention is that it doesn’t address the major barriers our patients experience when coming to our organization, including long wait times, difficulty navigating services, and insufficient time with providers.”

- **Neutral (SCORE 0):** The belief among multiple key informants that the intervention fits with patient needs, preferences and resources is varied. For example, the item is scored 0 if responses include a mixture of both barrier and facilitator statements.
• Facilitator (SCORE +2): The belief among multiple key informants that the intervention fits with patient needs, preferences and resources. The following is an example statement that would be scored +2: “I think the intervention will help improve my access to services.”
B2. NETWORK CONNECTIVITY

Definition: The degree to which the program is connected with other similar health care organizations, such as through ACOs, provider associations or regional affiliations.

Source: Key informant interviews (e.g., staff members)

Sample Entry Question(s): An entry question is a question that can be asked initially to gather information during a key informant interview. Below is a sample entry question that can be asked during a key informant interview:

• “What kind of information exchange do you have with others outside your setting, whether related to the intervention, or more generally about your profession?”

Sample Probing Question(s): A probing question is a question that can be asked to expand on a response to an entry question, elicit more detailed information, or prompt a key informant to talk. Below are sample probing questions that can be asked during a key informant interview:

• “How, if at all, connected is your organization with other similar health care organizations?”
• “To what extent is the program connected with other organizations?”
• “What type of networks are in place that connect you with other organizations?”
• “Can you tell me more about how connected your organization is with others?”
• “Could you describe how the different type of networks work?”

Item Response Coding: Coding of this item requires an understanding of the degree to which the program is connected with other similar health care organizations, such as through ACOs, provider associations or regional affiliations.

• Barrier (SCORE -2): According to multiple key informants, the program is not connected with other similar health care organizations, such as through ACOs, provider associations or regional affiliations. The following is an example statement that would be scored -2: “Our organization does not participate in networking with other similar organizations.”

• Neutral (SCORE 0): According to multiple key informants, the degree to which the program is connected with other similar health care organizations, such as through ACOs, provider associations or regional affiliations is varied. For example, the item is scored 0 if responses include a mixture of both barrier and facilitator statements.
Facilitator (SCORE +2): According to multiple key informants, the program is connected with other similar health care organizations, such as through ACOs, provider associations or regional affiliations. The following is an example statement that would be scored +2: “The organization paid to have me travel to a networking event out of state with other similar organizations.”
B3. PEER PRESSURE

Definition: Perception that there is competitive pressure to adopt this intervention or to keep up with other agencies within the system.

Source: Key informant interviews (e.g., staff members)

Sample Entry Question(s): An entry question is a question that can be asked initially to gather information during a key informant interview. Below is a sample entry question that can be asked during a key informant interview:

- “Can you tell me what you know about any other organizations that have implemented the intervention or other similar programs?”

Sample Probing Question(s): A probing question is a question that can be asked to expand on a response to an entry question, elicit more detailed information, or prompt a key informant to talk. Below are sample probing questions that can be asked during a key informant interview:

- “Are you aware of other organizations that have implemented the intervention?”
- “What are your thoughts about other organizations that have implemented the intervention?”
- “To what extent does the pressure to keep up with other agencies impact your decision to implement the intervention?”
- “Can you tell me more about how your organization compares to other organizations?”

Item Response Coding: Coding of this item requires an understanding of whether there is a perception that there is competitive pressure to adopt this intervention or keep up with other agencies within the system.

- Barrier (SCORE -2): The perception among multiple key informants that there is no competitive pressure to adopt this intervention or to keep up with other agencies within the system. The following is an example statement that would be scored -2: “Just because the other site implemented the intervention does not mean that it’s a good fit for this location. For starters, they have more staff available than we do.”

- Neutral (SCORE 0): The perception among multiple key informants that there is competitive pressure to adopt this intervention or to keep up with other agencies within the system is varied. For example, the item is scored 0 if responses include a mixture of both barrier and facilitator statements.
Facilitator (SCORE +2): The perception among multiple key informants that there is competitive pressure to adopt this intervention or to keep up with other agencies within the system. The following is an example statement that would be scored +2: “Other sites have already piloted the intervention and I’m excited that the intervention will be implemented at our location next.”
B4. EXTERNAL POLICY AND INCENTIVES

Definition: System wide influences exist, such as through policy and service reimbursement, to implement the intervention.

Source: Key informant interviews (e.g., staff members)

Sample Entry Question(s): An entry question is a question that can be asked initially to gather information during a key informant interview. Below is a sample entry question that can be asked during a key informant interview:

- “What kind of financial or other incentives influenced the decision to implement the intervention?”

Sample Probing Question(s): A probing question is a question that can be asked to expand on a response to an entry question, elicit more detailed information, or prompt a key informant to talk. Below are sample probing questions that can be asked during a key informant interview.

- “How, if at all, have policies and incentives influenced the implementation of the intervention?”
- “What are the different types of policies and incentives that influenced the decision to implement the intervention?”
- “Can you tell me more about the impact they’ve had on the decision to implement the intervention?”
- “Do you see these factors as supportive or inhibiting?”

Item Response Coding: Coding of this item requires an understanding of whether system wide influences exist, such as through policy and service reimbursement, to implement the intervention.

- Barrier (SCORE -2): According to multiple key informants, system wide influences do not exist, such as through policy and service reimbursement, to implement the intervention. The following is an example statement that would be scored -2: “Most of the clinicians are unhappy with the decision to implement the intervention as they’re unable to get reimbursed for services provided.”

- Neutral (SCORE 0): According to multiple key informants, system wide influences, such as through policy and service reimbursement, to implement the intervention is varied.
For example, the item is scored 0 if responses include a mixture of both barrier and facilitator statements.

- Facilitator (SCORE +2): According to multiple key informants, system wide influences exist, such as through policy and service reimbursement, to implement the intervention. The following is an example statement that would be scored +2: “Our organization’s leadership decided we needed to implement the intervention when they learned that it would meet new government guidelines.”
C. Perceptions of the Program

C1. STRUCTURAL CHARACTERISTICS

Definition: The social structure, age, maturity, and size of the program.

Source: Key informant interviews (e.g., staff members), observation (e.g., team meeting), and documentation review (e.g., website; brochures; policy and procedure manuals)

Sample Entry Question(s): An entry question is a question that can be asked initially to gather information during a key informant interview. Below is a sample entry question that can be asked during a key informant interview:

• “How will the infrastructure of your organization (social architecture, age, maturity, size, or physical layout) affect the implementation of the intervention?”

Sample Probing Question(s): A probing question is a question that can be asked to expand on a response to an entry question, elicit more detailed information, or prompt a key informant to talk. Below are sample probing questions that can be asked during a key informant interview:

• “How would things like the size or history of your organization influence your implementing this intervention?”
• “Can you tell me more about how program characteristics might influence the implementation of the intervention?
• “Do you imagine it could make it easier or harder?”

Item Response Coding: Coding of this item requires an understanding of the social structure, age, maturity, and size of the program.

• Barrier (SCORE -2): According to multiple key informants, the social structure, age, maturity, and size of the program negatively impacts the implementation of the intervention. The following is an example statement that would be scored -2: “Our organization has difficulty retaining staff, which makes it challenging to implement the intervention when we’re constantly understaffed.”

• Neutral (SCORE 0): According to multiple key informants, the impact of the social structure, age, maturity, and size of the program on implementing the intervention is
varied. For example, the item is scored 0 if responses include a mixture of both barrier and facilitator statements.

- Facilitator (SCORE +2): According to multiple key informants, the social structure, age, maturity, and size of the program positively impacts the implementation of the intervention. The following is an example statement that would be scored +2: “Steady growth and low staff turnover have helped support the implementation of the intervention.”
C2. NETWORKS AND COMMUNICATION

**Definition:** The strength and adhesiveness of social networks, as demonstrated by formal and informal communications within the program.

**Source:** Key informant interviews (e.g., staff members), observation (e.g., team meetings), and documentation review (e.g., team logs or shared communication platforms).

**Sample Entry Question(s):** An entry question is a question that can be asked initially to gather information during a key informant interview. Below is a sample entry question that can be asked during a key informant interview:

- “Can you describe your working relationships with your colleagues?”

**Sample Probing Question(s):** A probing question is a question that can be asked to expand on a response to an entry question, elicit more detailed information, or prompt a key informant to talk. Below are sample probing questions that can be asked during a key informant interview:

- “How would you describe the quality of communication with others in your organization?”
- “Can you tell me more about how information is communicated within your agency?”

**Item Response Coding:** Coding of this item requires an understanding of the strength and adhesiveness of social networks, as demonstrated by formal and informal communications within the program.

- **Barrier (SCORE -2):** According to multiple key informants, there is no strength and adhesiveness of social networks, as demonstrated by formal and informal communications within the program. The following is an example statement that would be scored -2: “Our working relationships could be better. With the new leadership, very little information is communicated to staff and we never know what’s happening.”

- **Neutral (SCORE 0):** According to multiple key informants, the strength and adhesiveness of social networks, as demonstrated by formal and informal communications within the program is varied. For example, the item is scored 0 if responses include a mixture of both barrier and facilitator statements.

- **Facilitator (SCORE +2):** According to multiple key informants, there is strength and adhesiveness of social networks, as demonstrated by formal and informal communications within the program. The following is an example statement that would
be scored +2: “My colleagues and I have a great working relationship, we have open communication which allows us to work well as a team.”
C3. CULTURE

Definition: Beliefs, values, ethics and basic assumptions within the program that welcome the intervention.

Source: Key informant interviews (e.g., staff members), observation (e.g., team meetings), and documentation (e.g., mission statement).

Sample Entry Question(s): An entry question is a question that can be asked initially to gather information during a key informant interview. Below is a sample entry question that can be asked during a key informant interview:

- “How would you describe the culture of your organization? Of your own setting or unit?”

Sample Probing Question(s): A probing question is a question that can be asked to expand on a response to an entry question, elicit more detailed information, or prompt a key informant to talk. Below are sample probing questions that can be asked during a key informant interview:

- “How, if at all, does the culture here impact the implementation of the intervention?”
- “Can you tell me more about your organization’s culture?”

Item Response Coding: Coding of this item requires an understanding of the beliefs, values, ethics and basic assumptions within the program that welcome the intervention.

- Barrier (SCORE -2): According to multiple key informants, there are no beliefs, values, ethics and basic assumptions within the program that welcome the intervention. The following is an example statement that would be scored -2: “There’s so much red tape and bureaucracy that it’s difficult to get things done here.”

- Neutral (SCORE 0): According to multiple key informants, the beliefs, values, ethics and basic assumptions within the program that welcome the intervention is varied. For example, the item is scored 0 if responses include a mixture of both barrier and facilitator statements.

- Facilitator (SCORE +2): According to multiple key informants, there are beliefs, values, ethics and basic assumptions within the program that welcome the intervention. The following is an example statement that would be scored +2: “The leadership here places an emphasis on working together to improve care for our patients, so we’re all motivated to implement the intervention.”
C4. IMPLEMENTATION CLIMATE

**Definition:** The program’s capacity to make changes, including a shared vision of the need for improvement and commitment to the program’s growth.

**Source:** Key informant interviews (e.g., staff members), observation (e.g., team meetings), and documentation (e.g., mission statement).

**Sample Entry Question(s):** An entry question is a question that can be asked initially to gather information during a key informant interview. Below is a sample entry question that can be asked during a key informant interview:

- “What is the general receptivity in your organization to implementing the intervention?”

**Sample Probing Question(s):** A probing question is a question that can be asked to expand on a response to an entry question, elicit more detailed information, or prompt a key informant to talk. Below are sample probing questions that can be asked during a key informant interview:

- “How committed is the program to ongoing improvement in general?”
- “What kinds of things would you say are good examples of this?”
- “Can you tell me more about the type of ongoing improvements being made here?”

**Item Response Coding:** Coding of this item requires an understanding of the program’s capacity to make changes, including a shared vision of the need for improvement and commitment to the program’s growth.

- **Barrier (SCORE -2):** According to multiple key informants, the program’s capacity to make changes, including a shared vision of the need for improvement and commitment to the program’s growth is limited. The following is an example statement that would be scored -2: “I think what we’re doing is good. We can’t really afford to make changes with the recent budget cuts, plus I don’t see the point.”

- **Neutral (SCORE 0):** According to multiple key informants, the program’s capacity to make changes, including a shared vision of the need for improvement and commitment to the program’s growth is varied. For example, the item is scored 0 if responses include a mixture of both barrier and facilitator statements.

- **Facilitator (SCORE +2):** According to multiple key informants, the program has the capacity to make changes, including a shared vision of the need for improvement and...
commitment to the program’s growth. The following is an example statement that would be scored +2: “It is important to me that we strive for excellence. I know that we’re all committed to making a positive impact and that’s why we’re implementing the intervention.”
C5. TENSION FOR CHANGE

**Definition:** Belief that the current situation definitely needs to change.

**Source:** Key informant interviews (e.g., staff members and patients) and document review (e.g., chart review).

**Sample Entry Question(s):** An entry question is a question that can be asked initially to gather information during a key informant interview. Below is a sample entry question that can be asked during a key informant interview:

- “Is there a strong need for the intervention?”

**Sample Probing Question(s):** A probing question is a question that can be asked to expand on a response to an entry question, elicit more detailed information, or prompt a key informant to talk. Below are sample probing questions that can be asked during a key informant interview:

- “How bad or at least sub-optimal is the current situation that this intervention could potentially remedy?”
- “How would you describe the current situation in terms of changes needed?”
- “How imperative or critical is making this change?”
- “Can you tell me more about what changes your organization needs to make?”

**Item Response Coding:** Coding of this item requires an understanding of whether there is a belief that the current situation definitely needs to change.

- **Barrier (SCORE -2):** The belief among multiple key informants that the current situation definitely does not need to change. The following is an example statement that would be scored -2: “We see very few patients with this type of health problem, so I don’t think there’s a great need for the intervention.”

- **Neutral (SCORE 0):** The belief among multiple key informants that the current situation definitely needs to change is varied. For example, the item is scored 0 if responses include a mixture of both barrier and facilitator statements.

- **Facilitator (SCORE +2):** The belief among multiple key informants that the current situation definitely needs to change. The following is an example statement that would be scored +2: “We’ve seen an increase in the number of patients with this type of health
problem, but we’re currently unable to help. Once the intervention is implemented, it’ll help us to address the needs of our patients.”
C6. COMPATIBILITY

**Definition:** The degree to which the intervention fits within existing workflows and operations.

**Source:** Key informant interviews (e.g., staff members)

**Sample Entry Question(s):** An entry question is a question that can be asked initially to gather information during a key informant interview. Below is a sample entry question that can be asked during a key informant interview:

- “How well does the intervention fit with your values and norms and the values and norms within the organization?”

**Sample Probing Question(s):** A probing question is a question that can be asked to expand on a response to an entry question, elicit more detailed information, or prompt a key informant to talk. Below are sample probing questions that can be asked during a key informant interview:

- “How does the intervention fit with the current state practice or philosophy of the organization?”
- “Would you say it’s compatible or really quite different from ‘business-as-usual’?”
- “What kinds of things would you say are good examples of this?”
- “Can you tell me more about fit of the intervention?”

**Item Response Coding:** Coding of this item requires an understanding of the degree to which the intervention fits within existing workflows and operations.

- **Barrier (SCORE -2):** According to multiple key informants, the intervention does not fit within existing workflows and operations. The following is an example statement that would be scored -2: “We only have a few minutes with each patient and now that we’ve implemented the intervention, it’s cutting into the already limited time we have with our patients.”

- **Neutral (SCORE 0):** According to multiple key informants, the degree to which the intervention fits within existing workflows and operations is varied. For example, the item is scored 0 if responses include a mixture of both barrier and facilitator statements.

- **Facilitator (SCORE +2):** According to multiple key informants, the intervention fits within existing workflows and operations. The following is an example statement that would be scored +2: “We already see a lot of patients with depression, so now that we’re
implementing behavioral health integration, we'll be better equipped to provide improved care for our patients.”
C7. RELATIVE PRIORITY

Definition: The belief that the intervention is a high priority for the program to implement.

Source: Key informant interviews (e.g., staff members)

Sample Entry Question(s): An entry question is a question that can be asked initially to gather information during a key informant interview. Below is a sample entry question that can be asked during a key informant interview:

- “To what extent might the implementation take a backseat to other high-priority initiatives going on now?”

Sample Probing Question(s): A probing question is a question that can be asked to expand on a response to an entry question, elicit more detailed information, or prompt a key informant to talk. Below are sample probing questions that can be asked during a key informant interview:

- “With all the things and pressures in your work, how much of a priority is implementing this practice?”
- “How does it compare with other priorities?”

Item Response Coding: Coding of this item requires an understanding of whether there is a belief that the intervention is a high priority for the program to implement.

- Barrier (SCORE -2): The belief among multiple key informants that the intervention is not a high priority for the program to implement. The following is an example statement that would be scored -2: “I don’t understand why the clinic has decided to implement MAT for opioid use disorder, we don’t have any patients with OUD at this organization. We should prioritize interventions addressing obesity instead.”

- Neutral (SCORE 0): The belief among multiple key informants that the intervention is a high priority for the program to implement is varied. For example, the item is scored 0 if responses include a mixture of both barrier and facilitator statements.

- Facilitator (SCORE +2): The belief among multiple key informants that the intervention is a high priority for the program to implement. The following is an example statement that would be scored +2: “It’s a priority to all of us that we implement this intervention.”
C8. ORGANIZATIONAL INCENTIVES

**Definition:** Program incentives provided to staff for doing the intervention, both concrete (such as money, awards, promotions, etc.) and prestige (such as stature and respect).

**Source:** Key informant interviews (e.g., staff members)

**Sample Entry Question(s):** An entry question is a question that can be asked initially to gather information during a key informant interview. Below is a sample entry question that can be asked during a key informant interview:

- “What kinds of incentives are there to help ensure that the implementation of the intervention is successful?”

**Sample Probing Question(s):** A probing question is a question that can be asked to expand on a response to an entry question, elicit more detailed information, or prompt a key informant to talk. Below are sample probing questions that can be asked during a key informant interview:

- “Are there any incentives to staff for doing the intervention?”
- “Are there specific incentives that would motivate you and other staff?”
- “Can you tell me more about how incentives might help to ensure the implementation of the intervention?”

**Item Response Coding:** Coding of this item requires an understanding of the program incentives provided to staff for doing the intervention, both concrete (such as money, awards, promotions, etc.) and prestige (such as stature and respect).

- **Barrier (SCORE -2):** According to multiple key informants, program incentives are not provided to staff for doing the intervention, both concrete (such as money, awards, promotions, etc.) and prestige (such as stature and respect). The following is an example statement that would be scored -2: “I think they would be able to motivate a lot more staff to participate in the intervention if there was a reward system in place for reaching program goals. But the organization doesn’t recognize all the hard work we do implementing the intervention.”

- **Neutral (SCORE 0):** According to multiple key informants, program incentives provided to staff for doing the intervention, both concrete (such as money, awards, promotions, etc.) and prestige (such as stature and respect) is varied. For example, the item is scored 0 if responses include a mixture of both barrier and facilitator statements.
Facilitator (SCORE +2): According to multiple key informants, program incentives are provided to staff for doing the intervention, both concrete (such as money, awards, promotions, etc.) and prestige (such as stature and respect). The following is an example statement that would be scored +2: “We will be evaluated on our participation in the intervention. I’m hoping that it will result in a promotion.”
C9. GOALS AND FEEDBACK

Definition: The degree to which the program clearly communicates goals to staff and provides them with feedback.

Source: Key informant interviews (e.g., staff members)

Sample Entry Question(s): An entry question is a question that can be asked initially to gather information during a key informant interview. Below is a sample entry question that can be asked during a key informant interview:

• “Have you/your unit/your organization set goals related to the implementation of the intervention?”

Sample Probing Question(s): A probing question is a question that can be asked to expand on a response to an entry question, elicit more detailed information, or prompt a key informant to talk. Below are sample probing questions that can be asked during a key informant interview:

• “How are practice or quality goals communicated to staff in this organization?”
• “Is feedback provided about how progress is being made, or not, to reach the target goals?”
• “What type of feedback have you received about the status of the intervention implementation?”
• “How, if at all, has this influenced the implementation of the intervention?”

Item Response Coding: Coding of this item requires an understanding of the degree to which the program clearly communicates goals to staff and provides them with feedback.

• Barrier (SCORE -2): According to multiple key informants, the program does not clearly communicate goals to staff and provide them with feedback. The following is an example statement that would be scored -2: “It would be helpful if we could dedicate some time during our weekly team meetings to discuss the intervention, have my boss provide feedback, and set realistic goals for each phase of the intervention.”

• Neutral (SCORE 0): According to multiple key informants, the degree to which the program clearly communicates goals to staff and provides them with feedback is varied. For example, the item is scored 0 if responses include a mixture of both barrier and facilitator statements.
• Facilitator (SCORE +2): According to multiple key informants, the program clearly communicates goals to staff and provides them with feedback. The following is an example statement that would be scored +2: “Once they started providing updates on the implementation of the intervention, we were able to see our progress. It has also helped with getting others on board with the intervention.”
C10. LEARNING CLIMATE

**Definition:** An inquisitive, curious and open-minded learning climate exists across the program.

**Source:** Key informant interviews (e.g., staff members) and observation (e.g., team meetings).

**Sample Entry Question(s):** An entry question is a question that can be asked initially to gather information during a key informant interview. Below is a sample entry question that can be asked during a key informant interview:

- “To what extent do you feel like you can try new things to improve your work processes?”

**Sample Probing Question(s):** A probing question is a question that can be asked to expand on a response to an entry question, elicit more detailed information, or prompt a key informant to talk. Below are sample probing questions that can be asked during a key informant interview:

- “How does your organization deal with education and training needs?”
- “How, if at all, does the organization support an inquisitive and open-minded learning climate?”
- “Can you tell me more about the ways in which your organization encourages getting new skills and knowledge?”

**Item Response Coding:** Coding of this item requires an understanding that an inquisitive, curious and open-minded learning climate exists across the program.

- Barrier (SCORE -2): According to multiple key informants, an inquisitive, curious and open-minded learning climate does not exist across the program. The following is an example statement that would be scored -2: “We keep making the same mistakes that were made when we initially piloted the intervention. I’m not sure how we’re supposed to successfully implement the intervention if we don’t assess what went wrong the first time.”

- Neutral (SCORE 0): According to multiple key informants, an inquisitive, curious and open-minded learning climate that exists across the program is varied. For example, the item is scored 0 if responses include a mixture of both barrier and facilitator statements.

- Facilitator (SCORE +2): According to multiple key informants, an inquisitive, curious and open-minded learning climate exists across the program. The following is an example statement that would be scored +2: “We were able to avoid some of the mistakes...”
made when we initially piloted the intervention. Now we know the best way to implement the intervention is to gradually scale it up.”
C11. READINESS FOR IMPLEMENTATION

Definition: The program is at the ‘action’ stage of implementing this intervention. Practices that have already implemented the intervention may be at the ‘sustainment’ stage – continuation of ‘action.’

Source: Key informant interviews (e.g., staff members), observation (e.g., team meetings), and documentation (e.g., brochures).

Sample Entry Question(s): An entry question is a question that can be asked initially to gather information during a key informant interview. Below is a sample entry question that can be asked during a key informant interview:

• Not Available

Sample Probing Question(s): A probing question is a question that can be asked to expand on a response to an entry question, elicit more detailed information, or prompt a key informant to talk. Below are sample probing questions that can be asked during a key informant interview:

• “How ready is your organization for this implementation?”
• “What, if any, type of indicators have you seen that signal the organization is ready-to-go and committed to implement the intervention?”
• Stage specific: “Can you tell me more about the steps the organization has taken to prepare for the implementation of the intervention?”
• Stage specific: “Can you tell me more about the steps the organization has taken for continued or sustained implementation of the intervention?”

Item Response Coding: Coding of this item requires an understanding that the program is at the ‘action’ stage of implementing this intervention. Practices that have already implemented the intervention may be at the ‘sustainment’ stage – continuation of ‘action.’

• Barrier (SCORE -2): According to multiple key informants, the program is not at the ‘action’ stage of implementing this intervention. Practices that have already implemented the intervention are not at the ‘sustainment’ stage – continuation of ‘action.’ The following is an example statement that would be scored -2: “Just before we began to implement the intervention, our organization got restructured. As a result, we’ve decided to delay the start date.”

3 There are no sample questions for Readiness for Implementation in the CFIR Interview Guide Tool
• Neutral (SCORE 0): According to multiple key informants, the program at the ‘action’ stage of implementing this intervention is varied. Practices that have already implemented the intervention may be at the ‘sustainment’ stage – continuation of ‘action’ is varied. For example, the item is scored 0 if responses include a mixture of both barrier and facilitator statements.

• Facilitator (SCORE +2): According to multiple key informants, the program is at the ‘action’ stage of implementing this intervention. Practices that have already implemented the intervention may be at the ‘sustainment’ stage – continuation of ‘action.’ The following is an example statement that would be scored +2: “It was important to the team that we gradually scaled up the implementation of the intervention. Now we all feel ready for the implementation.”
C12. LEADERSHIP ENGAGEMENT

Definition: Commitment, involvement, and accountability of leaders and managers for the intervention’s implementation.

Source: Key informant interviews (e.g., staff members) and observation (e.g., team meetings).

Sample Entry Question(s): An entry question is a question that can be asked initially to gather information during a key informant interview. Below is a sample entry question that can be asked during a key informant interview:

• “What level of involvement has leadership at your organization has so far with the intervention?”

Sample Probing Question(s): A probing question is a question that can be asked to expand on a response to an entry question, elicit more detailed information, or prompt a key informant to talk. Below are sample probing questions that can be asked during a key informant interview:

• “How would you describe the commitment or support of your organization’s leadership (managers, supervisors, or other people at the top)?”
• “To what extent is leadership involved in implementing the intervention?”
• “How would you know if this is really a priority for your leadership?”
• “How would you know if this is really important to the people at the top?”

Item Response Coding: Coding of this item requires an understanding of the commitment, involvement, and accountability of leaders and managers for the intervention’s implementation.

• Barrier (SCORE -2): According to multiple key informants, there is no commitment, involvement, and accountability of leaders and managers for the intervention’s implementation. The following is an example statement that would be scored -2: “My supervisor is usually unavailable whenever we have questions about the intervention, so it’s difficult to get things done.”

• Neutral (SCORE 0): According to multiple key informants, the commitment, involvement, and accountability of leaders and managers for the intervention’s implementation is varied. For example, the item is scored 0 if responses include a mixture of both barrier and facilitator statements.
• Facilitator (SCORE +2): According to multiple key informants, there is commitment, involvement, and accountability of leaders and managers for the intervention’s implementation. The following is an example statement that would be scored +2: “My supervisor is available whenever we have questions about the intervention.”
C13. RESOURCE AVAILABILITY

Definition: The level of resources dedicated for implementation, including money, training, physical space, and time.

Source: Key informant interviews (e.g., staff members) and observation (e.g., team meetings).

Sample Entry Question(s): An entry question is a question that can be asked initially to gather information during a key informant interview. Below is a sample entry question that can be asked during a key informant interview:

- Do you expect to have sufficient resources to implement and administer the intervention?"

Sample Probing Question(s): A probing question is a question that can be asked to expand on a response to an entry question, elicit more detailed information, or prompt a key informant to talk. Below are sample probing questions that can be asked during a key informant interview:

- “How would you describe the level of resources dedicated to implementation the intervention?”
- “Do you think the dedicated resources are adequate?”
- “Do you think the dedicated resources are inadequate?”

Item Response Coding: Coding of this item requires an understanding of the level of resources dedicated for implementation, including money, training, physical space, and time.

- Barrier (SCORE -2): According to multiple key informants, there is no level of resources dedicated for implementation, including money, training, physical space, and time. The following is an example statement that would be scored -2: “Implementing behavioral health integration will require us to hire a full time Behavioral Health Clinician; however, we currently don’t have it in our budget to cover the salary.”

- Neutral (SCORE 0): According to multiple key informants, the level of resources dedicated for implementation, including money, training, physical space, and time is varied. For example, the item is scored 0 if responses include a mixture of both barrier and facilitator statements.

- Facilitator (SCORE +2): According to multiple key informants, there is a level of resources dedicated for implementation, including money, training, physical space, and time. The following is an example statement that would be scored +2: “Prior to the start
of the intervention, we all received training on how to implement the intervention. We also will receive a refresher training in another 6 months.”
C14. ACCESS TO KNOWLEDGE AND INFORMATION

**Definition:** Ease of access to information, knowledge, and tools to do the intervention.

**Source:** Key informant interviews (e.g., staff members), observation (e.g., team meetings), and documentation (e.g., manuals, brochures, references, etc.).

**Sample Entry Question(s):** An entry question is a question that can be asked initially to gather information during a key informant interview. Below is a sample entry question that can be asked during a key informant interview:

- “What kind of information and materials about the intervention have already been made available to you?”

**Sample Probing Question(s):** A probing question is a question that can be asked to expand on a response to an entry question, elicit more detailed information, or prompt a key informant to talk. Below are sample probing questions that can be asked during a key informant interview:

- “What kinds of supports are in place to help with this intervention’s implementation?”
- “How easy or hard are these supports to access?”

**Item Response Coding:** Coding of this item requires an understanding of the ease of access to information, knowledge, and tools to do the intervention.

- **Barrier (SCORE -2):** According to multiple key informants, there is no ease of access to information, knowledge, and tools to do the intervention. The following is an example statement that would be scored -2: “We used to have a psychiatrist on staff who we could go to, to get information, ask questions about our patients, and get treatment recommendations. Since he left, we’ve been unable to adequately address the mental health needs of our patients.”

- **Neutral (SCORE 0):** According to multiple key informants, the ease of access to information, knowledge, and tools to do the intervention is varied. For example, the item is scored 0 if responses include a mixture of both barrier and facilitator statements.

- **Facilitator (SCORE +2):** According to multiple key informants, there is an ease of access to information, knowledge, and tools to do the intervention. The following is an example statement that would be scored +2: “Our organization provided us with reference materials after the training, so that we had all the information needed to implement the intervention.”
D. Perceptions of the Clinicians Who Will Use the Intervention

D1. CLINICIAN KNOWLEDGE AND BELIEFS ABOUT THE INTERVENTION

Definition: Clinicians’ attitudes toward the intervention and value placed on the intervention.

Source: Key informant interviews (e.g., staff members) and observation (e.g., team meetings).

Sample Entry Question(s): An entry question is a question that can be asked initially to gather information during a key informant interview. Below is a sample entry question that can be asked during a key informant interview:

- “How do you feel about the intervention being used in your setting?”

Sample Probing Question(s): A probing question is a question that can be asked to expand on a response to an entry question, elicit more detailed information, or prompt a key informant to talk. Below are sample probing questions that can be asked during a key informant interview:

- “Do you feel that you have a good grasp of what the intervention is and how it works?”
- “What are your true thoughts about the intervention?”
- “How confident are you that the intervention will make a difference?”
- “Can you tell me more about what you think of the intervention?”

Item Response Coding: Coding of this item requires an understanding of clinicians’ attitudes towards the intervention and value placed on the intervention.

- Barrier (SCORE -2): According to multiple key informants, clinicians’ have negative attitudes towards the intervention and no value is placed on the intervention. The following is an example statement that would be scored -2: “I’m concerned about the impact of implementing the intervention. For starters, if we implement the intervention our waiting rooms will get overcrowded and our panels are already full. How do they think we’ll be able to see more patients when we’re barely able to see the ones we already have?”

- Neutral (SCORE 0): According to multiple key informants, clinicians’ attitudes towards the intervention and value placed on the intervention is varied. For example, the item is scored 0 if responses include a mixture of both barrier and facilitator statements.
• Facilitator (SCORE +2): According to multiple key informants, clinicians’ have positive attitudes towards the intervention and value is placed on the intervention. The following is an example statement that would be scored +2: “I’m excited that we’re finally implementing the intervention.”
D2. CLINICIAN SELF-EFFICACY

**Definition:** Clinicians’ confidence in their ability to do the intervention and do it well.

**Source:** Key informant interviews (e.g., staff members) and observation (e.g., team meetings).

**Sample Entry Question(s):** An entry question is a question that can be asked initially to gather information during a key informant interview. Below are sample entry questions that can be asked during a key informant interview:

- “How confident are you that you will be able to successfully implement the intervention?”

**Sample Probing Question(s):** A probing question is a question that can be asked to expand on a response to an entry question, elicit more detailed information, or prompt a key informant to talk. Below is a sample probing question that can be asked during a key informant interview:

- “How confident are you to actually do the intervention?”
- “How, if at all, confident do you feel in your ability to do the intervention well?”
- “How easy or hard do you think it will be to do the intervention?”

**Item Response Coding:** Coding of this item requires an understanding of clinicians’ confidence in their ability to the intervention and do it well.

- Barrier (SCORE -2): According to multiple key informants, clinicians’ do not have confidence in their ability to do the intervention and do it well. The following is an example statement that would be scored -2: “I think the new clinician is confident in her ability to do the intervention, but not the others. Most of the providers who have been here for more than 5 years are less confident in their ability to do the intervention.”

- Neutral (SCORE 0): According to multiple key informants, clinicians’ confidence in their ability to do the intervention and do it well is varied. For example, the item is scored 0 if responses include a mixture of both barrier and facilitator statements.

- Facilitator (SCORE +2): According to multiple key informants, clinicians’ are confident in their ability to do the intervention and do it well. The following is an example statement that would be scored +2: “I’m confident in our ability to do the intervention. And it’s not just me, I know that we all feel confident in our ability to do the intervention.”
D3. CLINICIAN STAGE OF MOTIVATION FOR THE INTERVENTION

**Definition:** Clinicians are in the ‘action’ stage of motivation to do this intervention. If already doing, then are at the ‘sustainment’ stage – continuing the implementation.

**Source:** Key informant interviews (e.g., staff members) and observation (e.g., team meetings and staff interactions)

**Sample Entry Question(s):** An entry question is a question that can be asked initially to gather information during a key informant interview. Below is a sample entry question that can be asked during a key informant interview:

- “How prepared are you to use the intervention?”

**Sample Probing Question(s):** A probing question is a question that can be asked to expand on a response to an entry question, elicit more detailed information, or prompt a key informant to talk. Below are sample probing questions that can be asked during a key informant interview:

- “How would you describe your personal readiness for the intervention and its implementation?”
- “What indicators have you seen that signal that the people who are going to be doing this are ready to go?”
- Stage specific: “Can you tell me more about the steps you have taken to prepare for the implementation of the intervention?”
- Stage specific: “Can you tell me more about the steps you have taken for continued or sustained implementation of the intervention?”

**Item Response Coding:** Coding of this item requires an understanding that clinicians are in the ‘action’ stage of motivation to do this intervention. If already doing, then are at the ‘sustainment’ stage – continuing the implementation.

- Barrier (SCORE -2): According to multiple key informants, clinicians are not at the ‘action’ stage of motivation to do this intervention. If already doing, then are not at the ‘sustainment’ stage – continuing the implementation. The following is an example statement that would be scored -2: “I’m not ready for the intervention and its implementation. They didn’t provide us with sufficient trainings and I know a lot of other providers that feel the same way. Why are they rushing the implementation of the intervention? I think they should first make sure that we all are ready for the intervention instead of trying to reach some unrealistic start date.”
• Neutral (SCORE 0): According to multiple key informants, clinicians at the ‘action’ stage of motivation to do this intervention is varied. If already doing, then at the ‘sustainment’ stage – continuing the implementation is varied. For example, the item is scored 0 if responses include a mixture of both barrier and facilitator statements.

• Facilitator (SCORE +2): According to multiple key informants, clinicians are at the ‘action’ stage of motivation to do this intervention. If already doing, then are at the ‘sustainment’ stage – continuing the implementation. The following is an example statement that would be scored +2: “I think a lot of us are ready for the intervention and its implementation. We’ve been telling the organization leadership that we needed this intervention for a while. So, as far as we’re concerned, we’ve been ready for some time.”
D4. CLINICIAN IDENTIFICATION WITH THE PROGRAM

Definition: Clinicians have an “organizational commitment” to their program and see themselves as part of a highly valued group with an important mission.

Source: Key informant interviews (e.g., staff members) and observation (e.g., team meetings).

Sample Entry Question(s): An entry question is a question that can be asked initially to gather information during a key informant interview. Below is a sample entry question that can be asked during a key informant interview:

- Not Available

Sample Probing Question(s): A probing question is a question that can be asked to expand on a response to an entry question, elicit more detailed information, or prompt a key informant to talk. Below are sample probing questions that can be asked during a key informant interview:

- “How much do you personally identify with this organization?
- “How much do you personally identify with this organization’s goals and mission?”
- “What makes you say this?”

Item Response Coding: Coding of this item requires an understanding that clinicians have an “organizational commitment” to their program and see themselves as part of a highly valued group with an important mission.

- Barrier (SCORE -2): According to multiple key informants, clinicians do not have an “organizational commitment” to their program and do not see themselves as part of a highly valued group with an important mission. The following is an example statement that would be scored -2: “It’s not really my dream job, but it’s ok short-term. Plus I need to work.”

- Neutral (SCORE 0): According to multiple key informants, clinicians having an “organizational commitment” to their program and seeing themselves as part of a highly valued group with an important mission is varied. For example, the item is scored 0 if responses include a mixture of both barrier and facilitator statements.

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4 There are no sample questions for Clinician Identification With the Program in the CFIR Interview Guide Tool
• Facilitator (SCORE +2): According to multiple key informants, clinicians have an “organizational commitment” to their program and see themselves as part of a highly valued group with an important mission. The following is an example statement that would be scored +2: “I love working here, we’re a team and the work we do here is important. In fact, I was excited to get back to work after maternity leave.”
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<td><strong>A1. INTERVENTION SOURCE</strong></td>
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<tr>
<td>“What are your thoughts about the intervention?”</td>
<td>❑</td>
<td>❑</td>
<td>❑</td>
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<td>“Who developed the intervention?”</td>
<td>❑</td>
<td>❑</td>
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<tr>
<td>“Is it important whether the intervention was developed by people from your organization or outside your organization? Why or why not?”</td>
<td>❑</td>
<td>❑</td>
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<tr>
<td>“Can you tell me more about your thoughts on how the intervention was developed?”</td>
<td>❑</td>
<td>❑</td>
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<td><strong>A2. EVIDENCE STRENGTH AND QUALITY</strong></td>
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<tr>
<td>“What kind of information or evidence are you aware of that shows whether or not the intervention will work in your setting?”</td>
<td>❑</td>
<td>❑</td>
<td>❑</td>
</tr>
<tr>
<td>“What do you think about the evidence for the effectiveness of this intervention?”</td>
<td>❑</td>
<td>❑</td>
<td>❑</td>
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<tr>
<td>“How convinced are you about its effectiveness?”</td>
<td>❑</td>
<td>❑</td>
<td>❑</td>
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<tr>
<td>“Can you tell me more about your thoughts on the effectiveness of the intervention?”</td>
<td>❑</td>
<td>❑</td>
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❑ = Sample interview question is applicable to this interview source
Text = Sample interview question is modified to be applicable to this interview source
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<tr>
<td>“How does the intervention compare to other similar existing programs in your setting?”</td>
<td>✓</td>
<td>✓</td>
<td></td>
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<tr>
<td>“What are your thoughts about the intervention compared to other options?”</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>“How is implementing the intervention better or worse compared to other options?”</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>“Can you tell me more about how implementing the intervention is better or worse compared to another intervention or what you’re already doing?”</td>
<td>✓</td>
<td></td>
<td>✓</td>
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<tr>
<td><strong>A4. ADAPTABILITY</strong></td>
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<tr>
<td>“What kind of changes or alterations do you think you will need to make to the intervention so it will work effectively in your setting?”</td>
<td>✓</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>“What, if any, are the types of changes or modifications necessary for the intervention to better fit the needs of the organization/providers/patients?”</td>
<td>✓</td>
<td>✓</td>
<td>“What, if any, are the types of changes or modifications necessary for the intervention to better fit your needs?”</td>
</tr>
<tr>
<td>“Do you believe the intervention can modified, if needed? Why or why not?”</td>
<td>✓</td>
<td>✓</td>
<td></td>
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<tr>
<td>“How would these modifications make for a better fit here?”</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>“Can you tell me more about how these modifications make for a better fit here?”</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
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<td><strong>A5. TESTABILITY</strong></td>
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<tr>
<td>“Do you think it would be possible to pilot the intervention before making it available to everyone?”</td>
<td>✓</td>
<td>✓</td>
<td></td>
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<tr>
<td>“What are your thoughts about the intervention first being tested on a small scale?”</td>
<td>✓</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>“Can you tell me more about how the intervention might be tested on a small scale before rolling it out to the whole organization?”</td>
<td>✓</td>
<td>✓</td>
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<td><strong>A6. COMPLEXITY</strong></td>
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<tr>
<td>“How complicated is the intervention?”</td>
<td>✓</td>
<td>✓</td>
<td></td>
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<tr>
<td>“Are there components of the intervention that are more or less complicated than others?”</td>
<td>✓</td>
<td>✓</td>
<td></td>
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<tr>
<td>“What are your thoughts about the intervention’s complexity?”</td>
<td>✓</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>“In terms of its complexity, how would you characterize the intervention?”</td>
<td>✓</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>“Can you tell me more about the intervention in terms of it being simple or straightforward or complex?”</td>
<td>✓</td>
<td>✓</td>
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<td><strong>A7. COST</strong></td>
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<tr>
<td>“What costs will be incurred to implement the intervention?”</td>
<td>✓</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>“What are your thoughts about the cost of the intervention?”</td>
<td>✓</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>“How, if at all, do the costs of the intervention impact implementation?”</td>
<td>✓</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>“Can you tell me more about how costs of the doing this intervention might impact the organization?”</td>
<td>✓</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td><strong>B1. PATIENT NEEDS &amp; RESOURCES</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>“How well do you think the intervention will meet the needs of the individuals served by your organization?”</td>
<td>✓</td>
<td>✓</td>
<td>“How well do you think the intervention will meet the needs of you the individuals served by the organization?”</td>
</tr>
<tr>
<td>“How, if at all, does the intervention fit with your patients’ needs, preferences and resources?”</td>
<td>✓</td>
<td>✓</td>
<td>“How, if at all, does the intervention fit with your needs, preferences and resources?”</td>
</tr>
<tr>
<td>“Can you tell me more about how patient needs, preferences and resources might be addressed by the intervention?”</td>
<td>✓</td>
<td>✓</td>
<td>“Can you tell me more about how your needs, preferences and resources might be addressed by the intervention?”</td>
</tr>
<tr>
<td><strong>B2. NETWORK CONNECTIVITY</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>“What kind of information exchange do you have with others outside your setting, whether related to the intervention, or more generally about your profession?”</td>
<td>✓</td>
<td>✓</td>
<td></td>
</tr>
</tbody>
</table>
### CFIR INDEX MANUAL

<table>
<thead>
<tr>
<th>CFIR Index Dimension/Item Interview Questions</th>
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<th>Agency/Program/Clinical Director Interview Questions</th>
<th>Consumer/Patient Interview Questions</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>B2. NETWORK CONNECTIVITY, CONT.</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>“How, if at all, connected is your organization with other similar health care organizations?”</td>
<td>✓</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>“To what extent is the program connected with other organizations?”</td>
<td>✓</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>“What type of networks are in place that connect you with other organizations?”</td>
<td>✓</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>“Can you tell me more about how connected your organization is with others?”</td>
<td>✓</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>“Could you describe how the different type of networks work?”</td>
<td>✓</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td><strong>B3. PEER PRESSURE</strong></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>“Can you tell me what you know about any other organizations that have implemented the intervention or other similar programs?”</td>
<td>✓</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>“Are you aware of other organizations that have implemented the intervention?”</td>
<td>✓</td>
<td>✓</td>
<td></td>
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<tr>
<td>“What are your thoughts about other organizations that have implemented the intervention?”</td>
<td>✓</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>“To what extent does the pressure to keep up with other agencies impact your decision to implement the intervention?”</td>
<td>✓</td>
<td>✓</td>
<td></td>
</tr>
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<tr>
<td><strong>B3. PEER PRESSURE, CONT.</strong></td>
<td></td>
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<tr>
<td>“Can you tell me more about how your organization compares to other organizations?”</td>
<td>✓</td>
<td></td>
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</tr>
<tr>
<td><strong>B4. EXTERNAL POLICY &amp; INCENTIVES</strong></td>
<td></td>
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<tr>
<td>“What kind of financial or other incentives influenced the decision to implement the intervention?”</td>
<td>✓</td>
<td></td>
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</tr>
<tr>
<td>“How, if at all, have policies and incentives influenced the implementation of the intervention?”</td>
<td>✓</td>
<td></td>
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</tr>
<tr>
<td>“What are the different types of policies and incentives that influenced the decision to implement the intervention?”</td>
<td>✓</td>
<td></td>
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</tr>
<tr>
<td>“Can you tell me more about the impact they’ve had on the decision to implement the intervention?”</td>
<td>✓</td>
<td></td>
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</tr>
<tr>
<td>“Do you see these factors as supportive or inhibiting?”</td>
<td>✓</td>
<td></td>
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<tr>
<td><strong>C1. STRUCTURAL CHARACTERISTICS</strong></td>
<td></td>
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<tr>
<td>“How will the infrastructure of your organization (social architecture, age, maturity, size, or physical layout) affect the implementation of the intervention?”</td>
<td>✓</td>
<td></td>
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</tr>
<tr>
<td>“How would things like the size or history of your organization influence your implementing this intervention?”</td>
<td>✓</td>
<td></td>
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<tr>
<td><strong>C1. STRUCTURAL CHARACTERISTICS, CONT.</strong></td>
<td></td>
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</tr>
<tr>
<td>“Can you tell me more about how program characteristics might influence the implementation of the intervention?”</td>
<td>✓</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>“Do you imagine it could make it easier or harder?”</td>
<td>✓</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td><strong>C2. NETWORKS &amp; COMMUNICATION</strong></td>
<td></td>
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</tr>
<tr>
<td>“Can you describe your working relationships with your colleagues?”</td>
<td>✓</td>
<td>✓</td>
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</tr>
<tr>
<td>“How would you describe the quality of communication with others in your organization?”</td>
<td>✓</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>“Can you tell me more about how information is communicated within your agency?”</td>
<td>✓</td>
<td>✓</td>
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</tr>
<tr>
<td><strong>C3. CULTURE</strong></td>
<td></td>
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</tr>
<tr>
<td>“How would you describe the culture of your organization? Of your own setting or unit?”</td>
<td>✓</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>“How, if at all, does the culture here impact the implementation of the intervention?”</td>
<td>✓</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>“Can you tell me more about your organization’s culture?”</td>
<td>✓</td>
<td>✓</td>
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<tr>
<td><strong>C4. IMPLEMENTATION CLIMATE</strong></td>
<td></td>
<td></td>
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<tr>
<td>“What is the general receptivity in your organization to implementing the intervention?”</td>
<td>✓</td>
<td>✓</td>
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</tr>
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<tr>
<td>&quot;C4. IMPLEMENTATION CLIMATE, CONT.&quot;</td>
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<tr>
<td>“How committed is the program to ongoing improvement in general?”</td>
<td>✔</td>
<td>✔</td>
<td></td>
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<tr>
<td>“What kinds of things would you say are good examples of this?”</td>
<td>✔</td>
<td>✔</td>
<td></td>
</tr>
<tr>
<td>“Can you tell me more about the type of ongoing improvements being made here?”</td>
<td>✔</td>
<td>✔</td>
<td></td>
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<tr>
<td>&quot;C5. TENSION FOR CHANGE&quot;</td>
<td></td>
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</tr>
<tr>
<td>“Is there a strong need for the intervention?”</td>
<td>✔</td>
<td>✔</td>
<td>✔</td>
</tr>
<tr>
<td>“How bad or at least sub-optimal is the current situation that this intervention could potentially remedy?”</td>
<td>✔</td>
<td>✔</td>
<td>✔</td>
</tr>
<tr>
<td>“How would you describe the current situation in terms of changes needed?”</td>
<td>✔</td>
<td>✔</td>
<td>✔</td>
</tr>
<tr>
<td>“How imperative or critical is making this change?”</td>
<td>✔</td>
<td>✔</td>
<td>✔</td>
</tr>
<tr>
<td>“Can you tell me more about what changes your organization needs to make?”</td>
<td>✔</td>
<td>✔</td>
<td></td>
</tr>
<tr>
<td>“Can you tell me more about what changes this organization needs to make?”</td>
<td></td>
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<tr>
<td>&quot;C6. COMPATIBILITY&quot;</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>“How well does the intervention fit with your values and norms and the values and norms within the organization?”</td>
<td>✔</td>
<td>✔</td>
<td></td>
</tr>
<tr>
<td>“How does the intervention fit with the current state practice or philosophy of the organization?”</td>
<td>✔</td>
<td>✔</td>
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<tr>
<td><strong>C6. COMPATIBILITY, CONT.</strong></td>
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</tr>
<tr>
<td>“Would you say it’s compatible or really quite different from “business-as-usual”?”</td>
<td>✓</td>
<td></td>
<td>✓</td>
</tr>
<tr>
<td>“What kinds of things would you say are good examples of this?”</td>
<td>✓</td>
<td></td>
<td>✓</td>
</tr>
<tr>
<td>“Can you tell me more about fit of the intervention?”</td>
<td>✓</td>
<td></td>
<td>✓</td>
</tr>
<tr>
<td><strong>C7. RELATIVE PRIORITY</strong></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>“To what extent might the implementation take a backseat to other high-priority initiatives going on now?”</td>
<td>✓</td>
<td></td>
<td>✓</td>
</tr>
<tr>
<td>“With all the things and pressures in your work, how much of a priority is implementing this practice?”</td>
<td>✓</td>
<td></td>
<td>✓</td>
</tr>
<tr>
<td>“How does it compare with other priorities?”</td>
<td>✓</td>
<td></td>
<td>✓</td>
</tr>
<tr>
<td><strong>C8. ORGANIZATIONAL INCENTIVES</strong></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>“What kinds of incentives are there to help ensure that the implementation of the intervention is successful?”</td>
<td>✓</td>
<td></td>
<td>✓</td>
</tr>
<tr>
<td>“Are there any incentives to staff for doing the intervention?”</td>
<td>✓</td>
<td></td>
<td>✓</td>
</tr>
<tr>
<td>“Are there specific incentives that would motivate you and other staff?”</td>
<td>✓</td>
<td></td>
<td>✓</td>
</tr>
<tr>
<td>“Are there specific incentives that would motivate your staff?”</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>“Can you tell me more about how incentives might help to ensure the implementation of the intervention?”</td>
<td>✓</td>
<td></td>
<td>✓</td>
</tr>
<tr>
<td>CFIR Index Dimension/Item Interview Questions</td>
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<tr>
<td><strong>C9. GOALS &amp; FEEDBACK</strong></td>
<td></td>
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</tr>
<tr>
<td>“Have you/your unit/your organization set goals related to the implementation of the intervention?”</td>
<td>✓</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>“How are practice or quality goals communicated to staff in this organization?”</td>
<td>✓</td>
<td></td>
<td></td>
</tr>
<tr>
<td>“Is feedback provided about how progress is being made, or not, to reach the target goals?”</td>
<td>✓</td>
<td></td>
<td></td>
</tr>
<tr>
<td>“What type of feedback have you received about the status of the intervention implementation?”</td>
<td>✓</td>
<td></td>
<td></td>
</tr>
<tr>
<td>“How, if at all, has this influenced the implementation of the intervention?”</td>
<td>✓</td>
<td></td>
<td>✓</td>
</tr>
<tr>
<td><strong>C10. LEARNING CLIMATE</strong></td>
<td></td>
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</tr>
<tr>
<td>“To what extent do you feel like you can try new things to improve your work processes?”</td>
<td>✓</td>
<td></td>
<td>✓</td>
</tr>
<tr>
<td>“How does your organization deal with education and training needs?”</td>
<td>✓</td>
<td></td>
<td></td>
</tr>
<tr>
<td>“How, if at all, does the organization support an inquisitive and open-minded learning climate?”</td>
<td>✓</td>
<td></td>
<td></td>
</tr>
<tr>
<td>“Can you tell me more about the ways in which your organization encourages getting new skills and knowledge?”</td>
<td>✓</td>
<td></td>
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</tbody>
</table>
## C11. READINESS FOR IMPLEMENTATION

<table>
<thead>
<tr>
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<th>Consumer/Patient Interview Questions</th>
</tr>
</thead>
<tbody>
<tr>
<td>“How ready is your organization for this implementation?”</td>
<td>✓</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>“What, if any, type of indicators have you seen that signal the organization is ready-to-go and committed to implement the intervention?”</td>
<td>✓</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Stage specific: “Can you tell me more about the steps the organization has taken to prepare for the implementation of the intervention?”</td>
<td>✓</td>
<td>✓</td>
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</tr>
<tr>
<td>Stage specific: “Can you tell me more about the steps the organization has taken for continued or sustained implementation of the intervention?”</td>
<td>✓</td>
<td>✓</td>
<td></td>
</tr>
</tbody>
</table>

## C12. LEADERSHIP ENGAGEMENT

<table>
<thead>
<tr>
<th>CFIR Index Dimension/Item Interview Questions</th>
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<th>Consumer/Patient Interview Questions</th>
</tr>
</thead>
<tbody>
<tr>
<td>“What level of involvement has leadership at your organization has so far with the intervention?”</td>
<td>✓</td>
<td></td>
<td>✓</td>
</tr>
<tr>
<td>“How would you describe the commitment or support of your organization’s leadership (managers, supervisors, or other people at the top)?”</td>
<td>✓</td>
<td></td>
<td>✓</td>
</tr>
<tr>
<td>“To what extent is leadership involved in implementing the intervention?”</td>
<td>✓</td>
<td></td>
<td></td>
</tr>
<tr>
<td>“What level of involvement have you or other leadership at your organization have so far with the intervention?”</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>“How would you describe the commitment or support of you and others in the organization’s leadership (managers, supervisors, or other people at the top)?”</td>
<td></td>
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</tr>
<tr>
<td>“To what extent are you and other leaders involved in implementing the intervention?”</td>
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<tr>
<td><strong>C12. LEADERSHIP ENGAGEMENT, CONT.</strong></td>
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<tr>
<td>“How would you know if this is really a priority for your leadership?”</td>
<td>✓</td>
<td></td>
<td></td>
</tr>
<tr>
<td>“How would you know if this is really important to the people at the top?”</td>
<td>✓</td>
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<tr>
<td><strong>C13. RESOURCE AVAILABILITY</strong></td>
<td></td>
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</tr>
<tr>
<td>“Do you expect to have sufficient resources to implement and administer the intervention?”</td>
<td>✓ ✓</td>
<td></td>
<td></td>
</tr>
<tr>
<td>“How would you describe the level of resources dedicated to implementation the intervention?”</td>
<td>✓ ✓</td>
<td></td>
<td></td>
</tr>
<tr>
<td>“Do you think the dedicated resources are adequate?”</td>
<td>✓ ✓</td>
<td></td>
<td></td>
</tr>
<tr>
<td>“Do you think the dedicated resources are inadequate?”</td>
<td>✓ ✓</td>
<td></td>
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</tr>
<tr>
<td><strong>C14. ACCESS TO KNOWLEDGE &amp; INFORMATION</strong></td>
<td></td>
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</tr>
<tr>
<td>“What kind of information and materials about the intervention have already been made available to you?”</td>
<td>✓ ✓</td>
<td></td>
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</tr>
<tr>
<td>“What kinds of supports are in place to help with this intervention’s implementation?”</td>
<td>✓ ✓</td>
<td></td>
<td></td>
</tr>
<tr>
<td>“How easy or hard are these supports to access?”</td>
<td>✓ ✓</td>
<td></td>
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</tr>
<tr>
<td><strong>D1. CLINICIAN KNOWLEDGE &amp; BELIEFS ABOUT THE INTERVENTION</strong></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>“How do you feel about the intervention being used in your setting?”</td>
<td>✓</td>
<td>“How do clinicians feel about the intervention being used in your setting?”</td>
<td></td>
</tr>
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<tr>
<td><strong>D1. CLINICIAN KNOWLEDGE &amp; BELIEFS ABOUT THE INTERVENTION, CONT.</strong></td>
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</tr>
<tr>
<td>“Do you feel that you have a good grasp of what the intervention is and how it works?”</td>
<td>✔</td>
<td>“Do you feel that clinicians have a good grasp of what the intervention is and how it works?”</td>
<td></td>
</tr>
<tr>
<td>“What are your true thoughts about the intervention?”</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>“How confident are you that the intervention will make a difference?”</td>
<td>✔</td>
<td>“How confident do you think clinicians are that the intervention will make a difference?”</td>
<td></td>
</tr>
<tr>
<td>“Can you tell me more about what you think of the intervention?”</td>
<td>✔</td>
<td>“Can you tell me more about what clinicians think of the intervention?”</td>
<td></td>
</tr>
<tr>
<td><strong>D2. CLINICIAN SELF-EFFICACY</strong></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>“How confident are you that you will be able to successfully implement the intervention?”</td>
<td>✔</td>
<td>“How confident are you that clinicians will be able to successfully implement the intervention?”</td>
<td></td>
</tr>
<tr>
<td>“How confident are you to actually do the intervention?”</td>
<td>✔</td>
<td>“How confident do you think clinicians are to actually do the intervention?”</td>
<td></td>
</tr>
<tr>
<td>“How, if at all, confident do you feel in your ability to do the intervention well?”</td>
<td>✔</td>
<td>“How, if at all, confident do you feel in clinicians’ ability to do the intervention well?”</td>
<td></td>
</tr>
<tr>
<td>“How easy or hard do you think it will be to do the intervention?”</td>
<td>✔</td>
<td>“How easy or hard do clinicians think it will be to do the intervention?”</td>
<td></td>
</tr>
<tr>
<td>CFIR Index Dimension/Item Interview Questions</td>
<td>Clinician Interview Questions</td>
<td>Agency/Program/Clinical Director Interview Questions</td>
<td>Consumer/Patient Interview Questions</td>
</tr>
<tr>
<td>------------------------------------------------------</td>
<td>-------------------------------</td>
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<td>---------------------------------------</td>
</tr>
<tr>
<td><strong>D3. CLINICIAN STAGE OF MOTIVATION FOR THE INTERVENTION</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>“How prepared are you to use the intervention?”</td>
<td>❑</td>
<td></td>
<td></td>
</tr>
<tr>
<td>“How would you describe your personal readiness for the intervention and its implementation?”</td>
<td>❑</td>
<td></td>
<td></td>
</tr>
<tr>
<td>“What indicators have you seen that signal that the people who are going to be doing this are ready to go?”</td>
<td>❑</td>
<td>❑</td>
<td></td>
</tr>
<tr>
<td>Stage specific: “Can you tell me more about the steps you have taken to prepare for the implementation of the intervention?”</td>
<td>❑</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Stage specific: “Can you tell me more about the steps clinicians have taken to prepare for the implementation of the intervention?”</td>
<td>❑</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Stage specific: “Can you tell me more about the steps you have taken for continued or sustained implementation of the intervention?”</td>
<td>❑</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Stage specific: “Can you tell me more about the steps clinicians have taken for continued or sustained implementation of the intervention?”</td>
<td>❑</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>D4. CLINICIAN IDENTIFICATION WITH THE PROGRAM</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>“How much do you personally identify with this organization?”</td>
<td>❑</td>
<td></td>
<td></td>
</tr>
<tr>
<td>“How much do you personally identify with this organization’s goals and mission?”</td>
<td>❑</td>
<td></td>
<td></td>
</tr>
<tr>
<td>“What makes you say this?”</td>
<td>❑</td>
<td>❑</td>
<td></td>
</tr>
</tbody>
</table>
REFERENCES


The Consolidated Framework for Implementation Research (CFIR) Index is a quantitative measure of barriers and facilitators to an implementation process. The CFIR Index is based on the CFIR model developed by Laura Damschroder and colleagues (2009).

The CFIR Index can be used at any stage of implementation and can be used in various settings. The CFIR Index consists of 29 items across four dimensions. The four dimensions are: 1) Perceptions of the Intervention (i.e., the evidence-based intervention, guideline, or FDA approved medication to be implemented); 2) Perceptions of the System & Community (i.e., systems, community, and economic aspects to the implementation of the intervention); 3) Perceptions of the Program (i.e., organizational aspects such as leadership, climate, and readiness); and 4) Perceptions of the Clinicians Who Will Use the Intervention (i.e., workforce, workflow, and self-efficacy). Each item is ranked on a scale from -2 (barrier) to 0 (neutral) to +2 (facilitator).

Data are collected during site visits to organizations. CFIR Index ratings are based on interviews with key informants, rapid ethnographic observations, and document review. Scores are derived for each item (29) and dimension (4).

CFIR Index summary data can be used to document baseline barriers and facilitators, tailor implementation strategies, and/or to examine mediators and moderators of implementation outcomes.
## A. PERCEPTIONS OF THE INTERVENTION

<table>
<thead>
<tr>
<th>Measure</th>
<th>Observations/Comments</th>
<th>Barrier</th>
<th>Neutral</th>
<th>Facilitator</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>A1. Intervention Source</strong></td>
<td>There is a perceived advantage of the intervention being developed, either internally (within the organization) or externally (from an outside source)</td>
<td>-2</td>
<td>-1</td>
<td>0</td>
</tr>
<tr>
<td><strong>A2. Evidence strength and quality</strong></td>
<td>Belief in the strength of evidence for the intervention’s effectiveness.</td>
<td>-2</td>
<td>-1</td>
<td>0</td>
</tr>
<tr>
<td><strong>A3. Relative Advantage</strong></td>
<td>Belief in the advantage of implementing the intervention versus another option.</td>
<td>-2</td>
<td>-1</td>
<td>0</td>
</tr>
<tr>
<td><strong>A4. Adaptability</strong></td>
<td>Belief that the intervention can be adapted, modified, or refined to better fit the organization, treatment providers, or patient needs.</td>
<td>-2</td>
<td>-1</td>
<td>0</td>
</tr>
<tr>
<td><strong>A5. Testability</strong></td>
<td>Belief that the intervention can first be tested on a small scale and then abandoned if it fails.</td>
<td>-2</td>
<td>-1</td>
<td>0</td>
</tr>
<tr>
<td><strong>A6. Complexity</strong></td>
<td>Belief that the intervention is complicated and highly complex.</td>
<td>-2</td>
<td>-1</td>
<td>0</td>
</tr>
<tr>
<td><strong>A7. Cost</strong></td>
<td>Cost of the intervention including the costs associated with implementing it.</td>
<td>-2</td>
<td>-1</td>
<td>0</td>
</tr>
</tbody>
</table>
## B. PERCEPTIONS OF THE SYSTEM & COMMUNITY

<table>
<thead>
<tr>
<th>Measure</th>
<th>Observations/Comments</th>
<th>Barrier</th>
<th>Neutral</th>
<th>Facilitator</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>B1. Patient needs and resources</strong></td>
<td>Belief that the intervention fits with patient needs, preferences and resources.</td>
<td>-2</td>
<td>-1</td>
<td>0</td>
</tr>
<tr>
<td><strong>B2. Network connectivity</strong></td>
<td>The degree to which the program is connected with other similar health care organizations, such as through ACOs, provider associations or regional affiliations.</td>
<td>-2</td>
<td>-1</td>
<td>0</td>
</tr>
<tr>
<td><strong>B3. Peer pressure</strong></td>
<td>Perception that there is competitive pressure to adopt this intervention or to keep up with other agencies within the system.</td>
<td>-2</td>
<td>-1</td>
<td>0</td>
</tr>
<tr>
<td><strong>B4. External policy and incentives</strong></td>
<td>System wide influences exist, such as through policy and service reimbursement, to implement the intervention.</td>
<td>-2</td>
<td>-1</td>
<td>0</td>
</tr>
</tbody>
</table>
## C. PERCEPTIONS OF THE PROGRAM

<table>
<thead>
<tr>
<th>Measure</th>
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<th>Neutral</th>
<th>Facilitator</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>C1. Structural characteristics</strong></td>
<td>The social structure, age, maturity, and size of the program.</td>
<td>-2</td>
<td>-1</td>
<td>0</td>
</tr>
<tr>
<td><strong>C2. Networks and communications</strong></td>
<td>The strength and adhesiveness of social networks, as demonstrated by formal and informal communications within the program.</td>
<td>-2</td>
<td>-1</td>
<td>0</td>
</tr>
<tr>
<td><strong>C3. Culture</strong></td>
<td>Beliefs, values, ethics and basic assumptions within the program that welcome the intervention.</td>
<td>-2</td>
<td>-1</td>
<td>0</td>
</tr>
<tr>
<td><strong>C4. Implementation climate</strong></td>
<td>The program’s capacity to make changes, including a shared vision of the need for improvement and commitment to the program’s growth.</td>
<td>-2</td>
<td>-1</td>
<td>0</td>
</tr>
<tr>
<td><strong>C5. Tension for change</strong></td>
<td>Belief that the current situation definitely needs to change.</td>
<td>-2</td>
<td>-1</td>
<td>0</td>
</tr>
<tr>
<td><strong>C6. Compatibility</strong></td>
<td>The degree to which the intervention fits within existing workflows and operations.</td>
<td>-2</td>
<td>-1</td>
<td>0</td>
</tr>
<tr>
<td><strong>C7. Relative priority</strong></td>
<td>The belief that the intervention is a high priority for the program to implement.</td>
<td>-2</td>
<td>-1</td>
<td>0</td>
</tr>
</tbody>
</table>
### C. PERCEPTIONS OF THE PROGRAM, CONT.

<table>
<thead>
<tr>
<th>Measure</th>
<th>Observations/Comments</th>
<th>Barrier</th>
<th>Neutral</th>
<th>Facilitator</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>C8. Organizational incentives</strong></td>
<td>Program incentives provided to staff for doing the intervention, both concrete (such as money, awards, promotions, etc.) and prestige (such as stature and respect).</td>
<td>-2</td>
<td>-1</td>
<td>0</td>
</tr>
<tr>
<td><strong>C9. Goals and feedback</strong></td>
<td>The degree to which the program clearly communicates goals to staff and provides them with feedback.</td>
<td>-2</td>
<td>-1</td>
<td>0</td>
</tr>
<tr>
<td><strong>C10. Learning climate</strong></td>
<td>An inquisitive, curious and open-minded learning climate exists across the program.</td>
<td>-2</td>
<td>-1</td>
<td>0</td>
</tr>
<tr>
<td><strong>C11. Readiness for implementation</strong></td>
<td>The program is at the 'action' stage of implementing this intervention. Practices that have already implemented the intervention may be at the 'sustainment' stage – continuation of 'action.'</td>
<td>-2</td>
<td>-1</td>
<td>0</td>
</tr>
<tr>
<td><strong>C12. Leadership engagement</strong></td>
<td>Commitment, involvement, and accountability of leaders and managers for the intervention's implementation.</td>
<td>-2</td>
<td>-1</td>
<td>0</td>
</tr>
<tr>
<td><strong>C13. Resource availability</strong></td>
<td>The level of resources dedicated for implementation, including money, training, physical space, and time.</td>
<td>-2</td>
<td>-1</td>
<td>0</td>
</tr>
<tr>
<td><strong>C14. Access to knowledge and information</strong></td>
<td>Ease of access to information, knowledge, and tools to do the intervention.</td>
<td>-2</td>
<td>-1</td>
<td>0</td>
</tr>
</tbody>
</table>
## D. PERCEPTIONS OF THE CLINICIANS WHO WILL USE THE INTERVENTION

<table>
<thead>
<tr>
<th>Measure</th>
<th>Observations/Comments</th>
<th>Barrier</th>
<th>Neutral</th>
<th>Facilitator</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>D1. Clinician knowledge and beliefs about the intervention</strong></td>
<td>Clinicians’ attitudes toward the intervention and value placed on the intervention.</td>
<td>-2</td>
<td>-1</td>
<td>0</td>
</tr>
<tr>
<td><strong>D2. Clinician self-efficacy</strong></td>
<td>Clinicians’ confidence in their ability to do the intervention and do it well.</td>
<td>-2</td>
<td>-1</td>
<td>0</td>
</tr>
<tr>
<td><strong>D3. Clinician stage of motivation for the intervention</strong></td>
<td>Clinicians are in the ‘action’ stage of motivation to do this intervention. If already doing, then are at the ‘sustainment’ stage – continuing the implementation.</td>
<td>-2</td>
<td>-1</td>
<td>0</td>
</tr>
<tr>
<td><strong>D4. Clinician identification with the program</strong></td>
<td>Clinicians have an “organizational commitment” to their program and see themselves as part of a highly valued group with an important mission.</td>
<td>-2</td>
<td>-1</td>
<td>0</td>
</tr>
</tbody>
</table>
**BENCHMARK SUMMARY >>**

 Agency: ________________________________  Date of Review: _____ / ____ / _____
 Program: ________________________________
 Rater(s): ________________________________

 Name of Intervention/Service being implemented: ___________________________________________________

<table>
<thead>
<tr>
<th>A. Perceptions of the Intervention</th>
<th>C. Perceptions of the Program</th>
</tr>
</thead>
<tbody>
<tr>
<td>A1. _____</td>
<td>C1.</td>
</tr>
<tr>
<td>A2. _____</td>
<td>C2.</td>
</tr>
<tr>
<td>A3. _____</td>
<td>C3.</td>
</tr>
<tr>
<td>A4. _____</td>
<td>C4.</td>
</tr>
<tr>
<td>A5. _____</td>
<td>C5.</td>
</tr>
<tr>
<td>A7. _____</td>
<td>C7.</td>
</tr>
<tr>
<td>Sum Total= ___</td>
<td>Total/7= ___</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>B. Perceptions of the System &amp; Community</th>
<th>D. Perceptions of the Clinicians Who Will Use the Intervention</th>
</tr>
</thead>
<tbody>
<tr>
<td>B1. _____</td>
<td>D1.</td>
</tr>
<tr>
<td>B2. _____</td>
<td>D2.</td>
</tr>
<tr>
<td>B3. _____</td>
<td>D3.</td>
</tr>
<tr>
<td>B4. _____</td>
<td>D4.</td>
</tr>
<tr>
<td>Sum Total= ___</td>
<td>Total/4= ___</td>
</tr>
</tbody>
</table>

D. Perceptions of the Clinicians Who Will Use the Intervention

 Sum Total= ___  
 Total/4= ___

Additional Comments:

For more information on the CFIR Index, including the CFIR Index Manual for Administration and Scoring, please contact:

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