Reviewer’s report

Title: Building capacity for evidence informed decision making in public health: a case study of organizational change

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Reviewer: Cory Neudorf

Reviewer’s report:

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Reviewer’s report

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- Major Compulsory Revisions

none

- Minor Essential Revisions

This is an excellent article that will contribute to the literature in public health, and the use of EIDM overall, but I would make 2 broad comments where minor changes could make it more useful to the public health community, and make it clearer.

First, the intent of this article is stated at the beginning “to explore and inform the early implementation of one public health organization’s long-term strategic initiative to build organizational and staff capacity for evidence informed decision making (EIDM)”. The design appears to be essentially a pre – post comparison over 2 to 3 years to see how this approach was implemented and how much impact it had on the organization in this first few years of a longer strategic plan spanning 10 years. The data collection methodology was described as using the same set of questions for both the pre and post surveys, supplemented by a document review from the two time periods to objectively quantify the extent that EIDM was evident in documents between the two periods. Later in the article, they state that they switched the emphasis of the 2010 interview to look more at the process of organizational change to promote EIDM. The remainder of the article focuses on the assessment of key themes that emerged in the 2 time periods assessed in an attempt to describe critical success factors in making EIDM standard practice, and increasing capacity for its use. If this is indeed the main purpose of the article, it should be stated more clearly in both the abstract and the methods section. Currently, the methods describing the document review leads one to expect an analysis of the extent that EIDM actually informed or drove program and policy decisions, while in fact, it turned out to be more of a description of whether evidence was included in the documents, with no assessment as to whether decisions made were more consistent with that
evidence, or whether the evidence drove the subsequent decisions more than other factors in the decision making. It may be premature to assess this aspect of the process after only 2 or 3 years, but then this should be stated up front as well.

Second, on page 10 and 12, the author refers mostly to the CEO, and occasionally to the MOH. It appears they are talking about the same person, but it is not clear. If it is the same person, it would be best to explain this, and then use one term consistently then on.

Periodically throughout the article, the authors refer to the need for in-house supports and services:

- On page 13 and periodically thereafter, the statement is made that the physical library is not necessarily the most important, but rather the “people, interaction and service”.

- On page 18, the authors refer to the knowledge management system as being useful at the local level, then again on page 24, they state that it is “not enough to have access to networks or academics to help find and obtain research for decision making.” “You need technology and in-house information specialists”

If this is indeed the case, the later statements about the need for all local public health units needing not only public health staff capacity, but also access to their own library services does not necessarily follow and is not necessarily realistic. It would be better, and serve the cause more, if the authors bridged the analysis of this individual case study to the learnings for other health units, large and small, by pointing to the potential for some of these support services being made available in a virtual manner to multiple public health units or RHAs. It may be that the education of staff in the methods of EIDM and the support of the senior leaders, and the other themes that emerged from the analysis are all true and to varying degrees generalizable, but the article would be better if it pointed to the potential for a network of such units across a province, or country, sharing results and learnings with one another (to reduce duplication, and get more done as a collective), and providing some of these services to smaller units that cannot afford them.

Discretionary Revisions

As I do not know the overall guidelines for the journal this is being aimed at, I do not know if there are any length restrictions to consider. If so, and even if these are not necessarily that important for an online journal, the article is a bit lengthy at present. It reads a bit more like an evaluation report summary than a research article, since there are many examples given that relate to the same point, but do not necessarily add a lot of value to the end result...useful to the unit being studied, but not necessarily to the general audience or to make the results any stronger. There is also fair bit of repetition from point to point that could be streamlined if there was a desire to shorten it somewhat to make it more accessible to a wider audience (since at its current length, it is less likely that people will read all of it).
Level of interest: An article of outstanding merit and interest in its field

Quality of written English: Acceptable

Statistical review: No, the manuscript does not need to be seen by a statistician.

Declaration of competing interests:
I declare that I have no competing interests