## Standards for Reporting Implementation Studies: the StaRI checklist for completion

The StaRI standard should be referenced as: Pinnock H, Barwick M, Carpenter C, Eldridge S, Grandes G, Griffiths CJ, Rycroft-Malone J, Meissner P, Murray E, Patel A, Sheikh A, Taylor SJC for the StaRI Group. Standards for Reporting Implementation Studies (StaRI) statement. *BMJ* 2017;356:i6795



The detailed Explanation and Elaboration document, which provides the rationale and exemplar text for all these items is: Pinnock H, Barwick M, Carpenter C, Eldridge S, Grandes G, Griffiths C, Rycroft-Malone J, Meissner P, Murray E, Patel A, Sheikh A, Taylor S, for the StaRI group. Standards for Reporting Implementation Studies (StaRI). Explanation and Elaboration document. *BMJ Open* 2017 2017;7:e013318

Notes: A key concept of the StaRI standards is the dual strands of describing, on the one hand, the implementation strategy and, on the other, the clinical, healthcare, or public health intervention that is being implemented. These strands are represented as two columns in the checklist.

The primary focus of implementation science is the implementation strategy (column 1) and the expectation is that this will always be completed.

The evidence about the impact of the intervention on the targeted population should always be considered (column 2) and either health outcomes reported or robust evidence cited to support a known beneficial effect of the intervention on the health of individuals or populations.

The StaRI standards refers to the broad range of study designs employed in implementation science. Authors should refer to other reporting standards for advice on reporting specific methodological features. Conversely, whilst all items are worthy of consideration, not all items will be applicable to, or feasible within every study.

		Reported on		Reported on				
Checklist item		page #	Implementation Strategy	page #	Intervention			
			"Implementation strategy" refers to how the		"Intervention" refers to the healthcare or public			
			intervention was implemented		health intervention that is being implemented.			
Title and abstract								
Title	1	Title	Identification as an implementation study, and description of the methodology in the title and/or keywords					
Abstract	2	Abstract	Identification as an implementation study, including a description of the implementation strategy to be tested, the evidence-					
			based intervention being implemented, and defining the key implementation and health outcomes.					
Introduction								
Introduction	3	Background	Description of the problem, challenge or deficiency in healthcare or public health that the intervention being implemented					
			aims to address.					
Rationale	4	NA	The scientific background and rationale for the	Title and	The scientific background and rationale for the			
			implementation strategy (including any	Methods	intervention being implemented (including			

			underpinning theory/framework/model, how it is		evidence about its effectiveness and how it is		
			expected to achieve its effects and any pilot work).		expected to achieve its effects).		
Aims and objectives	5	Methods	The aims of the study, differentiating between implementation objectives and any intervention objectives.				
Methods: descr	ription						
Design	6		The design and key features of the evaluation, (cross referencing to any appropriate methodology reporting standards) and any changes to study protocol, with reasons				
Context	7		The context in which the intervention was implemented. (Consider social, economic, policy, healthcare, organisational barriers and facilitators that might influence implementation elsewhere).				
Targeted 'sites'	8		The characteristics of the targeted 'site(s)' (e.g locations/personnel/resources etc.) for implementation and any eligibility criteria.	Throughout (U5 in Rwanda)	The population targeted by the intervention and any eligibility criteria.		
Description	9		A description of the implementation strategy	Extended data Tables 1a and b	A description of the intervention		
Sub-groups	10		Any sub-groups recruited for additional research tasks, and/or nested studies are described				
Methods: evalu	ation						
Outcomes	11		Defined pre-specified primary and other outcome(s) of the implementation strategy, and how they were assessed. Document any pre-determined targets	NA	Defined pre-specified primary and other outcome(s) of the intervention (if assessed), and how they were assessed. Document any predetermined targets		
Process evaluation	12		Process evaluation objectives and outcomes related to the mechanism by which the strategy is expected to work				
Economic evaluation	13		Methods for resource use, costs, economic outcomes and analysis for the implementation strategy	NA	Methods for resource use, costs, economic outcomes and analysis for the intervention		
Sample size	14	NA	Rationale for sample sizes (including sample size calculations, budgetary constraints, practical considerations, data saturation, as appropriate)				
Analysis	15	Methods	Methods of analysis (with reasons for that choice)				
Sub-group analyses	16	NA	Any a priori sub-group analyses (e.g. between different sites in a multicentre study, different clinical or demographic populations), and sub-groups recruited to specific nested research tasks				

Results							
Characteristics	17		Proportion recruited and characteristics of the recipient population for the implementation strategy	NA	Proportion recruited and characteristics (if appropriate) of the recipient population for the intervention		
Outcomes	18		Primary and other outcome(s) of the implementation strategy	Results: outcomes	Primary and other outcome(s) of the Intervention (if assessed)		
Process outcomes	19		Process data related to the implementation strategy mapped to the mechanism by which the strategy is expected to work				
Economic evaluation	20		Resource use, costs, economic outcomes and analysis for the implementation strategy	Not applicable	Resource use, costs, economic outcomes and analysis for the intervention		
Sub-group analyses	21		Representativeness and outcomes of subgroups including those recruited to specific research tasks				
Fidelity/ adaptation	22		Fidelity to implementation strategy as planned and adaptation to suit context and preferences	Results (not found)	Fidelity to delivering the core components of intervention (where measured)		
Contextual changes	23	NA	Contextual changes (if any) which may have affected outcomes				
Harms	24	NA	All important harms or unintended effects in each group				
Discussion							
Structured discussion	25	Discussion	Summary of findings, strengths and limitations	Summary of findings, strengths and limitations, comparisons with other studies, conclusions and implications			
Implications	26		Discussion of policy, practice and/or research implications of the implementation strategy (specifically including scalability)	Discussion	Discussion of policy, practice and/or research implications of the intervention (specifically including sustainability)		
General							
Statements	27	Declarations section	Include statement(s) on regulatory approvals (including, as appropriate, ethical approval, confidential use of routine data, governance approval), trial/study registration (availability of protocol), funding and conflicts of interest				