

The Select Tool

Instructions

Follow the steps below in order to narrow down which implementation strategies will best address the barriers and facilitators to your evidence-based practice.

When using the Select Tool and designing an intervention, work with a diverse group of people who are involved in and impacted by the practice change. Involving different perspectives will help identify ways to make the implementation intervention more effective.

When reflecting on barriers and facilitators, be mindful that individuals and groups are impacted by wider systems and structures of power. For example, think about how one's self efficacy is shaped by those in power in the education system, and how those in power in the education system are shaped by the systems of policies and legislation that govern the system. Further, also take time to reflect on how the TDF domains intersect with each other. For example, think about how the domains of skills, optimism, and identity intersect to create a person's unique experience.





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The Select Tool

Step 1. Categorize Barriers and Facilitators (page 3 to 8)

Categorize barriers/facilitators by the TDF domain they correspond to.

• For e.g., the barrier 'I don't know how to do x' would be categorized under the TDF domain of 'Knowledge':

TDF domain	Barriers/facilitators	Intervention Function
Knowledge	'I didn't know X existed."	 Education
(An awareness of the existence of something)		

Step 2. Identify and Prioritize Intervention Functions (page 9)

a) For each TDF domain identified in Step 1, highlight the row and the corresponding intervention functions in that row.

• For e.g., if the TDF domain of 'Knowledge' was identified in Step 1, you would highlight the following row:

TDF Domain	Coercion	Education	Enablement	Environmental restructuring	Incentivisation	Modelling	Persuasion	Restriction	Training
Knowledge		X							

b) Count the number of "x"s highlighted under each intervention function and enter this number in the last row of the table. This will help identify and prioritize intervention functions to target based on the number of times the intervention function shows up.

Step 3. Identify Implementation Strategies (page 10 to 14)

a) For each intervention function prioritized in Step 2, highlight the corresponding implementation strategy.

• For e.g., if the intervention function 'Education' was prioritized in Step 2, you would highlight the following :

Interventio n Function	Implementa tion Strategies	Definition	Level	Use Strategy (Yes/No?)	Target Audience 1:	Target Audience 2:
Education	Conduct educational meetings	Hold meetings involving program targets (e.g., providers, administrators, other organizational stakeholders, and community, patient/consumer, and family stakeholders) to improve knowledge about the ideal practice	Patient, Provider			

b) Consider whether or not you would use each highlighted strategy (Yes/No) by considering whether it is appropriate, feasible, affordable and cost-effective, equitable, sustainable, and likely to address the corresponding barrier/facilitator. Also, consider any unintended consequences of the intervention.

c) If you decide to use the strategy, define the primary and secondary target audience for the strategy.





Step 1. Categorize Barriers and Facilitators

Instructions:

Read the descriptions of each TDF domain and categorize barriers/facilitators by the TDF domain they correspond to.

TDF domain	Barriers/facilitators	Intervention Function
Knowledge (An awareness of the existence of something.)		EducationEnablementTraining
Cognitive & interpersonal skills (An ability to perform various mental activities associated with learning and problem-solving, as well as tactics used to interact with others effectively. Consider societal beliefs and context that influence what are considered 'normal' abilities.)		Education Enablement Training
Physical skills (A physical ability or proficiency influenced by the accessibility of the environment surrounding the individual.)		Enablement Training





TDF domain	Barriers/facilitators	Intervention Function
Memory, attention and decision processes (The ability to retain information, focus selectively on aspects of the environment and choose between two or more alternatives. Consider societal beliefs and context that influence what are considered 'normal' abilities and processes.)		Education Enablement Training
Behavioural regulation (Anything aimed at managing or changing objectively observed or measured actions. These can be individual or group level traditions or practices that help make or reinforce habitual behaviours.)		EducationEnablementTraining
Social/professional role (A coherent set of behaviours and displayed personal qualities of an individual in a social or work setting (e.g., the "role" of a physiotherapist.)		 Education Enablement Environmental restructuring Incentivisation Modeling Persuasion Coercion





TDF domain	Barriers/facilitators	Intervention Function
Identity (Identity encompasses the lived experience, memories, relationships, and values that create one's sense of self. This amalgamation creates a steady sense of who one is over time, even as new facets are developed and incorporated into one's identity. One's lived experience also interacts with wider systems and structures of power (e.g., media).		 Education Enablement Environmental restructuring Incentivisation Modeling Persuasion Coercion
Beliefs about capabilities (Acceptance of the truth, reality, or validity about an ability, talent, or facility that a person can put to constructive use. Beliefs about one's capabilities are impacted by external structures and systems (e.g., education system, gender norms.)		EducationInventivisationPersuasionCoercion
Optimism (The confidence that things will happen for the best or that desired goals will be attained. Optimism is influenced by cultural context.)		 Education Enablement Environmental restructuring Incentivisation Modeling Persuasion Coercion





TDF domain	Barriers/facilitators	Intervention Function
Intentions (A conscious decision to perform a behavior or a resolve to act in a certain way.)		EducationIncentivisationPersuasionCoercion
Goals (Mental representations of outcomes or end states that an individual wants to achieve.)		EducationIncentivisationPersuasionCoercion
Beliefs about consequences (Acceptance of the truth, reality, or validity about outcomes of a behaviour in a given situation. These beliefs are influenced by factors outside an individual.)		EducationIncentivisationPersuasionCoercion





TDF domain	Barriers/facilitators	Intervention Function
Reinforcement (Increasing the probability of a response by arranging a dependent relationship, or contingency, between the response and a given stimulus. Different individuals will prioritize different rewards/reinforcements over others.)		 Enablement Environmental restructuring Incentivisation Modeling Persuasion Coercion
Emotion (A complex reaction pattern, involving experiential, behavioural, and physiological elements, by which the individual attempts to deal with a personally significant matter or event.)		 Enablement Environmental restructuring Incentivisation Modeling Persuasion Coercion
Environmental context and resources (Any circumstance of a person's situation or environment that discourages or encourages the development of skills and abilities, independence, social competence, and adaptive behaviour. One's group membership (real or perceived) influences the specific benefits, privileges, disadvantages, and oppressions that they experience inside and outside the workplace.)		Environmental restructuring Enablement Restriction





TDF domain	Barriers/facilitators	Intervention Function
Social influences (Those interpersonal processes that can cause individuals to change their thoughts, feelings, or behaviours. Social processes can be real or perceived. They can be sourced from individual level (e.g., a manager), group levels (e.g., a professional working group), or societal levels (e.g., internalized racism).		Environmental restructuring Enablement Restriction





Step 2. Identify and Prioritize Intervention Functions

Instructions: The table below uses x's to show what intervention functions (across the top row) address which TDF domains (1st column of table)

- a) For each TDF domain identified in Step 1, highlight the row and the corresponding intervention functions in that row.
- b) Count the number of "x"s highlighted under each intervention function and enter this number in the last row. Count the number of "x"s highlighted under each intervention function and enter this number in the last row of the table. This will help identify and prioritize intervention functions to target based on the number of times the intervention function shows up.

this number in the last low of the table. This	Intervention Function								
TDF Domain	Coercion	Education	Enablement	Environmental restructuring	Incentivisation	Modelling	Persuasion	Restriction	Training
Knowledge		Х	Х						Х
Cognitive & interpersonal skills		Х	х						Х
Physical skills			х						Х
Memory, attention and decision processes		х	х						х
Behavioural regulation		Х	x						Х
Social/professional role	х	Х	х	х	х	Х	х		
Identity	х	Х	Х	х	х	Х	х		
Beliefs about capabilities	х	Х			х		х		
Optimism	х	Х	х	х	х	Х	х		
Intentions	х	Х			х		х		
Goals	х	Х			х		х		
Beliefs about consequences	х	Х			х		х		
Reinforcement	х		Х	х	х	Х	х		
Emotion	Х		Х	х	х	Х	Х		
Environmental context and resources			Х	х				Х	
Social influences			Х	х				х	
Total selected:									





Step 3. Identify Implementation Strategies

Instructions:

a) For each intervention functions prioritized in Step 2, highlight the corresponding implementation strategy.

b) Consider whether or not you would use each highlighted strategy (Yes/No) by considering whether it is appropriate, feasible, affordable and cost-effective, equitable, sustainable, and likely to address the corresponding barrier/facilitator. Also, consider any unintended consequences of the intervention.

c) If you decide to use the strategy, define the primary and secondary target audience for the strategy

Intervention Function	Implementation Strategies	Definition	Level	Use Strategy (Yes/No?)	Target Audience 1:	Target Audience 2:
Coercion	No strategies mapped by expert panel	Creating expectation of punishment or cost (e.g., Raising financial costs)	Patient, Provider, Organization			
Education	Conduct educational meetings	Hold meetings involving program targets (e.g., providers, administrators, other organizational stakeholders, and community, patient/consumer, and family stakeholders) to improve knowledge about the ideal practice	Patient, Provider			
Education	Distribute educational materials	Distribute educational materials (e.g., guidelines, manuals, and toolkits) in person, by mail, and/or electronically to improve knowledge about the ideal practice	Patient, Provider			
Enablement	Use of champions	Identify and prepare individuals to dedicate themselves to supporting, marketing and overcoming indifference or resistance related to implementing the ideal practice	Organization, Provider			





Intervention Function	Implementation Strategies	Definition	Level	Use Strategy (Yes/No?)	Target Audience 1:	Target Audience 2:
Enablement	Use a learning collaborative/community of practice (CoP)	Facilitate the formation of groups of providers or provider organizations, and foster a collaborative learning environment to improve implementation of the ideal practice; e.g., a CoP where groups of people with a common interest deepen their knowledge and expertise in this area by interacting on an ongoing basis.	System, Organization, Provider			
Enablement	Prepare patients/consumers to be active participants	Prepare patients/consumers to be active in their care - e.g., to ask questions about the ideal practice, and evidence behind the ideal practice	Patient, Provider			
Enablement	Public funding and contracting	Set system priorities to encourage implementation of the ideal practice by establishing government/service payer funding formulas, proposal requests and contracting for the ideal practice.	System			
Enablement	Alter payments to health workers	Change ways in which providers are paid for providing the ideal practice.	System			
Environmental restructuring	Reminders	Develop reminder systems to help providers recall information and/or prompt the performance of the ideal practice	Provider			
Environmental restructuring	Revise professional roles	Shift and revise roles among professionals who provide care, and redesign job characteristics to promote uptake of the ideal practice	Provider. System, Organization			





Intervention Function	Implementation Strategies	Definition	Level	Use Strategy (Yes/No?)	Target Audience 1:	Target Audience 2:
Environmental restructuring	Change record systems	Change records systems to allow better capturing of patient information and assessment of implementation or clinical outcomes related to the ideal practice; for example electronic patient records, or systems for recalling patients for follow-up or prevention e.g., immunization.	System, Organization			
Environmental restructuring	Change service sites	Change the setting where the ideal practice is provided; for e.g., home vs. healthcare facility, inpatient vs outpatient, specialized vs. non specialized facility, walk in clinics, medical day hospital, mobile units	System, Organization			
Environmental restructuring	Create new clinical teams	Change who serves on the clinical team, adding different disciplines and different skills to make it more likely that the ideal practice is delivered, or more successfully delivered	System Organization			
Incentivisation	Alter incentive/allowance structures	Work to incentivize or disincentivize the adoption and implementation of the ideal practice.	System, Organization			
Incentivisation	Change accreditation or membership requirements	Strive to alter accreditation standards so that they require or encourage use of the ideal practice. Work to alter membership organization requirements so that those who want to affiliate with the organization are encouraged or required to use the ideal practice	System, Organization			
Modelling	Model and simulate change	Have experts/leaders/respected colleagues model or simulate the ideal practice	Organization, Provider			





Intervention Function	Implementation Strategies	Definition	Level	Use Strategy (Yes/No?)	Target Audience 1:	Target Audience 2:
Modelling	Visit other sites	Visit sites that have been successful in implementing the ideal practice	Provider			
Modelling	Shadow other experts	Provide ways for designated individuals from the target stakeholders group(s) to directly observe other experienced people perform the ideal practice	Provider			
Persuasion	Identify and use local opinion leaders	Inform providers identified by colleagues as opinion leaders or "educationally influential" about the ideal practice in the hopes that they will influence colleagues to adopt it	Provider			
Persuasion	Use mass media	Use media to reach large numbers of people to spread the word about the ideal practice	System, Organization, Provider, Patient			
Persuasion	Conduct local consensus discussions	Engage local providers and other stakeholders in discussions about whether the chosen problem is important and whether the selected practice to address it is appropriate; e.g., agreeing on a clinical protocol to manage a patient group or adapting a guideline for a local health system.	Organization, Provider, Patient			
Persuasion	Audit and provide feedback	Collect and summarize performance data related to the ideal practice over a specified time period and give it to providers and administrators to monitor, evaluate, and modify behavior	Provider			
Persuasion	Mandate change	Have leadership declare the priority of the ideal practice and their commitment to seeing it implemented	System, Organization			





Intervention Function	Implementation Strategies	Definition	Level	Use Strategy (Yes/No?)	Target Audience 1:	Target Audience 2:
Restriction	Create or change credentialing and/or licensure standards	Create or change credentialing and/or licensure standards related to the ideal practice	System			
Restriction	Develop/alter scope of practice standards	Develop evidence-based policies that regulate what health professionals are able to do in their role, or alter existing scope of practice standards to include the ideal practice.	System			
Training	Work with educational institutions	Encourage educational institutions to train providers in the ideal practice	System			
Training	Use train-the-trainer strategies	Train designated providers or organizations so that they can train others in the ideal practice	Organization, Provider			
Training	Conduct educational outreach visits	Have a trained person (external to the setting/organization) meet with providers in their practice settings and educate them on how to perform the ideal practice	Provider			
Training	Conduct training	Train providers on how to perform the ideal practice in a "hands-on" manner	Provider			
Training	Provide clinical supervision	Provide clinicians with ongoing supervision focused on the ideal practice. Clinical supervisors who will supervise clinicians should also be trained in the ideal practice.	Provider			



References

- Cane, J., O'Connor, D., & Michie, S. (2012). Validation of the theoretical domains framework for use in behaviour change and implementation research. *Implementation Science*, 7(37), 1–17. https://doi.org/https://doi.org/https://doi.org/10.1186/1748-5908-7-37
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