

Scalability Assessment Tool (SAT) Checklist




The scalability assessment tool is based on Everett Roger's Diffusion of Innovation. The tool enables a project team or individual to assess if the intervention/innovation/improvement is ready for adoption and spread.




Here are the main areas the tool covers:

- A. Is your intervention credible to NHS adopters?
- B. How observable are the interventions outcomes & results?
- C. How relevant is the intervention?
- D. Does the intervention have relative advantage over existing practices?
- E. How easy is the intervention to transfer and adopt?
- F. How testable is the intervention?
- G. Is there a sustainable source of funding?

Following the assessment, the team can focus on improving areas where it is suggested scaling up harder and/or focus on the strengths, where scaling up may be easier, when planning for adoption and spread.

Please tick all that apply to your project and rate ease of scaling up.

Categories	 ← Scaling up is easier	 Scaling up is harder → 
A. Is your intervention credible to NHS adopters?	1 <input type="checkbox"/> Based on sound evidence	<input type="checkbox"/> Little or no solid evidence
	2 <input type="checkbox"/> Independent external evaluation	<input type="checkbox"/> No evaluation at all
	3 <input type="checkbox"/> There is evidence that the model has been tested by early adopters and can work in settings outside the original context.	<input type="checkbox"/> The model has not yet been tested elsewhere in different contexts.
	4 <input type="checkbox"/> The model is supported by eminent individuals, influencers and institutions	<input type="checkbox"/> The model is supported by few or no eminent individuals and institutions
B. How observable are the interventions outcomes and results?	5 <input type="checkbox"/> The impact is very visible to casual observation; tangible	<input type="checkbox"/> The impact is not very visible; not easily communicated to public
	6 <input type="checkbox"/> Clearly associated with the intervention	<input type="checkbox"/> Not clearly associated with the intervention
	7 <input type="checkbox"/> Evidence and documentation exists with clear emotional appeal	<input type="checkbox"/> Currently little or no evidence with clear emotional appeal
C. How relevant is the intervention?	8 <input type="checkbox"/> Addresses an objectively significant, persistent problem	<input type="checkbox"/> Addresses a problem which affects few people or has limited impact
	9 <input type="checkbox"/> Addresses an issue which is currently high on the policy/political or public health needs led agenda	<input type="checkbox"/> Addresses an issue which is low or invisible on the policy/political or public health agenda

Categories		← Scaling up is easier		Scaling up is harder →	
	10	Addresses a need which is sharply felt by potential beneficiaries, who will act as a voice or champion for the intervention creating a market 'pull'		Addresses a need which is not sharply felt by potential beneficiaries and is unlikely to be championed or to create a market 'pull'	
D. Does the intervention have relative advantage over existing practices?	11	Current solutions for this issue are considered inadequate, costly or unreliable		Current solutions are considered adequate, good value and reliable.	
	12	Superior effectiveness to current solutions is clearly established		Little or no objective evidence of superiority to current solutions	
	13	Superior effectiveness to other innovative models established		Superior effectiveness to other innovative models not established	
	14	Implementable within existing systems, infrastructure, costs and human resources		Requires new or additional systems, infrastructure, costs or human resources	
	15	Contains a few components easily added onto existing systems		Is a complete or comprehensive package of multiple components	
	16	Small departure from current practices and behaviours of target population		Large departure from current practices and behaviours for target population	
E. How easy is the intervention to transfer and adopt?	17	Small departure from current behavioural Practices, norms and culture of adopting organisation(s)		Large departure from current behavioural Practices, norms and culture of adopting organisation(s)	
	18	Few decision makers are involved in agreeing to adoption of the model		Many decision makers are involved in agreeing to adoption	
	19	Demonstrated effectiveness in diverse and multiple organisational settings		Demonstrated effectiveness only in original setting	
	20	The model is not particularly value or process intensive		Process and/or values are an important component of the model	
	21	Low technical sophistication of the components and activities of the model		High technical sophistication of the components and activities of the model	
	22	Key innovation is a clear and easily replicated technology e.g. vaccine without the need for complex adaptation		Focus of the model is not a technology, or is an innovation that requires complex adaptive change and is not easily replicated	
	23	Low complexity; simple with few components and easily added on to existing systems		High complexity with many components; integrated package	
	24	Includes little input for implementation, ongoing supervision and monitoring		Includes substantial input for implementation, ongoing supervision and monitoring.	
F. How testable is the intervention?	25	Able to be tested by users on a limited scale		Unable to be tested without complete adoption at a large-scale	
G. Is there a sustainable source of funding?	26	Superior cost- effectiveness to existing or other solutions clearly established		Little evidence of superiority in terms of cost-effectiveness	
	27	Requires low level commitment of funds and or organisational capacity to test and sustain		Requires a high level of funds and or organisational capacity to test and sustain	
	28	The intervention itself has a built-in funding mechanism (e.g. user fees) or can demonstrate a return on investment.		No built-in funding; dependent on external funding source	
Total number of checks					