Instruction sheet

How to complete the Intervention Scalability Assessment Tool

This guide is to support health system practitioners, researchers and policy decision makers conduct the assessment process and complete the Intervention Scalablity Assessment Tool (ISAT). The proposed process consists of three phases and steps. The steps are recommendations only and discretion will be required to modify each step according to individual context. In some cases, these steps may be combined in order to expedite the process if time is of the essence. Similarly, steps could be expanded or additional discussions held if necessary.

Proposed phases and steps for completing the ISAT and conducting the assessment process

PHASE 1: Preparation	**Step 1:** Prepare for ISAT process
	Step 2: Pre-fill ISAT ready for distribution and review
PHASE 2: Assessment	**Discussion 1:** Review and finalise scores for Part A & B Domains
	Discussion 2 (if required): Any additional items not completed in previous discussion and plan for final report
PHASE 3: Reporting	**Step 3:** Develop final report, provide opportunity for review and finalise with recommendation

PHASE 1: PREPARATION

The preparation phase is critical for completing the ISAT and its associated processes efficiently. This phase assumes that one or several interventions are being considered for scale-up and the ISAT is being used to assess the intervention's readiness or suitability for scale-up.

STEP 1: Prepare for ISAT process

As part of this preparation process, where possible, it would be prudent to assemble a team or range of stakeholders that will be involved in the process. These team members or stakeholders may already exist in the form of current governing groups, Steering Committees, Executive teams or any other formal group consisting of a variety of stakeholders who are able to consider the scalability of interventions being put forward for scale-up. Where this group does not exist, convene a group from program managers (of intervention), academics, current or potential delivery organisation representatives, local health promotion representatives, funding body representatives, representatives that may be involved in the scale-up process. Resource permitting, nominate a 'coordinator' to oversee and coordinate the ISAT process including scheduling and facilitating discussions; document feedback and revise ISAT following discussions; collate and coordinate the final ISAT reporting process.

> **HINT:** It is entirely possible for the ISAT process to be conducted by a smaller number of stakeholders, however, this may limit the range and variability of perspectives that would enrich the process.

STEP 2: Pre-fill ISAT ready for distribution and review

Complete as many sections of the ISAT as possible using a range of existing sources before distributing to the wider team. Once all sections are filled, invite team members to make comments and corrections. Collate all responses and revise the ISAT accordingly and distribute for the assessment process. As part of this review process, team members may independently assign scores for the various domains based on their knowledge and information contained in the ISAT before the next phase.

> **HINTS:** The scoring exercise will be one of the main outcomes of the assessment process.
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> This 'pre-completion' exercise will help identify gaps in information within the ISAT that can be flagged for input by others in the team or a separate process for filling those gaps can begin.

PHASE 2: ASSESSMENT

The assessment process proposed below can be modified according to individual contexts. While face-to-face discussions are recommended for the scoring and assessment of the domains, it is entirely possible for this process to be conducted using alternative formats such as phone, video-conferencing, email or a combination of these methods.

For a face-to-face process, while we propose that at least one discussion session is undertaken to complete both parts of the ISAT, it is possible for this to be undertaken in as many sessions as needed or if multiple sessions are required, it is recommended to keep sessions close together to build momentum before the final reporting stage. However, sufficient time between discussions should be allowed for information gathering opportunities if required. The timeframe required for each discussion session would be dependent on individual needs, however these sessions should be conducted in a sufficiently flexible manner to allow for robust discussions to take place.

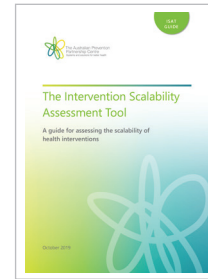| Discussion 1: Review and finalise scores for Part A & B Domain	Discussion 2 (if necessary): Resolve other items
The objective of this meeting is to discuss and assign scores for the Part A and B domains of the ISAT. Discussions should focus on reviewing the information in each of the domains and to agree on a final score for each domain in Parts A and B. Where possible, the assessment team should also make a final recommendation, selecting one of three recommendations, on the scalability of the intervention considered.	Any additional items not completed in previous discussion and plan for final report

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PHASE 3: REPORTING

Step 3: Develop final report, provide opportunity for review and finalise with recommendation

After completing the assessment process, a final ISAT report on the outcomes of the assessment process should be produced and include the final scores agreed upon by team members resulting from the assessment process. It is valuable to document the causes of any significant variations in scores for future reference. This final report can then be sent to any additional committees, funding agencies or decision-makers for further consideration.
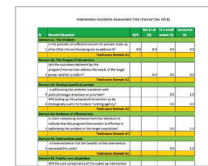
Related resources

The Intervention Scalability Assessment Tool (ISAT):
A guide for assessing the scalability of interventions

The Intervention Scalability Assessment Tool (ISAT):
Scoring Sheet

Visit the Prevention Centre's website at preventioncentre.org.au
to access further resources around implementation and scale up.

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