Reviewer’s report

Title: Development and formative evaluation of the e-Health Implementation Toolkit (e-HIT).

Version: 2 Date: 24 July 2010

Reviewer: Richard E Scott

Reviewer’s report:

Major Compulsory Revisions:

1. In the paper:
   1a. Description of e-HIT development stated the theoretical and empirical findings “were grouped into three main categories: the context; the intervention; and the workforce”. Greater explanation of how (and why) these three categories either emerged from the data or were chosen would be helpful to the reader.

2. In regards to the Excel tool:
   2a. There is no mechanism to alert to an inappropriate entry. I manually entered 45 for one score, and it was accepted (the summary report simply identified this as ‘10’ for the score when it should have been simply 4. It was, however, identified as 45 in the ‘Summary of Comments’ and so presumably would be noticed.
   2b. I had difficulty using the sliding scale in the Excel example (non-responsive), but this may not be the case in any web-based version.

Minor Essential Revisions

1. The paper manuscript.
   I felt the paper was well written and have no comments.

2. In regard to the tool, as exemplified by the Excel spreadsheet; it is simple, clear, easy to follow, and naturally progressive. The explanatory notes added to cells were straightforward and should prove helpful.

   However, there are still several typographical or grammatical errors present, and the overall tone seems (to me) to be too simplistic / condescending in places. Most of the examples below appeared early on in the tool (it improved):

   2a. Introduction; What is the e-HIT; “… identify the the strengths …” - delete one of the ‘the’s’!!
   2b. Introduction; When should the e-HIT be used; “… the implementation planning and implementation process …” (awkward; perhaps re-phrase – “... the planning and process of implementation ...”.

   2c. Background; The Overall Context; “This includes considerations at national level like the Connecting for Health programme, nationally set targets or priorities, and at organisational level such as existing leadership, locally
determined targets, business plans and budgets.”

2d. Background: what I assume to be the caption for the figure appears to be mis-located or incomplete (at least in the version I opened).

2e. Instructions. Step-5: Next Page. “... Provide any supporting evidence to support your judgement.” Perhaps: Provide any supporting evidence for your judgement.”

2f. Empirical and Theoretical base to the e-HIT. Second box. Multiple references to “link when available” – this will have to be addressed before publication.

2g. In the Excel spread sheet in the report section, some reformatting of content of boxes is required. The contents of several boxes overlapped or were crowded.

Discretionary Revisions.

1. Consideration might be given to changing the title to read: ‘Development, formative evaluation, and use of the e-Health Implementation Toolkit (e-HIT).’ I would hesitate to say ‘application of’ instead of ‘use of’ (the tool), but I feel there is a need to make it clear to readers that they will see the paper provides some introductory guidance about use of the tool in addition to the development and formative evaluation. However, the paper does not describe ‘application’ of the tool in detail.

General comments:

The concept is excellent. Such a tool has been badly needed for some time as most individuals charged with responsibility for implementing e-health solutions are not e-health professionals. The authors are honest in indicating it is a ‘sensitising tool’ rather than a specific, detailed guide (which I do not believe would work anyway). Whether or not this is ‘the’ tool is debatable, but I believe this to be a very good start – practical and simple to use. Although purported to be generic (in terms of the type of e-health solution, organisation, and location), this will really need to be assessed by people simply trying it and reporting their successes, failures, and proposed enhancements (again, as noted by the authors). Perhaps of greater need - not mentioned by the authors - is examining the potential for adopting or adapting the tool to other countries, as this is clearly focussed on the NHS and therefore currently limits its utility (a current limitation).

It has also been clearly stated that there are no restrictions in terms of access to and use of this tool.

**Level of interest:** An article of importance 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.