Reviewer’s report

Title: A 10 year (2000-2010) systematic review of interventions to improve quality of care in hospitals

Version: 1 Date: 14 February 2012

Reviewer: Adrian GK Edwards

Reviewer’s report:

Thank you for asking me to re-review this paper. I noted the point by point explanation of how the authors have / have not addressed the comments and reasons for it. There have been many improvements in the clarity of the paper.

However, I still worry about two major aspects. One concerns the inclusion criteria, and the ability of the search process to identify potentially relevant studies. I am concerned that there could be numerous interventions / studies out there that have the essential features of quality improvement(s), but which would not have been found by the search because the titles didn’t mention Quality etc; if the essence of the improvement attempts is that of quality, then I think it is still relevant to the review, even if it is not set out as a (labelled) QI project. As before, the interpersonal care studies could easily overlap with numerous communication skills and attitudinal development studies, and experience from these would be relevant understanding how to improve quality in hospital care.

However many studies are / are not included, I also still feel that we need to know how valid / credible these studies are, and how much weight of evidence there is from the designated studies. I’m sorry I don’t accept the authors’ explanation about why it was not possible to undertake methodological appraisal. The authors note differences about GRADE criteria, and the heterogeneity of studies, but we can still undertake an assessment of methodological rigour without committing to meta-analytic synthesis of data / effects. The authors have identified that they undertook an analysis based on PICO, but that is totally different from method appraisal; it is simply a way of structuring the data extraction around the nature of interventions, populations and possible outcomes. There are numerous appraisal checklists for different designs (STROBE for Observational, Cochrane Risk of bias for RCTS, CASP for qualitative etc etc) that would be potentially suitable to apply to individual studies (differernt checklists to different designs) and judge collectively whether the range of studies included was valid, reliable, or had significant weaknesses. At the moment we simply don’t know whether the included studies were of any rigour or not.

So, as before, I recognise that the authors have done a lot of work here, sifting through abstracts and studies, but to make this a valid review of the existing literature, I’m sorry I think there are still two major amendments needed to be sure about the importance of the included evidence.
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:
None