

Introduction to Implementation Outcomes

Implementation outcomes provide a framework for evaluating the effectiveness and sustainability of TRIP projects as they move from research into real-world practice. These outcomes assess how interventions are adopted, delivered, and integrated within health programs.

Implementation outcomes focus on the processes and factors that influence how an intervention is implemented, rather than its direct effects on health. This distinguishes them from process outcomes and intervention outcomes. Process outcomes focus on the steps and pathways that are involved in implementing the intervention. Intervention outcomes include (a) clinical outcomes, which measure changes in health conditions, and (b) service outcomes, which assess impacts on service delivery. Together, these measures help determine not only whether an intervention works, but how well it performs across real-world settings and contexts.

Proctor's implementation outcomes framework includes the following domains: acceptability, adoption, appropriateness, feasibility, fidelity, implementation cost, penetration, and sustainability.

Implementation Outcomes	Service Outcomes	Clinical Outcomes
•Acceptability •Adoption •Appropriateness •Feasibility •Fidelity •Implementation cost •Penetration •Sustainability	•Efficiency •Access •Equity •Safety •Timeliness •Cost-effectiveness	•Symptom improvement •Disease control •Functional status •Quality of Life •Morbidity / Mortality

Find out more



[Outcomes for implementation research: conceptual distinctions, measurement challenges, and research agenda \(Proctor et al., 2011\)](#)



[Ten years of implementation outcomes research: a scoping review \(Proctor et al., 2023\)](#)

Implementation Outcomes: Quick Look

	Acceptability	Adoption	Appropriateness	Feasibility	Fidelity	Implementation cost	Penetration	Sustainability
	<i>How do staff, patients, or stakeholders feel about this?</i>	<i>Did anyone take up this intervention?</i>	<i>Is this the right solution for this context?</i>	<i>Can we realistically deliver this with our time, staff, and resources?</i>	<i>Are we doing this the way it's supposed to be done?</i>	<i>What does it cost to run this?</i>	<i>How much of our target group are we reaching?</i>	<i>Is this still happening months or years later?</i>
What	Whether the target population perceives the intervention as acceptable or satisfactory.	Whether people or organisations start using the intervention.	How well the intervention fits the setting or population.	How practical it is to deliver the intervention as planned.	How closely the intervention is delivered as intended.	The total cost of delivering the intervention.	How widely the intervention is used within the target setting or population.	Whether the intervention continues over time.
How	Surveys, interviews, focus groups	Logs, surveys	Interviews, focus groups, surveys	Feedback, checklists, scales	Direct observation, fidelity checklists, reviewing documentation	Budget analysis, tracking tools	Participation, referrals, patient engagement	Stakeholder interviews, follow-up surveys, usage, continued funding
When	Planning Implementation Evaluation	Implementation	Implementation	Implementation	Implementation	Planning Implementation	Evaluation Sustainability	Evaluation
Why	If people don't like or accept an intervention, they're unlikely to use it properly - or at all.	Interventions have no impact if no one uses them.	An intervention may work well in one setting/context but not another.	An intervention won't last if it cannot be implemented.	To determine whether the impact of an intervention is due to the intervention or its delivery.	To determine whether an intervention can be scaled up or continued long term.	To ensure the intervention reaches all who can benefit from it.	To promote continued use of the intervention on project completion.

An Overview of Implementation Outcomes

ACCEPTABILITY

“How do staff, patients, or stakeholders feel about this?”

What is it?

Acceptability is the perception among stakeholders that a given intervention is acceptable, palatable, or satisfactory.

What is it asking?

Do people *like* the intervention?

Do they find it acceptable and satisfactory?

How is it measured?

Quantitative measures

e.g. surveys with Likert scales reflecting stakeholders' satisfaction.

Qualitative measures

e.g. interviews or focus groups about experiences and opinions.

When does it get measured?

Planning phase (to shape the intervention based on stakeholder feedback).

Implementation phase.

Evaluation phase (e.g., to review the outcome of a pilot).

Why does it matter?

Acceptability is an important outcome to consider when an intervention's success depends heavily on the approval and engagement of the target population or healthcare providers. If people don't like or accept an intervention, they're unlikely to use it properly—or at all.

What is it also known as?

Satisfaction.

ADOPTION

“Did anyone actually take up this intervention?”

What is it?

Adoption implies the intention, initial decision, or action to try a new intervention.

What is it asking?

Are people or organisations *starting to use* the intervention?

How is it measured?

At the individual, service provider, or organisational level, using:

Implementation logs

e.g. count of participants or sites using it

Surveys

e.g. willingness to try it

When does it get measured?

At the beginning of implementation.

Repeated over time to track ongoing engagement and identify barriers and enablers to engagement with the intervention, especially when scaling up an effective intervention.

Why does it matter?

Even the best intervention has no impact if no one uses it.

What is it also known as?

Uptake, initiation.

APPROPRIATENESS

“Is this the right solution for this context?”

What is it?

Appropriateness reflects the perceived fit or relevance of the intervention for a specific context or population.

What is it asking?

How well does the intervention *fit* the setting, population, or problem?

How is it measured?

Qualitative methods

e.g. Interviews/focus groups with stakeholders.

Quantitative ratings

e.g. Surveys to population groups asking about relevance and fit.

When does it get measured?

Throughout the implementation process, particularly in the exploratory phase.

Why does it matter?

An intervention may work well somewhere else but not make sense in your setting.

What is it also known as?

Fit, suitability, relevance.

FEASIBILITY

“Can we realistically deliver this with our time, staff, and resources?”

What is it?

Feasibility considers the practicality of delivering an intervention and whether it can be implemented as intended.

What is it asking?

Can the intervention be done in practice?

How is it measured?

At organisational or community level, using:

Qualitative methods

e.g. Feedback regarding barriers and challenges.

Quantitative ratings

e.g. Checklists or scales to evaluate resources (time, staffing, resources).

When does it get measured?

During pilot testing or the introduction of new interventions.

During initial implementation and/or if adaptations occur.

Why does it matter?

If something isn't feasible, it won't be sustained.

What is it also known as?

Practicality, implementability.

FIDELITY

“Are we doing it the way it’s supposed to be done?”

What is it?

Fidelity is the degree to which an intervention is delivered as intended.

What is it asking?

Was the intervention delivered *as it was intended*?

How is it measured?

At the individual or program level, using direct observation, fidelity checklists (e.g., self-report or auditing), or by reviewing documentation or recordings.

When does it get measured?

Throughout implementation, ensure adherence to protocols.

When evaluating effectiveness, one must ensure that outcomes are due to the intervention rather than variations in delivery.

Why does it matter?

If the intervention changes, it becomes unclear whether outcomes are due to the intervention or its delivery.

What is it also known as?

Compliance, adherence.

IMPLEMENTATION COST

“What does it cost to run this?”

What is it?

Implementation cost encompasses all expenses associated with delivering an intervention, including personnel, materials, and overhead costs.

What is it asking?

How much does it cost to put the intervention into practice?

How is it measured?

Costs associated with staff time, training, materials and equipment, and overheads are often measured through budget analyses and tracking tools.

When does it get measured?

Can be measured at program and organisational levels, during the planning phase and throughout implementation, to monitor budget adherence and identify cost variances.

Why does it matter?

Costs affect whether an intervention can be scaled up or continued long-term.

What is it also known as?

Financial investment, economic cost.

PENETRATION

“How much of our target group are we reaching?”

What is it?

Penetration refers to the integration of an intervention within a specific setting and the extent to which it has reached its target population.

What is it asking?

How widely is the intervention used within a setting or population?

How is it measured?

At the organisational level or the level of targeted communities, using metrics such as:

Participation rates

Referrals

Patient engagement

Use across clinics, units, or communities

When does it get measured?

When evaluating long-term adoption or need to expand the reach of an intervention.

Why does it matter?

An intervention may exist but only reach a small portion of those who could benefit. Penetration metrics can inform the value of long-term adoption or potential to expand reach.

What is it also known as?

Reach, integration.

SUSTAINABILITY

“Is this still happening months or years later?”

What is it?

Sustainability reflects the extent to which an intervention continues to be delivered over time after initial implementation.

What is it asking?

Can the intervention continue after the initial rollout?

How is it measured?

At the individual, community, or organisational level, using:

Qualitative methods

e.g. interviews with stakeholders about the ongoing support for the intervention.

Quantitative methods

e.g. Follow-up surveys, continued usage statistics, evidence of continued funding.

When does it get measured?

After implementation (although plan for sustainability from initiation).

During long-term follow-up.

Why does it matter?

Short-term success doesn't help if the intervention stops once funding or enthusiasm ends.

What is it also known as?

Longevity, continuation, enduring effects.

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