Below are strategies you could consider using to improve different categories of PRISM

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| PRISM category | Possible strategies to improve |
| *Patient/Community* P*erspective of* **Program Characteristics** | * Change how the program is framed or presented * Adapt the program (or guideline) to patients/community recipients * Create and communicate a relative advantage of using this program compared to alternatives (e.g., time saved, quality of life) * Provide opportunities for patients to make positive steps regardless of stage of change * Reduce barriers to using or accessing the program (e.g., complexity, high costs) |
| *Organizational* P*erspective of* **Program Characteristics** | * Adapt the program (or guideline) to the setting * Integrate as part of standard workflows * Create and communicate a relative advantage of using the program compared to alternatives (e.g., time saved, alignment with business imperative) * Engage implementation partners to increase program alignment with perspectives and priorities of opinion leaders in your setting * Reduce barriers to staff using or accessing the program (e.g., complexity, high costs) |
| *Patient/Community* **Recipient Characteristics** | * Adapt the program activities to fit the priorities, preferences, culture, demographic, historical and other characteristics of your participants (e.g., patients/community recipients) * Provide training, technical assistance, or other support to patient/community recipients to increase demand and skills in engaging with the program * Engage those who are directly or indirectly impacted for advice, especially those groups who have historically experienced inequities * Conduct pilot tests of activities and materials with representativeness of key groups |
| *Organizational* **Recipient Characteristics** | * Change modifiable aspects of the setting to fit the program needs * Engage organizational champions and leaders who can communicate the program and expectations to participants * Provide training, technical assistance, and other support to staff * Adapt the program to fit the priorities, preferences, culture, workforce, historical and other characteristics of your organization and staff |
| **Implementation & Sustainability Infrastructure** | * Establish the program as part of standard processes and procedures (e.g., supervision, coordination, delivery) * Use audit and feedback or some type of automated periodic data reporting to monitor and encourage uptake, implementation and sustainability * Engage leadership and others for ongoing support (e.g., commitment, resource allocation) * Invest in capacity building efforts (e.g., train the trainer) |
| **External Environment** | * Align with reimbursement metrics and policies * Refer patients or recipients of the program to key community resources (e.g., WIC, YMCA, Quitline) * Create alignment with public health priorities (e.g., Healthy people 2030), policy statements and regulatory issues * Engage key players (e.g., law enforcement, community advocates, policy makers) |

**Below are additional resources for information regarding implementation strategies**

1. Some possible implementation strategies corresponding to different phases/stages of a project are described in the original PRISM paper (*see Table 4*):

Feldstein AC, Glasgow RE. A practical, robust implementation and sustainability model (PRISM) for integrating research findings into practice. Jt Comm J Qual Patient Saf. 2008;34:228.

1. A paper summarizing 73 different types of implementation strategies (*see Table 1*):

Waltz et al. Use of concept mapping to characterize relationships among implementation strategies and assess their feasibility and importance: results from the Expert Recommendations for Implementing Change (ERIC) study. Implement Sci. 2015;10:109